



Newark EMA HIV Health Services Planning Council

Request for Bids

United Way of Greater Union (UWGUC), on behalf of the Newark EMA HIV Health Services Planning Council (hereafter "the Planning Council"), seeks consultants to support the Planning Council in the development of an **Epidemiological Profile**, a **Full Assessment of the Administrative Mechanism**, and the completion of a **Needs Assessment Update**.

UWGUC will receive bids until the close of business on January 18, 2020. Due to COVID-19 restrictions, bids should be emailed to Tania.Guaman@uwguc.org or mailed to UWGUC 33 West Grand Street, Elizabeth NJ 07202, to the attention of Tania Guaman. Bids that are not received by January 18, 2020 will not be considered. In-person or fax bids will not be accepted.

Bid results will be reviewed and considered by the Executive Committee of the Planning Council for funding and the selected vendor will be notified on January 25, 2020.

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A. Background

The Ryan White Comprehensive AIDS Resources Emergency (CARE) Act was enacted by Congress in 1990 as a response to the growing HIV epidemic, and the need to improve the availability and quality of healthcare for low-income, uninsured, and underinsured people living with HIV/AIDS (PLWHA). The law established funding for Ryan White programs called “Parts” that are administered through the USDHHS-Health Resources and Services Administration's HIV/AIDS Bureau (HRSA/HAB). It is the largest federally-funded program for PLWHA, third only to Medicaid and Medicare as a source of HIV health care and treatment.

Ryan White Part A grant awards are issued annually to eligible metropolitan areas (EMAs) and transitional grant areas (TGAs) that are most disproportionately impacted by HIV. In New Jersey, the Newark EMA (comprised of Essex, Union, Morris, Sussex, and Warren counties) serves the largest number of PLWHA in the state. Newark’s public health agency, the Department of Health and Community Wellness's Ryan White Unit (RWU) serves as the Recipient of the grant, providing day-to-day management and program oversight.

As a subcontractor with the City of Newark, UWGUC provides logistical and administrative support to the Planning Council. Two designated staff assist the Planning Council to carry out its legislative responsibilities and to operate effectively as an independent planning body that works in partnership with the recipient.

The Planning Council is a federally required body responsible for setting priorities and funding resource allocations for HIV/AIDS treatment for the covered counties. Based on the Planning Council’s recommendations, the Recipient subcontracts with local agencies to provide medical and support services for PLWHA.

B. Scope of Work

1. Needs Assessment Update

The Needs Assessment is comprised of the following components:

- **Data on the number of HIV/AIDS cases:** Epidemiologic data indicating the number and characteristics of PLWHA in the Newark EMA who have been diagnosed with HIV.
- **Assessment of service needs and gaps of PLWHA in and out of care, including barriers to obtaining these services:** This information can be obtained through comorbidity and socioeconomic data and such methods as surveys, focus groups, community meetings, and individual interviews.
- **Unmet Needs and Service Gaps that Ryan White Program Should Address:** Estimated number of people in the Newark EMA who know they are living with HIV but are not receiving regular HIV-related primary medical care.
- Estimate of the number of PLWHA in the Newark EMA who are **living with HIV but have not been diagnosed**, which is usually calculated using national estimates of HIV positive but unaware from the Centers for Disease Control and Prevention (CDC). The assessment includes exploring which subpopulations are most likely to be unaware of their status.

For additional information, please refer to <https://targethiv.org/sites/default/files/supporting-files/PlanningCHATT-Module4-QRH4.1.pdf>

2. HIV epidemiologic profile

Based on NJDOH HIV annual surveillance data for the Newark EMA area, the epidemiologic profile is designed to:

- provide a thorough description of HIV among the various populations (overall and subpopulations) in terms of sociodemographic, geographic, behavioral, and clinical characteristics;
- describe the current status of persons with HIV infection in the service area and provide some understanding of how the HIV distribution may look in the future;
- identify characteristics of the general population and of populations who are living with, or at high risk for, HIV in defined geographic areas and who need primary and secondary prevention or care services; and
- provide information required to conduct needs assessments and gap analyses.

For additional information, please refer to

https://www.cdc.gov/hiv/pdf/guidelines_developing_epidemiologic_profiles.pdf

3. Full Assessment of the Administrative Mechanism (AAM)

Topics covered in the AAM report include collection and analysis of the following data:

- The Recipient's procurement process for RWHAP services—including outreach to potential new service providers (“subrecipients”), dissemination of the Request for Proposals (RFP), determination of the number of applications received and funded, and description of the review process for proposals to provide services (including the use of an objective review panel and the composition of that panel, and the criteria used in selection of subrecipients as service providers).
- Contracting—including the length of time between Notice of Grant Award to the Recipient and completion of fully executed subcontracts with service providers/subrecipients.
- Reimbursement of subrecipients—including the monthly reporting and invoicing process and the length of time between the Recipient's (or administrative agency's) receipt of an accurate invoice with required documentation and issuance of a reimbursement check to the provider, as well as obstacles to timely reimbursement.
- Use of funds—whether contracting and expenditure of Part A funds are consistent with allocations made by the Planning Council, and the proportion of formula and supplemental Part A funds that are expended by the end of the program year. The Planning Council needs this information for the Letter of Assurance that must be included each year in the Part A application.

*A full assessment will require a comprehensive approach that takes into consideration both the Recipient and subrecipient perspectives. For additional information, see https://targethiv.org/sites/default/files/supporting-files/module7-QRH_7.2.pdf

C. Activity Schedule

All Bidders shall provide a preliminary description of the proposed work method and schedule, including drawings and charts, as necessary.

D. Budget and Budget Justification

Contract funds may be used for costs of project-related travel to and from monthly meetings, communications, data collection and analysis, presentations, written reports, and supplies.

E. Award Criteria

UWGUC shall award the contract to the successful Bidder. This will be the Bid that meets the qualification criteria and whose Bid has been determined to be substantially responsive to the bidding document at the lowest evaluated cost.

F. Award Type and Delivery Date

The work for these deliverables will start in January 2021 and continue until July 2022. Funding will be provided in the form of a contract, contingent upon funding availability.

G. Notification of Award

The notification will specify the sum that will be paid to the Consultant in consideration of the execution of the Agreement. The Contract Award Notice will be published on UWGUC's and the Planning Council's websites with free access.

For more information about the Planning Council, please visit the webpage at www.nemaplanningcouncil.org.