



September 23, 2021

Dear Potential Applicant:

You are invited to submit an application to the Pennsylvania Department of Health in accordance with the enclosed Request for Applications (RFA) #67-126.

A pre-application conference will be held via Microsoft Teams on **October 14, 2021**, from 2:00 to 4:00 p.m. EST. Potential applicants can join via Microsoft Teams by clicking on this link [Click here to join meeting](#) or by phone at 267-332-8737. The conference ID is 953 288 171#. If attending by phone, any content shown on Teams call screen will not be visible. Applicant attendance is optional.

All questions regarding this RFA must be directed by e-mail to [RA-DHCBHCP@pa.gov](mailto:RA-DHCBHCP@pa.gov), no later than 12:00 p.m. on **October 7, 2021**. All questions must include the specific section of the RFA about which the potential applicant is questioning. Answers to all questions will be posted at [www.emarketplace.state.pa.us](http://www.emarketplace.state.pa.us). Click on 'Solicitations' and search for the above RFA number.

Please submit one application, (Part 2 of this RFA) by email to [RA-DHHEALTH DEPT DOC@pa.gov](mailto:RA-DHHEALTH DEPT DOC@pa.gov). Applications must be received no later than 1:30 p.m. on **October 28, 2021**.

**LATE APPLICATIONS WILL NOT BE ACCEPTED REGARDLESS OF THE REASON.**

Type "APPLICATION ENCLOSED RFA #67-126 as the subject line of your e-mail submission.

We expect that the evaluation of applications and the selection of Grantees will be completed within eight weeks of the submission due date.

Sincerely,

Lori Diehl  
Director  
Office of Procurement

Enclosure

# Request for Application

## Community-Based Health Disparities Program

RFA Number  
67-126

Date of Issuance  
September 23, 2021

Issuing Office: Pennsylvania Department of Health  
Office of Procurement

Email: [RA-DHHEALTH\\_DEPT\\_DOC@pa.gov](mailto:RA-DHHEALTH_DEPT_DOC@pa.gov)

RFA Project Officer: Dawn Spero  
Pennsylvania Department of Health  
Primary Care Office

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Any Grant Agreement resulting from this RFA will include certain standard terms and conditions, which will either be attached as paper appendices or incorporated by reference and may be found at <http://www.health.pa.gov/vendors>. These terms and conditions are listed below:

- Payment Provisions (Rev. 8/21)
- Program Specific Provisions
- Standard General Terms and Conditions (Rev. 2/15)
- Audit Requirements (Rev. 7/13)
- Commonwealth Travel and Subsistence Rates (Rev. 4/12)
- Federal Lobbying Certification and Disclosure (Rev. 12/05)
- Pro-Children Act of 1994 (Rev. 12/05)

# PART ONE

## **Community-Based Health Disparities Program**

### General Information

## **A. Information for Applicants**

Coronavirus disease 2019 (COVID-19) has disproportionately affected populations placed at higher risk and who are medically underserved, including racial and ethnic minority groups, and people living in rural communities who are at higher risk of exposure, infection, hospitalization, and mortality. Additionally, racial and ethnic minority groups and people living in rural communities have disproportionate rates of chronic diseases that increase the severity of COVID-19 infection and might experience barriers to accessing testing, treatment, or vaccination against the severe acute respiratory syndrome coronavirus 2 or SARS-CoV-2, which causes COVID-19.

To reduce the burden of COVID-19 among populations disproportionately affected, the Centers for Disease Control and Prevention (CDC) is encouraging state, local, United States territorial, and freely associated state health departments (or their bona fide agents) to work collaboratively and develop partnerships with key partners who have existing community or social service delivery programs for African American, Hispanic, Asian American, Pacific Islander, Native American or other racial and ethnic minority groups or people living in rural communities. To assist in forming these partnerships, the CDC issued a notice of funding opportunity for state and local health departments to collaborate with community-based organizations.

To reach populations at higher risk, underserved, and disproportionately affected, including racial and ethnic minority groups and people living in rural communities, the CDC is encouraging state and local health departments to implement a coordinated and holistic approach that builds on culturally, linguistically, and locally tailored strategies and best practices to reduce COVID-19 risk, especially among populations at higher risk, underserved, and disproportionately affected.

The CDC specified four strategies to be funded for the Community-Based Health Disparities Program. These strategies form the types of applications for this request for applications (RFA).

**Strategy 1:** Expand existing or develop new mitigation and prevention resources and services to reduce COVID-19 related disparities among populations at higher risk and that are underserved. Guaranteeing equitable access to critical COVID-19 personal protective equipment (PPE), testing, contact tracing, quarantine and isolation, vaccination, and other wrap-around services require deploying focused strategies, resources, and activities to meet the needs of individuals and mitigate the spread of COVID-19 among populations disproportionately impacted.

**Strategy 2:** Increase or improve data collection and reporting for populations experiencing a disproportionate burden of COVID-19 infection, severe illness, and death to guide the response to the COVID-19 pandemic. Improving data systems and the collection, analysis, and use of racial, ethnic, and rural health data for COVID-19 prevention and control will help to better identify populations and communities disproportionately affected, track resource distribution, and evaluate the effectiveness of advancing health equity to address COVID-19 related health disparities among disproportionately affected populations.

**Strategy 3:** Build, leverage, and expand infrastructure support for COVID-19 prevention and control among populations that are at higher risk and underserved. Sufficient workforce, infrastructure, and capacity are critical to providing equitable access to disproportionately affected populations. Where feasible, this short-term program will build, leverage, and expand the infrastructure and capacity to guarantee and expand equitable access to critical COVID-19 treatment.

**Strategy 4:** Mobilize partners and collaborators to advance health equity and address social determinants of health as they relate to COVID-19 health disparities among populations at higher risk and that are underserved. Under this strategy, collaborations between the primary applicant and key partners will broadly address health disparities and inequities related to COVID-19.

Through this RFA process, the Pennsylvania Department of Health (Department) is soliciting project applications on COVID-19 related community-based health disparities from Pennsylvania institutions and organizations. The Department is interested in funding a total of 10 to 15 applications addressing health disparities among medically underserved populations. The overall goal of this funding is to reduce COVID-19 related health disparities. The anticipated Grant Agreement term is March 1, 2022, to May 31, 2023, subject to the availability of funding.

Applications are welcomed from community-based health care clinics meeting the following criteria:

- a) All applicants must be located in Pennsylvania and provide comprehensive primary health services to all patients without regard for the patient's ability to pay.
- b) All applicants must be one of the following:
  - i. Federally Qualified Health Center (FQHC) or FQHC-Look Alike;
  - ii. Certified Rural Health Clinic (RHC);
  - iii. Hospital health clinic: A clinic owned and operated by a hospital or health system that provides outpatient comprehensive primary health services;
  - iv. Free health clinic (that provides services through volunteer and non-volunteer health care providers): A clinic that provides primary health services and does not accept reimbursement for health care services from any third-party payer, which would include reimbursement under any insurance policies or health benefits plans, including Federal or state health benefits programs. The clinic does not charge patients for services provided based on the ability to pay or otherwise. The clinic may accept voluntary donations for the provision of services; or
  - v. Nurse managed health care clinic: A clinic that provides primary health services and is managed by a Certified Clinical Nurse Specialist, Certified Registered Nurse Anesthetist, Certified Registered Nurse Practitioner, or a Certified Nurse Midwife.
- c) All applications must attest that their location is either:
  - i. Located within an area that has a current Federal designation as defined by the U.S. Health Resources and Services Administration (HRSA) as a Primary Care (PC) Health Professional Shortage Area (HPSA); a Medically Underserved Area/Population (MUA/P) designation; a FQHC, FQHC-Look Alike, or RHC with a "facility PC HPSA designation"; or,

- ii. Served a minimum of 30% low-income patients at the location from January 1, 2020, to December 31, 2020. Low-income patients include patients in the following categories: Medicaid (MA) patients, Discounted sliding fee scale patients and No pay patients.

Only the primary applicant must meet the above eligibility criteria. Primary applicants may propose collaborating with organizations which do not meet the above criteria.

To determine the location of the proposed project site relative to currently designated PC HPSAs or MUA/Ps, contact the Primary Care Office at (717) 772-5298 or refer to the HPSA website: <https://data.hrsa.gov/tools/shortage-area> for current PC HPSA designations, MUA/P designations and HPSA/MUA/P criteria and definitions.

Additional information about how to apply, relevant and specific restrictions, and stated preferences regarding applicants are noted and outlined in Section B. Applicants are encouraged to be innovative and creative in their approach.

This RFA provides interested institutions, organizations, and persons with information to prepare and submit applications to the Department. Questions about this RFA can be directed to Dawn Spero at [RA-DHCBHCP@pa.gov](mailto:RA-DHCBHCP@pa.gov), no later than 12:00 p.m. on October 7, 2021. Answers to all questions will be posted at [www.emarketplace.state.pa.us](http://www.emarketplace.state.pa.us). Each applicant shall be responsible to monitor the website for new or revised RFA information. The Department shall not be bound by any information that is not either contained within the RFA or formally issued as an addendum by the Department.

In order to do business with the Commonwealth of Pennsylvania providers are required to enroll in the SAP system. Applicants may enroll at [www.vendorregistration.state.pa.us/](http://www.vendorregistration.state.pa.us/) or by calling toll free at 1-877-435-7363 or locally at 717-346-2676.

## **B. Application Procedures**

### **1. General**

- a) Applications must be received by the Department by the time and date stated in the cover letter. The Department will reject any late applications.
- b) If it becomes necessary to revise any part of the application guidelines, an amendment will be posted on the DGS website.
- c) The decision of the Department with regard to selection of applicants is final. The Department reserves the right, in its sole and complete discretion, to reject any and all applications received as a result of this request and to negotiate separately with competing applicants.
- d) The Department is not liable for any costs the applicant incurs in preparation and submission of its application, in participating in the RFA process or in anticipation of award of the resulting Grant Agreement(s).

- e) The Department reserves the right to cancel the RFA at any time up until the full execution of the resulting Grant Agreement(s).
- f) Awarded applicants shall not be permitted to issue news releases pertaining to this project prior to official written notification of award by the Department review committee. Any subsequent publication or media release issued by the Grantee throughout the life of the Grant using funding from this Grant Agreement must acknowledge the Department as the granting agency and be approved in writing by the Department.
- g) Applicants may submit one application for each of the strategies if desired, up to a maximum of four applications. A separate application must be submitted for each one of the project strategies listed above (Strategy 1, 2, 3, or 4). However, only one award shall be made per applicant organization, including those with multiple health clinic sites. An applicant scoring high enough to potentially receive an award in more than one category will receive a single award in the category with their highest score. Applicants may not apply for funding for activities already being financed through any other Grants.

## **2. Evaluation of Applications**

All applications meeting stated requirements in this RFA and received by the designated date and time, will be reviewed by a committee of qualified personnel selected by the Department. The Review Committee will recommend applications that most closely meet the evaluation criteria developed by the Department. If the Review Committee needs additional clarification of an application, Primary Care Office staff and staff from the Office of Procurement will schedule an oral presentation, either in person or via a conference call, or assign a due date for the submission of a written clarification, or both.

Evaluation criteria used by the Review Committee, include:

*Demonstration of understanding and intent of RFA:* The applicant must articulate a clear understanding of the strategy they are proposing and the relevance of that strategy to the intent of this RFA.

*Soundness of approach:* The applicant must present an approach which is logical and reasonable for the strategy they are proposing to implement. Proposed activities should be clearly associated with the strategy. The applicant should communicate a clear concept for what will be accomplished, including a step-by-step plan with timelines for accomplishing the specific tasks.

*Feasibility and Timelines:* The applicant must communicate a plan which can be accomplished within the timeframe of this project. The applicant should also demonstrate they have the capacity to successfully manage the project to completion and pay for expenses until reimbursed.



*Budget and Budget Justification:* The budget must be reasonable for the work proposed. In addition, the budget justification should clearly link the requested funding with the strategy and activities being proposed.

### **3. Awards**

Grants will be administered through the Department.

All applicants will receive official written notification of the status of their application from the Department. Unsuccessful applicants may request a debriefing. This request must be in writing and must be received by the Primary Care Office within 30 calendar days of the written official notification of the status of the application. The Primary Care Office will determine the time and place for the debriefing. If the debriefing is held via Teams, a link, phone number, and conference ID number will be provided. The debriefing will be conducted individually by Primary Care Office staff. Comparison of applications will not be provided. Applicants will not be given any information regarding the evaluation other than the position of their application in relation to all other applications and the strengths and weaknesses in their individual application.

### **4. Deliverables**

The deliverables for Strategy 1 shall be related to expanding existing or developing new mitigation and prevention resources and services to reduce COVID-19 related disparities among populations at higher risk and who are underserved. Deliverables for Strategy 2 shall be related to increasing or improving data collection and reporting for populations experiencing a disproportionate burden of COVID-19. The deliverables for Strategy 3 shall be associated with building, leveraging, and expanding infrastructure support for COVID-19 prevention. The deliverables for Strategy 4 shall be for mobilizing partners and collaborators to advance health equity and address social determinants of health as they relate to COVID-19.

Deliverables will be based on the strategies, activities, and outcomes proposed in the applications chosen to receive Grant awards. The set of deliverables will be refined and finalized before each Grant Agreement is executed.

### **5. Reporting Requirements**

- a) The awarded applicant(s) shall be required to submit a written quarterly report of progress, issues, and activities to the Department within 30 days after the end of each quarter. The quarterly report shall, at a minimum, identify if activities are proceeding according to the project plan, and explain any deviations from the project plan. The specific format for these reports shall be provided prior to the start of the Grant Agreement. Any changes to the scope or methodology of the project during the term of the Grant Agreement must be approved in writing by the Department.
- b) The awarded applicant(s) shall be required to submit to the Department a final written report within 45 days after the end date of the Grant Agreement. The final report shall

summarize the last three months of the Grant Agreement period and shall provide an overall summary of the outcomes of the project.

- c) The awarded applicants shall be required to request written approval from the Department prior to any changes in key personnel. Key personnel are defined as any personnel the applicant deems necessary to accomplish the deliverables.

## C. **Application Instructions and Required Format**

### 1. **Application Instructions**

The following is a list of requirements.

- a) The applicant must submit one application (Part Two of this RFA), by email to [RA-DHHEALTH\\_DEPT\\_DOC@pa.gov](mailto:RA-DHHEALTH_DEPT_DOC@pa.gov).
- b) The application must be received by the date and time specified in the cover letter. Applicants should consider that technical difficulties could arise and allow sufficient time to ensure timely email receipt. **(Late applications will be rejected, regardless of the reason).**
- c) Note there is a 10MB size limitation per email. If the application exceeds 10MB, zip the file to reduce the size or submit multiple emails so the entire application is able to be received.
- d) The application must be submitted using the format described in subsection 2, below – Application Format.
- e) The Certifications Form must be completed and signed by an official authorized to bind the organization to the application.

Applicants are strongly encouraged to be brief and clear in the presentation of ideas.

### 2. **Application Format**

Applicants must follow the format as described below to complete Part Two of this RFA. Applications must be typewritten on 8 ½” by 11” paper, with a font size no smaller than 10 point and margins of at least ½ inch.

- a) **Cover Page** – Complete the form.
- b) **Certifications Form** – The Certifications Form must be completed and signed by an official authorized to bind the organization to the application.
- c) **501(c)(3) Form to verify not-for-profit status**
- d) **Work Statement** – Provide a narrative description of the proposed methodology addressing the following topics based on **one of the four strategies** (using Attachment IV. a., b., c., or d.):
  - i. The *summary of application* should not exceed **one** page and must include the following:

- A. Title of project
- B. Target population to be served
- C. Objectives
- D. Brief summary of project
- E. Outline of anticipated results
- F. Impact of project
- ii. *Statement or background of problem*
- iii. *Objectives to be addressed with Grant funding*
- iv. *Collaborations to achieve objectives*
  - v. *Target populations and health disparities*
  - vi. *Evaluation and performance measurement plan*
  - vii. *Organizational capacity to implement*
  - viii. *Project plan*

The work statement narrative including one-page summary should not exceed **10** pages. Detailed descriptions of the work statement tasks appropriate for each of the four strategies are in Attachment IV (a, b, c, & d) of this RFA.

- e) **Budget** – Use the downloadable format to present your budget request. Instructions regarding completion of the budget can be found in the last worksheet of the downloadable Excel budget file. The anticipated Grant Agreement term is March 1, 2022, through May 31, 2023. The overall 15-month budget for the application shall not exceed \$200,000. The budget must contain an Overall Summary in addition to a Summary with Budget Details for each year.

Overall Summary	March 1, 2022 to May 31, 2023	\$200,000
Year 1 Summary	March 1, 2022 to June 30, 2022	\$ 53,000
Year 2 Summary	July 1, 2022 to May 31, 2023	\$147,000

See the Budget Definitions section below for more information.

- f) **Budget Justification**

The Budget Justification must be a narrative of the budget, by category, justifying budget requests and explaining in detail the method which was used to arrive at specific budget amounts. The Budget Justification must relate to the project plan (d.viii. above).

- g) **Additional Appendices**

- i. Resumes of the Director and staff proposed for the project.
- ii. Position description for new or vacant positions
- iii. Copy of discounted sliding fee scale and board approved policy to ensure services to those unable to pay.

### **3. Budget Definitions**

Personnel: This budget category shall identify each position by job title, hourly rate, and the number of hours per year allocated to the project. Fringe benefits are to be shown as a separate line item by percentage and shall include a detailed listing of the benefits being covered.

Consultant Services: This budget category shall identify the services to be provided by each consultant including hourly rate and number of hours to be utilized under this Grant Agreement.

Subcontract Services: This budget category shall identify the services to be provided by each subcontractor under this Grant Agreement.

Patient Services: This budget category shall reflect funding dedicated for patient services.

Equipment: This budget category shall reflect the actual or projected cost of any equipment \$5,000 or greater. Justification for the purchase of any equipment must be included. Purchase of equipment is not a priority of the Department.

Supplies: This budget category shall reflect expected costs for general office supplies including personal computers and facsimile machines valued at less than \$5,000, needed to support this project.

Travel: This budget category shall include anticipated expenditures for travel including mileage, hotels and meals.

Other: This budget category shall be used for anticipated expenditures that do not fit into any of the other budget categories such as telephone, printing, postage, and indirect costs (overhead, general, and administrative). Indirect rates cannot exceed the provider's Federally approved indirect cost rate schedule. In the description area under OTHER COSTS include the % that the rate reflects, identify the budget categories to which the rate was applied, and list the specific items that the indirect is paying for.

### **4. Funding Restrictions**

Restrictions that must be considered while planning the programs and writing the budget are:

- a) Recipients may not use funds for research.
- b) Recipients may not use funds for clinical care except as allowed by law.
- c) Recipients may use funds only for reasonable program purposes, including personnel, travel, supplies, and services.
- d) Generally, recipients may not use funds to purchase furniture or equipment. Any such proposed spending must be clearly identified in the budget.
- e) Reimbursement of pre-award costs generally is not allowed.

- f) Other than for normal and recognized executive-legislative relationships, no funds may be used for:
  - i. publicity or propaganda purposes, for the preparation, distribution, or use of any material designed to support or defeat the enactment of legislation before any legislative body;
  - ii. the salary or expenses of any Grant or contract recipient, or agent acting for such recipient, related to any activity designed to influence the enactment of legislation, appropriations, regulation, administrative action, or executive order proposed or pending before any legislative body.
- g) The direct and primary recipient in a Grant Agreement program must perform a substantial role in carrying out project outcomes and not merely serve as a conduit for an award to another party or provider who is ineligible.

Coronavirus Disease 2019 (COVID-19) Funds:

- a) A recipient of a Grant Agreement awarded with funds made available under the Coronavirus Preparedness and Response Supplemental Appropriations Act, 2020 (P.L. 116-123); the Coronavirus Aid, Relief, and Economic Security Act, 2020 (the “CARES Act”) (P.L. 116-136); the Paycheck Protection Program and Health Care Enhancement Act (P.L. 116-139); and H.R. 133 - Consolidated Appropriations Act, 2021, Division M – Coronavirus Response and Relief Supplemental Appropriations Act, 2021, agrees, as applicable to the award, to: 1) comply with existing or future directives and guidance from the Secretary regarding control of the spread of COVID-19; 2) in consultation and coordination with HHS, provide, commensurate with the condition of the individual, COVID-19 patient care regardless of the individual’s home jurisdiction or appropriate public health measures (e.g., social distancing, home isolation); and 3) assist the United States Government in the implementation and enforcement of federal orders related to quarantine and isolation.
- b) In addition, to the extent applicable, Grant award recipients shall comply with Section 18115 of the CARES Act, with respect to the reporting to the HHS Secretary of results of tests intended to detect SARS-CoV-2 or to diagnose a possible case of COVID-19. Such reporting shall be in accordance with guidance and direction from HHS or CDC. HHS laboratory reporting guidance is posted at:
- c) [COVID-19 Pandemic Response, Laboratory Data Reporting: CARES Act Section 18115 \(hhs.gov\): https://www.hhs.gov/sites/default/files/covid-19-laboratory-data-reportingguidance.pdf](https://www.hhs.gov/sites/default/files/covid-19-laboratory-data-reportingguidance.pdf).
- d) Further, consistent with the full scope of applicable Grant regulations (45 C.F.R. 75.322), the purpose of this award, and the underlying funding, the recipient is expected to provide to CDC copies of or access to COVID-19 data collected and evaluations conducted with these funds, including but not limited to data related to COVID-19 testing. CDC will specify in further guidance and directives what is encompassed by this requirement.
- e) To achieve the public health objectives of ensuring the health, safety, and welfare of all Americans, Grantees must distribute or administer vaccine without discriminating on non-public-health grounds within a prioritized group.

# PART TWO

Pennsylvania Department of Health  
Primary Care Office

**Community-Based Health Disparities Program**

**Request for Applications (RFA) #67-126**



**COVER PAGE**  
**RFA #67-126**

Strategy 1       Strategy 2       Strategy 3       Strategy 4

**Applicant Name:**

\_\_\_\_\_

*(Organization or Institution)*

**Type of Legal**

**Entity**

\_\_\_\_\_

*(Corporation, Partnership, Professional Corporation, Sole Proprietorship, etc.)*

**Federal I.D.#:** \_\_\_\_\_ **Grant Amount:**      \$ \_\_\_\_\_

**SAP Vendor #:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City** \_\_\_\_\_ **County** \_\_\_\_\_ **State** \_\_\_\_\_

**Zip Code** \_\_\_\_\_

**Application Contact**

**Person:** \_\_\_\_\_

**Title:** \_\_\_\_\_

**Telephone No.:** \_\_\_\_\_ **E-mail:** \_\_\_\_\_

**Organization Submitting Application Type (check ONE):**

FQHC or FQHC Look-alike

Free Clinic

Hospital Health Clinic

Nurse Managed Health Care Clinic

RHC (Not for Profit)

**CERTIFICATIONS**

**1. Certification Regarding Debarment and Suspension**

- a. The Contractor certifies, in writing, for itself and all its subcontractors required to be disclosed or approved by the Commonwealth, that as of the date of its execution of this Bid/Contract, that neither the Contractor, nor any such subcontractors, are under suspension or debarment by the Commonwealth or any governmental entity, instrumentality, or authority and, if the Contractor cannot so certify, then it agrees to submit, along with its Bid/Contract, a written explanation of why such certification cannot be made.
- b. The Contractor also certifies, in writing, that as of the date of its execution of this Bid/Contract it has no tax liabilities or other Commonwealth obligations, or has filed a timely administrative or judicial appeal if such liabilities or obligations exist, or is subject to a duly approved deferred payment plan if such liabilities exist.
- c. The Contractor's obligations pursuant to these provisions are ongoing from and after the effective date of the Contract through the termination date thereof. Accordingly, the Contractor shall have an obligation to inform the Commonwealth if, at any time during the term of the Contract, it becomes delinquent in the payment of taxes, or other Commonwealth obligations, or if it or, to the best knowledge of the Contractor, any of its subcontractors are suspended or debarred by the Commonwealth, the Federal government, or any other state or governmental entity. Such notification shall be made within 15 days of the date of suspension or debarment.
- d. The failure of the Contractor to notify the Commonwealth of its suspension or debarment by the Commonwealth, any other state, or the Federal government shall constitute an event of default of the Contract with the Commonwealth.
- e. The Contractor agrees to reimburse the Commonwealth for the reasonable costs of investigation incurred by the Office of State Inspector General for investigations of the Contractor's compliance with the terms of this or any other Agreement between the Contractor and the Commonwealth that results in the suspension or debarment of the Contractor. Such costs shall include, but shall not be limited to, salaries of investigators, including overtime; travel and lodging expenses; and expert witness and documentary fees. The Contractor shall not be responsible for investigative costs for investigations that do not result in the Contractor's suspension or debarment.
- f. The Contractor may obtain a current list of suspended and debarred Commonwealth Contractors by either searching the Internet at <http://www.dgs.state.pa.us/> or contacting the:

Department of General Services  
Office of Chief Counsel  
603 North Office Building  
Harrisburg, PA 17125  
Telephone No: (717) 783-6472  
FAX No: (717) 787-9138

**IF THE CONTRACTOR INTENDS TO USE ANY SUBCONTRACTORS, LIST THEIR NAMES(S), ADDRESS(ES), AND FEDERAL IDENTIFICATION OR SOCIAL SECURITY NUMBER(S) IN THE SPACE BELOW.**

**2. Certification Regarding Application/Proposal/Bid Validity**

This application/proposal/bid shall be valid for a period of 60 days following the time and date designated for bid opening of applications/proposals/bids received in response to this Request for Application/Request for Proposal/Invitation for Bid #67-126.

**BY SIGNING BELOW, THE APPLICANT, BY ITS AUTHORIZED SIGNATORY, IS BINDING ITSELF TO THE ABOVE TWO CERTIFICATIONS.**

SIGNATURE OF AUTHORIZED CERTIFYING OFFICIAL	TITLE
APPLICANT ORGANIZATION	ADDRESS OF ORGANIZATION
DATE SUBMITTED	CONTRACTOR'S FEDERAL I.D. OR S.S. NUMBER



**501(c)(3) Form** - Applicant must document its status as not-for-profit. A not-for-profit organization must submit a copy of its Internal Revenue Service 501(c)(3) Tax Exempt Verification Letter. If a not-for-profit organization is a unit of a foundation or corporation, and is not a separate legal entity, the application, the 501(c)(3) and Federal Employer Identification Number (EIN) must be that of the foundation or corporation. If the applicant is a separate legal entity, even if it is a subsidiary of a parent organization, the application, 501(c)(3), and Federal EIN must be that of the applicant itself. The applicant for the Community-Based Health Care Program funds must have the fiscal and administrative ability to receive funds and to carry out the purpose of the Grant. It will be the applicant's responsibility to execute the Grant Agreement and assume the obligations included in that Agreement.

### Strategy 1 Work Statement Format

**Strategy 1:** Expand existing or develop new mitigation and prevention resources and services to reduce COVID-19 related disparities among populations at higher risk and that are underserved. Ensuring equitable access to critical COVID-19 personal protective equipment (PPE), testing, contact tracing, quarantine and isolation, vaccination, and other wrap-around services require deploying focused strategies, resources, and activities to meet the needs of individuals and mitigate the spread of COVID-19 among populations disproportionately impacted.

Activities for Strategy 1 may include, but are not limited to:

- A. Expand testing (including home test kits and mobile testing sites) and contact tracing among populations at higher risk and that are underserved, including racial and ethnic minority populations and people living in rural communities.
- B. Vaccine coordination, quarantine and isolation options, and preventive care and disease management among populations that are underserved and at higher risk for COVID-19.
- C. Tailor and adapt evidence-based policies, systems, and environmental strategies to mitigate social and health inequities related to COVID-19.
- D. Identify and establish collaborations with critical partners affiliated with populations at higher risk and that are underserved, including racial and ethnic minority groups at higher risk for COVID-19 to:
  - 1) Connect community members to programs, healthcare providers, services, and resources (for example, transportation, housing support, food assistance programs, mental health and substance abuse services, substance abuse) they might need; and
  - 2) Lessen adverse effects of mitigation strategies.

Work statement components for this strategy follow format criteria as listed in Part 1, Section 2. d) “Application Format, Work Statement”.

#### **1. Summary of Application: Project Overview (maximum one page)**

The summary of application should not exceed one page and must include the following:

- a) Title of project
- b) Target population to be served
- c) Objectives
- d) Brief summary of project
- d) Outline of anticipated results
- e) Impact of project

#### **2. Statement or background of problem**

Provide a description of relevant background information that includes the context of the problem. Explain the need for completing the proposed project.

#### **3. Objectives to be addressed with Grant funding**

Applicants must clearly identify the outcomes they expect to achieve by the end of the project period, as identified in the Project Plan section. Outcomes are the results the program intends to achieve and usually indicate the intended direction of change (for example, an increase or decrease in some measure).

#### **4. Collaborations to achieve objectives**

Describe the collaboration of programs and organizations, either internal or external to the applicant organization, which will be used to achieve objectives of the project.

#### **5. Target populations and health disparities**

Describe the population currently served by the health care clinic, including population health data such as health status, demographic, socio-economic and geographic. Include sources of data described.

Describe the specific target population(s) for this project and explain how such a target will achieve the goals of the project or alleviate health disparities. Also address how specific populations will be included in the project.

#### **6. Evaluation and performance measurement plan**

Provide an evaluation and performance measurement plan. At a minimum, the plan must describe:

- a) How you will collect the performance measures, respond to the evaluation questions, and use evaluation findings for continuous quality improvement. The Paperwork Reduction Act of 1995 (PRA): Applicants are advised that any activities involving information collections (for example, surveys, questionnaires, applications, audits, data requests, reporting, recordkeeping and disclosure requirements) from 10 or more individuals or non-Federal entities, including state and local governmental agencies, and funded or sponsored by the Federal government are subject to review and approval by the Office of Management and Budget.
- b) How key project partners will participate in the evaluation and performance measurement planning processes.
- c) Available data sources, feasibility of collecting appropriate evaluation and performance data, and other relevant data information (for example, performance measures proposed by the applicant).
- d) Where the applicant chooses to take on specific evaluation studies, describe the type of evaluations (that is, process, outcome, or both).
- e) Applications involving data collection or generation must include a Data Management Plan (DMP) as part of the evaluation and performance measurement plan. The DMP describes plans for assurance of the quality of the public health data through the data's lifecycle and plans to deposit the data in a repository to preserve and to make the data accessible in a timely manner. See web link for additional information: <https://www.cdc.gov/grants/additionalrequirements/ar-25.html>. The DMP may be submitted as a checklist, paragraph, or other format. To help guide applicants in developing a DMP, a sample plan is provided via the following link: <http://www.icpsr.umich.edu/icpsrweb/content/datamanagement/dmp/plan.html>.

**7. Organizational capacity to implement**

Describe your organization and the capacity of your organization to manage and complete the proposed project(s). In addition to the capacity of the organization, include:

- a) Identification of the proposed director for this project including a brief description of the director’s competencies related to the project.
- b) Description of other existing key staff positions, in the applicant and collaborating organizations, to be used in administering this project. Resumes of existing staff persons or position descriptions for vacant positions working directly on the proposed project must be included in the Additional Appendices section of the application.
- c) Description of the job responsibilities of each new position proposed in the project as well as any specialized training or licenses or both required for the specific positions. Position descriptions of proposed staff positions must be included in the Additional Appendices section of the application.
- d) Description of applicant’s fiscal status demonstrating capacity to implement (Note: Grant funds provide reimbursement for expenditures; applicant must describe a plan to pay for costs incurred prior to reimbursement.)

**8. Project plan**

Describe a project plan integrating and delineating how the project will be carried out to achieve the strategies, activities, outcomes and evaluation and performance measurement. Also include the tasks to maintain or improve outcomes after this project is complete.

The format for the project plan is:

<b>Key Tasks</b>	<b>Person Responsible</b>	<b>Start Date</b>	<b>End Date</b>	<b>Expected Outcome</b>

## Strategy 2 Work Statement Format

**Strategy 2:** Increase or improve data collection and reporting for populations experiencing a disproportionate burden of COVID-19 infection, severe illness, and death to guide the response to the COVID-19 pandemic. Improving data systems and the collection, analysis, and use of racial, ethnic, and rural health data for COVID-19 prevention and control will help to better identify populations and communities disproportionately affected, track resource distribution, and evaluate the effectiveness of advancing health equity to address COVID-19 related health disparities among disproportionately affected populations.

Activities for Strategy 2 may include, but are not limited to:

- A. Improve data collection and reporting for testing and contact tracing for populations at higher risk and that are underserved.
- B. Build on plans for collecting and reporting timely, complete, representative, and relevant data on testing, incidence, vaccination, and severe outcomes by detailed race and ethnicity categories, taking into account age and sex differences between groups.
- C. Develop strategies to educate providers, community partners, and programs on:
  - 1) the importance of the race and ethnicity data and appropriate strategies to collect it;
  - 2) how to address mistrust and hesitancy about reporting personal information including race and ethnicity; and
  - 3) why this information is important to prevent and control the spread of COVID-19.
- D. Develop and implement plans to disseminate health equity-related data and related materials tailored to be culturally and linguistically responsive for diverse audiences.
- E. Develop key principles and resources for collecting, analyzing, reporting, and disseminating health equity-related data to inform action during a public health emergency COVID-19.
- F. Assure adequate resources for data infrastructure and workforce to ensure alignment with data modernization.

Work statement components for this strategy follow format criteria as listed in Part 1, Section 2.

d) “Application Format, Work Statement”.

### **1. Summary of Application: Project Overview (maximum one page)**

The summary of application should not exceed one page and must include the following:

- a) Title of project
- b) Target population to be served
- c) Objectives
- d) Brief summary of project
- d) Outline of anticipated results
- e) Impact of project

### **2. Statement or background of problem**

Provide a description of relevant background information that includes the context of the problem. Explain the need for completing the proposed project.

**3. Objectives to be addressed with Grant funding**

Applicants must clearly identify the outcomes they expect to achieve by the end of the project period, as identified in the Project Plan section. Outcomes are the results the project intends to achieve and usually indicate the intended direction of change (for example, an increase or decrease in some measure).

**4. Collaborations to achieve objectives**

Describe the collaboration of programs and organizations, either internal or external to the applicant organization, which will be used to achieve objectives of the proposed project.

**5. Target populations and health disparities**

Describe the population currently served by the health care clinic, including population health data such as health status, demographic, socio-economic and geographic. Include sources of data described.

Describe the specific target population(s) for this project and explain how such a target will achieve the goals of the project or alleviate health disparities. Also address how specific populations will be included in the project.

**6. Evaluation and performance measurement plan**

Provide an evaluation and performance measurement plan. At a minimum, the plan must describe:

- a) How you will collect the performance measures, respond to the evaluation questions, and use evaluation findings for continuous quality improvement. The Paperwork Reduction Act of 1995 (PRA): Applicants are advised that any activities involving information collections (for example, surveys, questionnaires, applications, audits, data requests, reporting, recordkeeping and disclosure requirements) from 10 or more individuals or non-Federal entities, including state and local governmental agencies, and funded or sponsored by the Federal government are subject to review and approval by the Office of Management and Budget.
- b) How key project partners will participate in the evaluation and performance measurement planning processes.
- c) Available data sources, feasibility of collecting appropriate evaluation and performance data, and other relevant data information (for example, performance measures proposed by the applicant).
- d) Where the applicant chooses to take on specific evaluation studies, they should be directed to: Describe the type of evaluations (that is, process, outcome, or both).

Applications involving data collection or generation must include a Data Management Plan (DMP) as part of their evaluation and performance measurement plan. The DMP describes plans for assurance of the quality of the public health data through the data's lifecycle and plans to deposit the data in a repository to preserve and to make the data accessible in a timely manner. See this web link for additional information: <https://www.cdc.gov/grants/additionalrequirements/ar-25.html>. The DMP may be

submitted as a checklist, paragraph, or other format. To help guide applicants in developing a DMP, a sample plan is provided via the following link:

<http://www.icpsr.umich.edu/icpsrweb/content/datamanagement/dmp/plan.html>.

**7. Organizational capacity to implement**

Describe your organization and the capacity of your organization to manage and complete the proposed project(s). In addition to the capacity of the organization, include:

- a) Identification of the proposed director for this project including a brief description of the director’s competencies related to the project.
- b) Description of other key existing staff positions, in the applicant and collaborating organizations, to be used in administering this project. Resumes of existing staff persons or position descriptions for vacant positions working directly on the proposed project must be included in the Additional Appendices section of the application.
- c) Description of the job responsibilities of each new position proposed in the project as well as any specialized training or licenses or both required for the specific positions. Position descriptions of proposed staff positions must be included in the Additional Appendices section of the application.
- d) Description of applicant’s fiscal status demonstrating capacity to implement (Note: Grant funds provide reimbursement for expenditures; applicant must describe a plan to pay for costs incurred prior to reimbursement.)

**8. Project plan**

Describe a project plan integrating and delineating how the project will be carried out to achieve the outcomes, strategies, activities, and evaluation and performance measurement. Also include the tasks to maintain or improve outcomes after this project is complete.

The format for the project plan is:

Key Tasks	Person Responsible	Start Date	End Date	Expected Outcome

### Strategy 3 Work Statement Format

**Strategy 3:** Build, leverage, and expand infrastructure support for COVID-19 prevention and control among populations that are at higher risk and underserved. Sufficient workforce, infrastructure, and capacity are critical to providing equitable access to disproportionately affected populations. Where feasible, this short-term project will build, leverage, and expand the infrastructure and capacity to ensure and expand equitable access to critical COVID-19 treatment.

Activities for Strategy 3 may include, but are not limited to:

- A. Expand the infrastructure to improve testing and contact tracing among populations at higher risk and that are underserved, including racial and ethnic minority populations and rural communities.
- B. Establish, enhance, or implement leadership-level health equity offices, workgroups, task forces, or positions to guide addressing COVID-19 among communities at higher risk and that are underserved.
- C. Convene and facilitate multi-sector coalitions or advisory groups that include members of underserved communities and organizations that serve the community. These groups may provide advice, guidance, and recommendations for addressing COVID-19 and advancing health equity among their communities.
- D. Update jurisdictions' COVID-19 plans and health equity plans to support communities most at risk for COVID-19 with the intention of setting up systems that put in place infrastructures and plans that can also support future emergency responses.
- E. Build and expand an inclusive public health workforce, including hiring people from the community (for example, community health workers, social workers, other trusted community members) who are equipped to assess and address the needs of communities disproportionately affected by COVID-19.

Work statement components for this strategy follow format criteria as listed in Part 1, Section 2. d) "Application Format, Work Statement".

**1. Summary of Application: Project Overview (maximum one page)**

The summary of application should not exceed one page and must include the following:

- a) Title of project
- b) Target population to be served
- c) Objectives
- d) Brief summary of project
- d) Outline of anticipated results
- e) Impact of project

**2. Statement or background of problem**

Provide a description of relevant background information that includes the context of the problem. Explain the need for completing the proposed project.



### **3. Objectives to be addressed with Grant funding**

Applicants must clearly identify the outcomes they expect to achieve by the end of the project period, as identified in the Project Plan section. Outcomes are the results the project intends to achieve and usually indicate the intended direction of change (for example, an increase or decrease in some measure).

### **4. Collaborations to achieve objectives**

Describe the collaboration of programs and organizations, either internal or external to the applicant organization, which will be used to achieve objectives of the project.

### **5. Target populations and health disparities**

Describe the population currently served by the health care clinic, including population health data such as health status, demographic, socio-economic and geographic. Include sources of data described.

Describe the specific target population(s) for this project and explain how such a target will achieve the goals of the project or alleviate health disparities. Also address how specific populations will be included in the project.

### **6. Evaluation and performance measurement plan**

Provide an evaluation and performance measurement plan. At a minimum, the plan must describe:

- a) How you will collect the performance measures, respond to the evaluation questions, and use evaluation findings for continuous quality improvement. The Paperwork Reduction Act of 1995 (PRA): Applicants are advised that any activities involving information collections (for example, surveys, questionnaires, applications, audits, data requests, reporting, record keeping and disclosure requirements) from 10 or more individuals or non-Federal entities, including state and local governmental agencies, and funded or sponsored by the Federal government are subject to review and approval by the Office of Management and Budget.
- b) How key project partners will participate in the evaluation and performance measurement planning processes.
- c) Available data sources, feasibility of collecting appropriate evaluation and performance data, and other relevant data information (for example, performance measures proposed by the applicant).
- d) Where the applicant chooses to take on specific evaluation studies, describe the type of evaluations (that is, process, outcome, or both).
- e) Applications involving data collection or generation must include a Data Management Plan (DMP) as part of the evaluation and performance measurement plan. The DMP describes plans for assurance of the quality of the public health data through the data's lifecycle and plans to deposit the data in a repository to preserve and to make the data accessible in a timely manner. See web link for additional information: <https://www.cdc.gov/grants/additionalrequirements/ar-25.html>. The DMP may be submitted as a checklist, paragraph, or other format. To help guide applicants in developing a DMP, a sample plan is provided via the following link:

**7. Organizational capacity to implement**

Describe your organization and the capacity of your organization to manage and complete the proposed project(s). In addition to the capacity of the organization, include:

- a) Identification of the proposed director for this project including a brief description of the director’s competencies related to the project.
- b) Description of other existing key staff positions, in the applicant and collaborating organizations, to be used in administering this project. Resumes of existing staff persons or position descriptions for vacant positions working directly on the proposed project must be included in the Additional Appendices section of the application.
- c) Description of the job responsibilities of each new position proposed in the project as well as any specialized training or licenses or both required for the specific positions. Position descriptions of proposed staff positions must be included in the Additional Appendices section of the application.
- d) Description of applicant’s fiscal status demonstrating capacity to implement (Note: Grant funds provide reimbursement for expenditures; applicant must describe a plan to pay for costs incurred prior to reimbursement.)

**8. Project plan**

Describe a project plan integrating and delineating how the project will be carried out to achieve the strategies, activities, outcomes and evaluation and performance measurement. Also include the tasks to maintain or improve outcomes after this project is complete.

The format for the project plan is:

<b>Key Tasks</b>	<b>Person Responsible</b>	<b>Start Date</b>	<b>End Date</b>	<b>Expected Outcome</b>

### **Strategy 4 Work Statement Format**

**Strategy 4:** Mobilize partners and collaborators to advance health equity and address social determinants of health as they relate to COVID-19 health disparities among populations at higher risk and that are underserved. Under this strategy, collaborations between the primary applicant and key partners will broadly address health disparities and inequities related to COVID-19.

Activities for Strategy 4 may include, but are not limited to:

- A. Build community capacity to reach disproportionately affected populations with effective culturally and linguistically tailored programs and practices for testing and contact tracing, and quarantine, including racial and ethnic minority populations and rural communities.
- B. Build and implement cross-sectoral partnerships to align public health, healthcare, and non-health (for example, housing, transportation, social service) interventions that decrease risk for COVID-19.
- C. Develop mechanisms such as community advisory groups that include leaders representing racial and ethnic minority groups and rural community leaders and members representing underserved populations to inform COVID-19 and future emergency response activities.
- D. Develop and disseminate culturally and linguistically responsive COVID-19 prevention communications through various channels (for example, local media, local or community newspapers, radio, TV, trusted communications agents) written in plain language and in formats and languages suitable for diverse audiences—including people with disabilities and limited English proficiency. Addressing and, as necessary, dispelling of misinformation and barriers to mitigation practices due to mistrust.
- E. Build community capacity that includes traditional organizations (for example, public health, healthcare) and non-traditional partners (for example, community health workers, churches, transportation providers, social workers) to reach disproportionately affected populations with effective culturally and linguistically tailored programs and practices for testing, contact tracing, isolating, vaccination, and healthcare strategies.
- F. Identify and establish collaborations with critical partners affiliated with and who provide services to populations that are underserved and at higher risk for COVID-19 to disseminate scientifically accurate, culturally, and linguistically responsive information and facilitate access to health-related services.

Work statement components for this strategy follow format criteria as listed in Part 1, Section 2. d) “Application Format, Work Statement”.

#### **1. Summary of Application: Project Overview (maximum one page)**

The summary of application should not exceed one page and must include the following:

- a) Title of project
- b) Target population to be served
- c) Objectives
- d) Brief summary of project
- d) Outline of anticipated results

e) Impact of project

**2. Statement or background of problem**

Provide a description of relevant background information that includes the context of the problem. Explain the need for completing the proposed project.

**3. Objectives to be addressed with Grant funding**

Applicants must clearly identify the outcomes they expect to achieve by the end of the project period, as identified in the Project Plan section. Outcomes are the results the project intends to achieve and usually indicate the intended direction of change (for example, an increase or decrease in some measure).

**4. Collaborations to achieve objectives**

Describe the collaboration of programs and organizations, either internal or external to the applicant organization, which will be used to achieve objectives of the proposed project.

**5. Target populations and health disparities**

Describe the population currently served by the health care clinic, including population health data such as health status, demographic, socio-economic and geographic. Include sources of data described.

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- a) How you will collect the performance measures, respond to the evaluation questions, and use evaluation findings for continuous quality improvement. The Paperwork Reduction Act of 1995 (PRA): Applicants are advised that any activities involving information collections (for example, surveys, questionnaires, applications, audits, data requests, reporting, recordkeeping and disclosure requirements) from 10 or more individuals or non-Federal entities, including state and local governmental agencies, and funded or sponsored by the Federal government are subject to review and approval by the Office of Management and Budget.
- b) How key project partners will participate in the evaluation and performance measurement planning processes.
- c) Available data sources, feasibility of collecting appropriate evaluation and performance data, and other relevant data information (for example, performance measures proposed by the applicant).
- d) Where the applicant chooses to take on specific evaluation studies, describe the type of evaluations (that is, process, outcome, or both).
- e) Applications involving data collection or generation must include a Data Management Plan (DMP) as part of the evaluation and performance measurement plan. The DMP describes plans for assurance of the quality of the public health data through the data's

lifecycle and plans to deposit the data in a repository to preserve and to make the data accessible in a timely manner. See web link for additional information: <https://www.cdc.gov/grants/additionalrequirements/ar-25.html>. The DMP may be submitted as a checklist, paragraph, or other format. To help guide applicants in developing a DMP, a sample plan is provided via the following link: <http://www.icpsr.umich.edu/icpsrweb/content/datamanagement/dmp/plan.html>.

**7. Organizational capacity to implement**

Describe your organization and the capacity of your organization to manage and complete the proposed project(s). In addition to the capacity of the organization, include:

- a) Identification of the proposed director for this project including a brief description of the director’s competencies related to the project.
- b) Description of other existing key staff positions, in the applicant and collaborating organizations, to be used in administering this project. Resumes of existing staff persons or position descriptions for vacant positions working directly on the proposed project must be included in the Additional Appendices section of the application.
- c) Description of the job responsibilities of each new position proposed in the project as well as any specialized training or licenses or both required for the specific positions. Position descriptions of proposed staff positions must be included in the Additional Appendices section of the application.
- d) Description of applicant’s fiscal status demonstrating capacity to implement (Note: Grant funds provide reimbursement for expenditures; applicant must describe a plan to pay for costs incurred prior to reimbursement.)

**8. Project plan**

Describe a project plan integrating and delineating how the project will be carried out to achieve the strategies, activities, outcomes and evaluation and performance measurement. Also include the tasks to maintain or improve outcomes after this project is complete.

The format for the project plan is:

Key Tasks	Person Responsible	Start Date	End Date	Expected Outcome

## **Budget Template**

See Part One, General Information; Section C, Application Instructions and Required Format; Subsection 2e, Budget for complete instructions.

## **Budget Justification**

See Part One, General Information; Section C, Application Instructions and Required Format; Subsection 2. f), Budget Justification for instructions.

## **Additional Appendices**

See Part One, General Information; Section C, Application Instructions and Required Format; Subsection 2. g), Additional Appendices for instructions.



**RFA # 67-126**

**PAYMENT PROVISIONS**

The Department agrees to pay the Contractor for services rendered pursuant to this Contract as follows:

- A. Subject to the availability of state and Federal funds and the other terms and conditions of this Contract, the Department will reimburse Contractor in accordance with Appendix C, and any subsequent amendments thereto, for the costs incurred in providing the services described in this Contract.
- B. This Contract may span several state fiscal periods; therefore, the Department is obligated to pay no more than the dollar amounts for each state fiscal year (SFY), for the periods of time indicated on the Budget, Appendix C. This shall not prohibit the Department from exercising its discretion to move funds unspent at the end of the SFY from one SFY to another to pay for services provided with separate written Department approval and in accordance with this Contract.
- C. Payment to the Contractor shall be made in accordance with the Budget set forth in Appendix C, and any subsequent amendments thereto, as follows:
  - 1. The Department shall have the right to disapprove any expenditure made by the Contractor that is not in accordance with the terms of this Contract and adjust any payment to the Contractor accordingly.
  - 2. Payments will be made monthly upon submission of an itemized invoice for services rendered pursuant to this Contract using the invoice format in Attachment 1 to this Appendix.
  - 3. An original invoice shall be sent by the Contractor directly to the address as listed in Attachment 1 to this Appendix. Documentation supporting that expenditures were made in accordance with the Contract Budget shall be sent by the Contractor to the Department's Project Officer.
  - 4. The Contractor has the option to reallocate funds between and within budget categories (Budget Revision), subject to the following criteria:
    - a. General Conditions for Budget Revisions
      - i. *Budget Revisions At or Exceeding 20%.*
        - A. The Contractor shall not reallocate funds between budget categories in an amount at or exceeding 20% of the total amount of the Contract per budget year as set forth in Appendix C Budget, and any subsequent amendments thereto, without prior written approval of the Department's Project Officer.
        - B. The Contractor shall request prior written approval from the Department's Project Officer when the cumulative total of all prior Budget revisions in the budget year is 20% or greater of the total amount of the Contract per budget year.
        - C. Reallocations at or exceeding 20% of the total amount of the Contract per budget year may not occur more than once per budget year unless the Department's

Project Officer finds that there is good cause for approving one additional request. The Project Officer's determination of good cause shall be final.

- ii. *Budget Revisions Under 20%*. The Contractor shall notify the Department's Project Officer of any Budget Revision under 20% of the total amount of the Contract per budget year in writing, but need not request Department approval, except as provided for in Paragraph 4(a)(i)(B) above.
  - iii. The Contractor shall obtain written approval from the Department's Project Officer prior to reallocating funding into a previously unfunded budget category or prior to eliminating all funding from an existing budget category, regardless of the percentage amount.
  - iv. The Contractor shall provide the Department's Project Officer with notice or make a request for approval prior to the submission of the next invoice based on these changes.
  - v. At no time can Administrative/Indirect cost rates be increased via a Budget Revision.
- b. Budget Revisions Relating to Personnel
- i. Any change to funds in the Personnel Category requires the approval of the Department's Project Officer, and any such change at 20% or over as set forth in Paragraph 4(a) shall be counted as one Budget Revision under that paragraph.
  - ii. The Contractor may not reallocate funds to, or move funds within, the Personnel Services Category of the Budget (Appendix C), and any subsequent amendments thereto, to increase staff personnel or fringe benefit line items unless one of the following circumstances apply:
    - A. The Contractor is subject to a collective bargaining agreement or other union agreement and, during the term of this Contract, salaries, hourly wages, or fringe benefits under this Contract are increased because of a renegotiation of that collective bargaining agreement or other union agreement. The Contractor shall submit to the Department's Project Officer written documentation of the new collective bargaining or other union agreement, which necessitates such reallocation.
    - B. The Contractor is unable to fill a position that is vacant or becomes vacant at or after the effective date of this Contract. The Contractor shall submit to the Department's Project Officer written justification for the request to increase rates and reallocation of funds in connection with filling such a position in sufficient detail for the Department to evaluate the impact of that reallocation on the performance of the work of the Contract, as well as the Contractor's inability to fill the position at the existing rates. Justification may include, for example, documentation of salaries for the same or similar positions in the same geographic area. No increase relating to a position may exceed 10% of the original rate.
    - C. The Contractor is unable to perform the work of the Contract with the existing positions, titles or classifications of staff. The Contractor may add or change a position, title or classification in order to perform work that is already required. The

Contractor shall submit to the Department's Project Officer for his or her approval written justification for the request to increase rates and reallocation of funds in connection with changing or adding a position, title or classification, in sufficient detail for the Department to evaluate the impact of that reallocation on the performance of the work of the contract, as well as the Contractor's inability to fill current position. Justification may include, for example, documentation of salaries for the same or similar positions in the same geographic area. No increase relating to an addition or change may exceed 10% of the rate for the original position.

- iii. The Department's determination regarding the validity of any justification is final.
  - iv. All increases are subject to the availability of funds awarded under this Contract. The Commonwealth is not obligated to increase the amount of award.
  - v. This paragraph is not intended to restrict any employee from receiving an increase in salary based on the employer's fee schedule for the job classification.
5. Unless otherwise specified elsewhere in this Contract, the following shall apply. Contractor shall submit monthly invoices within 30 days from the last day of the month within which the work is performed. The final invoice shall be submitted within 45 days of the Contract's termination date. The Department will neither honor nor be liable for invoices not submitted in compliance with the time requirements in this paragraph unless the Department agrees to an extension of these requirements in writing. The Contractor shall be reimbursed only for services acceptable to the Department.
  6. The Department, at its option, may withhold the last 20 percent of reimbursement due under this Contract, until the Project Officer has determined that all work and services required under this Contract have been performed or delivered in a manner acceptable to the Department.
  7. The Commonwealth will make payments through the Automated Clearing House (ACH). Within 10 days of award of the Contract or Purchase Order, the Contractor must submit or must have already submitted its ACH information within its user profile in the Commonwealth's procurement system (SRM). Within 10 days of the Grant award, the Grantee must submit or must have already established its ACH information in the Commonwealth's Master Database. The Grantee will also be able to enroll to receive remittance information via electronic addenda and email (e-Remittance). ACH and e-Remittance information is available at <https://www.budget.pa.gov/Services/ForVendors/Pages/Direct-Deposit-and-e-Remittance.aspx>.
    - a. The Contractor must submit a unique invoice number with each invoice submitted. The unique invoice number will be listed on the Commonwealth of Pennsylvania's ACH remittance advice to enable the Contractor to properly apply the state agency's payment to the invoice submitted (for Contracts or Purchase Orders) or to the invoice or program (for Grant Agreements).
    - b. It is the responsibility of the Contractor to ensure that the ACH information contained in SRM (for Contracts or Purchase Orders) or in the Commonwealth's Master Database (for Grant Agreements) is accurate and complete. Failure to maintain accurate and complete information may result in delays in payments.
    - c. In the event this language conflicts with language contained elsewhere in this agreement, the language contained herein shall control.

**RFA # 67-126**  
**PROGRAM SPECIFIC PROVISIONS**

**I. NONDISCRIMINATION/SEXUAL HARASSMENT CLAUSE.**

The following language replaces Paragraph 35 of the Standard General Terms and Conditions (Rev. 2/15) in its entirety:

The Grantee agrees:

- A. In the hiring of any employee(s) for the manufacture of supplies, performance of work, or any other activity required under the Grant Agreement or any subgrant Agreement, Contract, or subcontract, the Grantee, a subgrantee, a Contractor, a subcontractor, or any person acting on behalf of the Grantee shall not discriminate by reason of race, gender, creed, color, sexual orientation, gender identity or expression, or in violation of the *Pennsylvania Human Relations Act* (PHRA) and applicable Federal laws, against any citizen of this Commonwealth who is qualified and available to perform the work to which the employment relates.
- B. The Grantee, any subgrantee, Contractor or any subcontractor or any person on their behalf shall not in any manner discriminate by reason of race, gender, creed, color, sexual orientation, gender identity or expression, or in violation of the PHRA and applicable Federal laws, against or intimidate any of its employees.
- C. Neither the Grantee nor any subgrantee nor any Contractor nor any subcontractor nor any person on their behalf shall in any manner discriminate by reason of race, gender, creed, color, sexual orientation, gender identity or expression, or in violation of the PHRA and applicable Federal laws, in the provision of services under the Grant Agreement, subgrant Agreement, Contract or subcontract.
- D. Neither the Grantee nor any subgrantee nor any Contractor nor any subcontractor nor any person on their behalf shall in any manner discriminate against employees by reason of participation in or decision to refrain from participating in labor activities protected under the *Public Employee Relations Act*, *Pennsylvania Labor Relations Act* or *National Labor Relations Act*, as applicable and to the extent determined by entities charged with such Acts' enforcement, and shall comply with any provision of law establishing organizations as employees' exclusive representatives.
- E. The Grantee, any subgrantee, Contractor or any subcontractor shall establish and maintain a written nondiscrimination and sexual harassment policy and shall inform their employees in writing of the policy. The policy must contain a provision that sexual harassment will not be tolerated and employees who practice it will be disciplined. Posting this Nondiscrimination/Sexual Harassment Clause conspicuously in easily-accessible and well-lighted places customarily frequented by employees and at or near where the Grant services are performed shall satisfy this requirement for employees with an established work site.
- F. The Grantee, any subgrantee, Contractor or any subcontractor shall not discriminate by reason of race, gender, creed, color, sexual orientation, gender identity or expression, or in violation of the PHRA and applicable Federal laws, against any subgrantee, Contractor, subcontractor or supplier who is qualified to perform the work to which the Grant relates.
- G. The Grantee and each subgrantee, Contractor and subcontractor represents that it is presently in compliance with and will maintain compliance with all applicable Federal, state, and local laws and regulations relating to nondiscrimination and sexual harassment. The Grantee and each subgrantee, Contractor and subcontractor further represents that it has filed a Standard Form 100 Employer Information Report ("EEO-1") with the U.S. Equal Employment Opportunity Commission ("EEOC") and shall file an annual EEO-1 report with the EEOC as required for employers' subject to *Title VII of the Civil Rights Act of 1964*, as amended, that have 100 or more employees and employers that have Federal government Contracts of first-tier subcontracts and have 50 or more employees. The Grantee, any

subgrantee, any Contractor or any subcontractor shall, upon request and within the time periods requested by the Commonwealth, furnish all necessary employment documents and records, including EEO-1 reports, and permit access to their books, records, and accounts by the granting agency and the Bureau of Diversity, Inclusion and Small Business Opportunities for purpose of ascertaining compliance with the provisions of this Nondiscrimination/Sexual Harassment Clause.

- H. The Grantee, any subgrantee, Contractor or any subcontractor shall include the provisions of this Nondiscrimination/Sexual Harassment Clause in every subgrant Agreement, Contract or subcontract so that those provisions applicable to subgrantees, Contractors or subcontractors will be binding upon each subgrantee, Contractor or subcontractor.
- I. The Granter's and each subgrantee's, Contractor's and subcontractor's obligations pursuant to these provisions are ongoing from and after the effective date of the Grant Agreement through the termination date thereof. Accordingly, the Grantee and each subgrantee, Contractor and subcontractor shall have an obligation to inform the Commonwealth if, at any time during the term of the Grant Agreement, it becomes aware of any actions or occurrences that would result in violation of these provisions.
- J. The Commonwealth may cancel or terminate the Grant Agreement and all money due or to become due under the Grant Agreement may be forfeited for a violation of the terms and conditions of this Nondiscrimination/Sexual Harassment Clause. In addition, the granting agency may proceed with debarment or suspension and may place the Grantee, subgrantee, Contractor, or subcontractor in the Contractor Responsibility File.

## **II. ADDITIONAL PROVISIONS RELATING TO NONDISCRIMINATION/SEXUAL HARASSMENT.**

The following language replaces Paragraph 36 of the Standard General Terms and Conditions (Rev. 2/15) in its entirety:

The Grantee agrees:

- A. In the hiring of any employee(s) for the manufacture of supplies, performance of work, or any other activity required under the Contract or any subcontract, the Contractor, each subcontractor, or any person acting on behalf of the Contractor or subcontractor shall not discriminate by reason of religion, age, handicap or national origin, against any citizen of this Commonwealth who is qualified and available to perform the work to which the employment relates.
- B. Neither the Contractor nor any subcontractor or any person on their behalf shall in any manner discriminate against or intimidate any of its employees on account of religion, age, handicap or national origin.
- C. The Grantee, any subgrantee, Contractor or any subcontractor shall not discriminate by reason of religion, age, handicap or national origin against any subgrantee, contractor, subcontractor or supplier who is qualified to perform the work to which the contracts relates.
- D. The Contractor and any subcontractors shall ensure that any services or benefits available to the public or other third parties by way of this Contract shall not be denied or restricted for such persons due to race, creed, color, religion, gender, sexual orientation, gender identity or expression, age, handicap, or national origin (national origin protections include persons who are limited English proficient) consistent with the provisions of Title VI of the Civil Rights Act of 1964, Section 504 of the Rehabilitation Act of 1973, Title II of the Americans with Disabilities Act, The Age Discrimination Act of 1975, applicable provisions of the Omnibus Reconciliation Act of 1981 and Pennsylvania Management Directive 215.16.
- E. The Contractor and each subcontractor shall furnish all necessary employment documents and records to and permit access to its books, records, and accounts by the contracting officer and the Department of General Services' Bureau of Diversity, Inclusion and Small Business Opportunities for purposes of investigation to ascertain compliance with the provisions of this

Additional Provisions relating to Nondiscrimination/Sexual Harassment Clause. If the Contractor or any subcontractor does not possess documents or records reflecting the necessary information requested, it shall furnish such information on reporting forms supplied by the contracting officer or the Bureau of Diversity, Inclusion and Small Business Opportunities.

- F. The Commonwealth may cancel or terminate the Grant Agreement and all money due or to become due under the Grant Agreement may be forfeited for a violation of the terms and conditions of this Section II, Additional Provisions Relating To Nondiscrimination/Sexual Harassment Clause. In addition, the granting agency may proceed with debarment or suspension and may place the Grantee, subgrantee, Contractor, or subcontractor in the Contractor Responsibility File.

### **III. CONTRACTOR RESPONSIBILITY PROVISIONS**

The following language replaces Paragraph 41 of the Standard General Terms and Conditions (Rev. 2/15) in its entirety:

The Grantee agrees:

For the purpose of these provisions, the term Contractor is defined as any person, including, but not limited to, a bidder, offeror, loan recipient, grantee or lessor, who has furnished or performed or seeks to furnish or perform, goods, supplies, services, leased space, construction or other activity, under a contract, grant, lease, purchase order or reimbursement agreement with the Commonwealth of Pennsylvania (Commonwealth). The term Contractor includes a permittee, licensee, or any agency, political subdivision, instrumentality, public authority, or other public entity in the Commonwealth.

- A. The Contractor certifies, in writing, for itself and its subcontractors required to be disclosed or approved by the Commonwealth, that as of the date of its execution of this Bid/Contract, that neither the Contractor, nor any such subcontractors, are under suspension or debarment by the Commonwealth or any governmental entity, instrumentality, or authority and, if the Contractor cannot so certify, then it agrees to submit, along with its Bid/Contract, a written explanation of why such certification cannot be made.
- B. The Contractor also certifies, in writing, that as of the date of its execution of this Bid/Contract it has no tax liabilities or other Commonwealth obligations, or has filed a timely administrative or judicial appeal if such liabilities or obligations exist, or is subject to a duly approved deferred payment plan if such liabilities exist.
- C. The Contractor's obligations pursuant to these provisions are ongoing from and after the effective date of the Contract through the termination date thereof. Accordingly, the Contractor shall have an obligation to inform the Commonwealth if, at any time during the term of the Contract, it becomes delinquent in the payment of taxes, or other Commonwealth obligations, or if it or, to the best knowledge of the Contractor, any of its subcontractors are suspended or debarred by the Commonwealth, the Federal government, or any other state or governmental entity. Such notification shall be made within 15 days of the date of suspension or debarment.
- D. The failure of the Contractor to notify the Commonwealth of its suspension or debarment by the Commonwealth, any other state, or the Federal government shall constitute an event of default of the Contract with the Commonwealth.
- E. The Contractor agrees to reimburse the Commonwealth for the reasonable costs of investigation incurred by the Office of State Inspector General for investigations of the Contractor's compliance with the terms of this or any other agreement between the Contractor and the Commonwealth that results in the suspension or debarment of the contractor. Such costs shall include, but shall not be limited to, salaries of investigators, including overtime; travel and lodging expenses; and expert witness and documentary fees. The Contractor shall not be

responsible for investigative costs for investigations that do not result in the Contractor's suspension or debarment.

- F. The Contractor may obtain a current list of suspended and debarred Commonwealth contractors by visiting the eMarketplace website at <http://www.emarketplace.state.pa.us> and clicking the Debarment List tab.

#### IV. **MINIMUM PERSONAL COMPUTER HARDWARE, SOFTWARE, AND PERIPHERALS REQUIREMENTS (REV. 1/19)**

In accordance with the Department's Bureau of Informatics and Information Technology standards:

- A. The Contractor shall adhere to the minimum specifications for all personal Computer purchases or leases made with funds involved with this Contract. The Department's standards are specifically addressed in paragraph D below.
- B. If the Contractor has an exclusive vendor, obtained through a competitive bidding process, from whom all office equipment and related items are purchased, the Contractor shall utilize said vendor. If such exclusive vendor is not used by the Contractor, then three competitive price estimates shall be procured and documented by the Contractor before the personal computer hardware and software shall be purchased. A letter stating which of the above methods is used to satisfy this requirement shall be forwarded to the program staff at the Department within 30 days of the aforementioned purchase. This section supersedes Paragraph 37A of the incorporated document entitled, "Standard General Terms and Conditions" (Grant Agreement) or Paragraph 24A of the incorporated document entitled, "Additional Contract Terms and Conditions" (Contract Agreement).
- C. The Contractor shall be responsible for returning any personal computer hardware, software, and peripherals to the Department within 120 days of the Contract's termination. Should the parties agree to extend the Contract term, or enter into a new Contract, either of which shall only be evidenced by further written agreement, the Contractor may be allowed to continue to maintain possession of said equipment at the Department's discretion.
- D. The parties agree that during the Contract term, the minimum computer configurations shall be in accordance with the current Commonwealth minimum personal computer configurations in effect at the time of the computer purchase to ensure compatibility with the Commonwealth network. The minimum personal computer configurations are as follows:

- Intel Core i7-7700 Processor (8M Cache, up to 4.20 GHz)
- 8 Gigabytes (GB) of RAM
- 256 Gigabytes (GB) Solid State Drive
- 23" FP Monitor
- Intel Gigabit LAN 10/100/1000 Network Interface Card (NIC)
- USB Windows keyboard
- USB Optical mouse
- Sound bar
- Windows 10
- 64-bit Operating System

- E. Contractor shall use Industry Best Practices to secure and protect personal computer systems including but not limited to the use of virus protection, firewall, spyware and intrusion detection software and keep such software up to date with current recommended updates.
- F. Contractor shall keep all Personal Computer Operating Systems and third (3<sup>rd</sup>) Party Personal Computer Software patched with manufacturer recommended critical security patches.

- G. Contractor shall use Industry Best Practices to backup, secure and protect all data collected on personal computer systems on behalf of the Commonwealth. Contractor shall ensure that for all confidential or protected data that the Commonwealth requirements for encryption of data are met. Refer to Commonwealth Information Technology Policies Bulletins for Security at:

<https://itcentral.pa.gov/Pages/IT-Policies.aspx>

- H. Personal Computers under this Contract that connect with Commonwealth Information Technology systems or that may during their lifecycles connect with those systems must comply with applicable standards published by the Commonwealth in their Information Technology Bulletins (IFBs) which can be found at the following location:

<https://itcentral.pa.gov/Pages/IT-Policies.aspx>

If there is a need to deviate from these standards/policies, Contractor seeking a waiver must contact the Project Officer.