

Part A Grantee Evaluation Information - Excerpts from 2007 RFP

D. Proposer Qualifications

The following is a list of requirements that all agencies must meet in order to be considered for a contract to provide HIV/AIDS services with HSPHD. Additional specific requirements for some program areas may be found in the Specific Program Guidelines ([Attachment C](#)).

Providers must be eligible to be licensed, certified and registered as required by state law or rule. Proposers are responsible for knowledge of applicable federal, state, and local laws, rules and regulations that govern all applicable services and programs.

Agencies must comply with all applicable federal, state and local statutes, regulations, rules and ordinances including but not limited to all grant conditions and certifications required by the federal government as a condition of receiving funds under the Ryan White HIV/AIDS Treatment Modernization Act. Such conditions and certifications are described in Federal Certifications ([Attachment E](#)).

In addition to income, agencies must be able to obtain and document in client files medical verification of HIV/AIDS status.

HIV/AIDS service programs are required to have a grievance policy in place at the time service delivery begins. Providers are required to notify clients that such a policy exists.

Agencies must operate programs according to the AIDS-related policies and recommendations of HSPHD, DHS, the Centers for Disease Control and Prevention, and the Health Resources and Services Administration.

Agencies must ensure the confidentiality of all client records including any records of HIV/AIDS status. Pursuant to the Minnesota Government Data Practices Act and federal Health Insurance Portability and Accountability Act (HIPAA) requirements, the agency must agree to maintain the data on individuals received or to which the agency has access according to the statutory provisions applicable to the data.

All agencies must comply with the Single Audit Act and OMB Circular A-133, as applicable. All sub-recipients receiving \$500,000 or more of federal assistance in a fiscal year shall obtain a financial and compliance audit made in accordance with the Single Audit Act or OMB Circular A-133, as applicable. Failure to comply with these requirements could result in forfeiture of federal funds.

All agencies must comply with Hennepin County Affirmative Action requirements.

In fulfilling the duties and responsibilities of this grant contract, agencies receiving funding must also comply with the Americans With Disabilities Act of 1990, 42 U.S.C. § 12101, et. Seq. and the regulations promulgated pursuant to it.

Agencies must make every effort to purchase American-made equipment if equipment is included in the proposal.

Agencies must be willing to meet all other standard contract requirements including insurance requirements of Hennepin County and the State of Minnesota.

Culturally Appropriate Funded Service Provider Qualifications

In addition to the above qualifications, agencies applying specifically to provide Culturally Appropriate services must also:

- Target a clearly defined population that is underserved and/or over-represented in the epidemic.
- Involve members of the target population in program development and evaluation.
- Maintain a program staff, as well as a board of directors where applicable (e.g., in the case of community-based organizations), that reflects the target population.

Applicant agencies must convincingly demonstrate how they will meet the following basic indicator objectives and required characteristics. Furthermore, a provider must demonstrate the potential capacity to deliver a culturally appropriate service by achieving **each** of the following objectives indicating that the target population is meaningfully involved in the organization of service programs:

- Advisory Committee: Ongoing involvement of target population in organization or program development through an advisory committee.
- Staffing: The target population must be reflected among the organization or program staff, whether paid or volunteer.
- Target Population Served: No less than 60% of the agency program users reflect the target population.
- Description of Need: Clearly define services gap and how cultural barriers cause the unmet need or needs experienced by the target population.
- Additional Agency Requirements* A provider must demonstrate potential capacity to deliver a service by achieving **at least one** of the following objectives A-C:
 - (a) Staffing: At least 50% of the organization or program staff, whether paid or volunteer, reflects the target population.
 - (b) Governing Body: The target population is reflected among at least 50% of the governing board.
 - (c) Chain of Command: The program's chain of command includes a member reflective of the target population to be served.

*The additional agency requirements do not apply to target populations defined by age, geography, or transmission-based activities.

Attachment C

Overview of Specific Program Guidelines

The following overview explains the specific goals of each service area, the services that are eligible for funding, the funding that is available, and the specific applicant agency requirements for each service area. The general requirements for all applicant agencies can be found under [“Proposer Qualifications”](#) in this RFP. Please refer to both sections before and while preparing both the Letter of Intent and the Proposal.

Each service area has specific requirements that must be met in order for your proposal to be considered. The Health Resources and Services Administration (HRSA), the federal agency responsible for HIV/AIDS Treatment Modernization Act funding, develops policies that may limit the kind of activities that may be funded in some service areas. It is important to review the information in this attachment for each service area and service activity. Please note that some currently funded services may have a different name, have changes in goals and requirements, or may not appear at all in this RFP.

Funding amounts listed in this document are estimated and will not be final until both Hennepin County’s Human Services and Public Health Department (HSPHD) and the Minnesota Department of Human Services (DHS) receive formal notification of Part A and Part B federal grant awards from HRSA. The total funding included in this RFP is estimated at \$2,391,100.

This RFP is not inclusive of all programs funded for HIV/AIDS.

Outpatient/Ambulatory Medical Care

Applicant Agency Requirements

The following requirements are specific to Medical Services. See [Section D](#).-Proposer Qualifications for other general requirements.

1. Funds may NOT be used to provide primary health care services to people with HIV/AIDS who are on Medical Assistance (MA) or have insurance for covered services. Agencies must have the capacity to refer uninsured or underinsured patients to 3rd party payment programs for medical services. Funds may be used to pay for medical co-payments and deductibles that are not covered by insurance.
2. The provider will develop a follow-up system to ensure that individuals receiving initial assessments return to receive follow-up intervention, assessment, and referral services.

3. For Early Intervention services, agencies will be reimbursed for no more than four visits per client in twelve months.

Transportation

Applicant Agency Requirements

The following agency/program requirements are specific to Transportation Services. See [Section D](#).-Proposer Qualifications for other general requirements.

1. Assistance will be provided only to people living with HIV/AIDS.
2. Assistance will be provided only to individuals with incomes less than 300% of the federal poverty level.
3. Transportation services are to be provided only for appointments to medical care, pharmacy services, mental health, dental care, psychosocial, case management, treatment adherence services, and meals programs. Funded programs must give priority to transportation to appointments for HIV primary medical care.
4. Capacity to directly pay the vendor, provider, volunteer driver, or to reimburse the client must be available. No cash payments may be made to the client in advance of the provision of transportation.
5. Providers must work with current HIV/AIDS case management programs and other service providers to ensure coordinated and non-duplicative transportation services.
6. Agencies currently receiving transportation funding through their case management program are not eligible to apply for additional transportation services for case management clients under this RFP.
7. Agencies in Greater Minnesota seeking transportation funding should propose regional coverage for one or more of the following groups of counties:
 - Becker, Beltrami, Big Stone, Chippewa, Clay, Clearwater, Cottonwood, Douglas, Grant, Hubbard, Jackson, Kittson, Lac Qui Parle, Lake of the Woods, Lincoln, Lyon, Mahnomen, Marshall, Murray, Nobles, Norman, Otter Tail, Pennington, Pipestone, Polk, Pope, Red Lake, Redwood, Renville, Rock, Roseau, Stevens, Swift, Traverse, Wadena, Wilkin, Yellow Medicine
 - Cass, Crow Wing, Itasca, Koochiching
 - Todd, Morrison, Stearns, Benton, Wright, Meeker, Kandiyohi, Mille Lacs, Kanabec
 - Aitkin, Cook, Carlton, Lake, Pine, St. Louis,

- Blue Earth, Brown, Dodge, Faribault, Fillmore, Freeborn, Goodhue, Houston, LeSueur, Martin, McLeod, Mower, Nicollet, Olmsted, Rice, Sibley, Steele, Wabasha, Waseca, Watonwan, Winona
8. Agencies in the metropolitan area seeking funding for transportation must propose coverage for all counties in the 13-county Transitional Grant Area (TGA). Final funding decisions will ensure transportation service coverage for all Minnesota counties.

Treatment Adherence Services

Applicant Agency Requirements

The following agency/program requirements are specific to Treatment Adherence Services. See [Section D.-Proposer Qualifications](#) for other general requirements.

1. Agencies providing treatment adherence must involve a PharmD and/or Registered Nurse in the delivery of services.
2. Proposed Inreach services must be medical clinic-based.

Psychosocial Support

Applicant Agency Requirements

The following agency/program requirements are specific to Psychosocial Support services. See Section D.-[Proposer Qualifications](#) for other general requirements.

1. Services must be provided only to individuals living with HIV/AIDS, and to non-infected individuals if the following criteria are met:
 - The primary purpose is to enable a non-infected individual to participate in the care of someone with HIV/AIDS.
 - The service directly enables an infected individual to receive needed medical or support services by removing an identified barrier to care.
 - The service promotes family stability in coping with the unique challenges posed by HIV/AIDS.
2. Clinical supervision by a licensed mental health provider must be provided to the psychosocial support services provider at a minimum of once per month.

Food Bank/Home Delivered Meals

Applicant Agency Requirements

The following agency/program requirements are specific to Food Bank/Home Delivered Meals services. See Section D.-[Proposer Qualifications](#) for other general requirements.

1. Home-delivered meals and on-site meals must be nutritionally balanced and the menu must be reviewed and approved by a registered dietician.
2. Agencies must comply with all state and local health laws and ordinances concerning preparation, handling, and serving of food.
3. Food shelf distribution should provide a minimum of two (2) days worth of food items for eligible individuals.

Outreach

For the purposes of this RFP, HSPHD will work in partnership with the Minnesota Department of Health (MDH) to fund one joint prevention/care outreach project. If you are applying for the supplemental funding for a prevention outreach component of a joint prevention/care outreach program, please complete all of [Narrative Section III, question 15](#).

Applicant Agency Requirements

The following agency/program requirements are specific to Outreach Services. See Section D.-[Proposer Qualifications](#) for other general requirements.

1. Applicant agencies must currently work in an outreach capacity or have knowledge of successful HIV prevention counseling and HIV testing techniques.
2. Applicant agencies must collaborate with currently funded HIV/AIDS service agencies and have referral relationships with HIV/AIDS health care providers.
3. Applicant agencies must target efforts at populations known through local epidemiological data to be at a disproportionate risk for HIV/AIDS infection.
4. Applicant agencies must also conduct outreach at times and in locations where there is a high probability that HIV/AIDS-infected individuals will be reached.
5. Applicant agencies must coordinate activities with local prevention education programs, but cannot propose efforts that exclusively promote HIV prevention education unless such efforts are geared toward “prevention with positives.”

6. Applicant agencies must describe in proposal Narrative Section III how their proposed Outreach program will provide care coordination for individuals living with HIV/AIDS who know their status and are not accessing HIV primary medical care. Proposals must describe efforts that will be made to refer clients for HIV primary medical care, to ensure clients make their medical appointments, and any follow-up that will occur to ensure that appointments are kept.
7. Applicant agencies interested in conducting a joint HIV prevention and care Outreach project must include a description of their proposed activities as outlined under Proposal Contents IV.-B. in [Narrative Section III, question 15](#).
8. In addition to meeting HSPHD's reporting requirements, applicant agencies interested in conducting a joint HIV prevention and care outreach project must also be able to meet the following MDH requirements with regard to the Counseling, Testing and Referral component of their project:
 - Individual level information will be reported monthly by completing and submitting the MDH HIV Testing Form.
 - Quarterly reports will be submitted throughout the grant period. A list of required summary information will be provided by MDH.
 - A final report summarizing funded activities will be required within 30 days after the end of grant period.

Greater Minnesota Initiatives

Applicant Agency Requirements

The following agency/program requirements are specific to Greater Minnesota Initiatives. See Section D.-[Proposer Qualifications](#) for other general requirements.

1. Services are provided only to individuals living with HIV/AIDS and to non-infected individuals if:
 - The primary purpose of the services is to enable non-infected individuals to participate in the care of someone who is living with HIV/AIDS.
 - The service directly enables an infected individual to receive needed medical support or support services by removing an identified barrier to HIV primary medical care.
 - The service promotes family stability in coping with the unique challenges posed by HIV/AIDS.

2. Providers must be part of a network of services in the region that provide a continuum of care. Agencies must be aware of, and refer to in their proposal narrative, the existence of other services for persons who are living with HIV/AIDS.
3. Proposals must be for services that are prioritized by the Minnesota HIV Services Planning Council and that are not already available on a statewide basis (see list above).
4. Transportation funding requests will not be considered under the auspices of Greater Minnesota Initiatives and proposals for Transportation funding must be submitted separately.

Health Education/Risk Reduction

Applicant Agency Requirements

The following agency/program requirements are specific to Health Education/Risk Reduction services. See Section D.-[Proposer Qualifications](#) for other general requirements.

Services must be provided only to individuals living with HIV/AIDS, and to non-infected individuals if the following criteria are met:

- The primary purpose is to enable a non-infected individual to participate in the care of someone with HIV/AIDS.
- The service directly enables an infected individual to receive needed medical or support services by removing an identified barrier to care.
- The service promotes family stability in coping with the unique challenges posed by HIV/AIDS.

Home Health Care

Applicant Agency Requirements

The following agency/program requirements are specific to Home Healthcare Services. See Section D.-[Proposer Qualifications](#) for other general requirements.

1. Agencies will provide services only to people with an AIDS diagnosis or who are HIV+ and have a disability determination.
3. Agencies will provide services only to people who are not on or are not eligible for Medical Assistance (MA). Agencies must periodically assess client eligibility for MA and if determined eligible, must assist the client in applying for MA.

III. Submission of Proposals

A. Time Line

Release of Request for Proposals	October 1, 2007
Technical Assistance Sessions	Wednesday, October 10, 2007 9:00am – 11:00am <u>session repeated on</u> Thursday, October 11, 2007 1:00pm – 3:00pm

Letters of Intent Due Monday, October 22, 2007 at 4:00 p.m.

**Proposals Due Wednesday, November 14, 2007
at 4:00 p.m.**

Announcement of Agencies Selected December 19, 2007

Anticipated Effective Date of Contracts Part A - March 1, 2008
Part B - April 1, 2008

B. Proposal Submission

The Proposal is due at 4pm on November 14, 2007.

All 15 copies of the full proposal must arrive at HSPHD on or before 4 p.m. on November 14, 2007. **There will be NO exceptions to the deadline date and time.** Proposals submitted prior to the November 14, 2007 deadline are welcome. Proposals submitted via email will not be accepted.

Submit proposals to:

**Mary Jo Meuleners
Program Contract Manager, Ryan White Program
Hennepin County Human Services and Public Health Department
525 Portland Avenue South, Mail Code 963, 3rd Floor
Minneapolis, MN 55415**

Failure to submit a proposal on time is grounds for rejection of the proposal. The County is not responsible for delays caused by the US Postal Service or any other carrier or delivery service.

VI. Evaluation and Selection

A committee consisting of community representatives, people living with HIV/AIDS and individuals with experience reviewing grant applications shall review proposals and make funding recommendations. Proposers shall be notified in writing of selection decisions. Hennepin County reserves the right to reject any and all proposals. If clarifications are needed, the County reserves the right to notify the Proposer. The County reserves the right to interview any or all Proposers at its discretion. The County reserves the right to waive minor irregularities in the RFP process. The County reserves the right to award a contract(s) to a non-Proposer(s).

Proposals will be evaluated according to the following criteria:

1. **The Agency** (5 points)
 - A. Mission is consistent with providing services to people with HIV/AIDS.
 - B. Capacity to deliver HIV/AIDS programming and an infrastructure that supports this is in place.
 - C. Agency ability to collaborate with other agencies.

2. **Current HIV/AIDS Programs** (10 points)
 - A. Proposal adequately describes current services offered.
 - B. Current programming serves an appropriate number of people with HIV/AIDS.
 - C. Proposal reflects numbers served in previous year.
 - D. Staff are qualified to provide current services to people with HIV/AIDS.
 - E. Agency understands challenges to providing services and has in place an appropriate plan of action to overcome these challenges.

3. **The Proposed Program** (35 points)
 - A. Proposed program is consistent with agency mission.
 - B. Proposed program goals/objectives are realistic and achievable.
 - C. Proposed program has realistic goals in terms of the number of people it will serve.
 - D. Proposed program's outreach activities will successfully reach people with HIV/AIDS.
 - E. Agency has experience with and capacity to serve the population the program is aimed at reaching.
 - F. Geographic focus of proposed program is appropriate.
 - G. Proposed program staff is qualified to deliver services.
 - H. Persons with HIV/AIDS are involved in both the design and implementation of agency's HIV/AIDS programming.
 - I. Proposed program is supported by other sources of funding.
 - J. Proposed program approach could serve as a model for providing HIV/AIDS services.

- K. Program is part of a collaborative effort aimed at providing access to the entire continuum of care for people with HIV/AIDS.
- L. Evaluation plans for proposed program are both ongoing and appropriate.
- M. Agency understands importance of establishing and measuring outcomes, as well as the need to change the way services are provided if outcomes necessitate. Agency can also articulate results of data that is being collected about client-level outcomes.
- N. Proposed program will assist clients with overcoming language and other barriers to ensure access to services.
- O. **PROPOSERS APPLYING FOR PREVENTION OUTREACH FUNDING TO SUPPLEMENT THEIR CARE OUTREACH SERVICES ONLY:**
 - i. Agency understands target population.
 - ii. Proposal adequately describes outreach activities to reach target population.
 - iii. Agency is currently offering HIV testing or can describe the testing technology they would use.
 - iv. Proposed program staff have completed all required MDH trainings.
 - v. Proposal adequately describes how agency will integrate HIV counseling, testing and referral activities into current outreach efforts.
 - vi. Proposal addresses incorporating data collection into outreach activities.
 - vii. Proposal describes process for ensuring that clients return for their test results.
 - viii. Proposal describes referral process for high-risk individuals.
 - ix. For newly diagnosed or individuals who identify as not accessing HIV primary medical care in the past six months, proposed service has mechanism for referral to HIV primary medical care.
 - x. Proposed service has mechanism for following up with clients or providers to ensure access and adherence to HIV primary medical care.
 - xi. Proposed service has mechanism for encouraging adherence to primary medical care.

- 4. **Description of Quality Management Program and Plan** *(15 points)*
 - A. Proposal demonstrates top-down commitment to QM as demonstrated by adequate staffing and resources devoted to quality programming.
 - B. Proposal includes description of overarching quality goals that focus on improving client access to and participation in HIV primary medical care.
 - C. Proposal includes one or more components of consumer involvement in quality programming, e.g. agency has an active consumer advisory board, one or more consumers are included in the quality planning team; quality work plan includes a consumer satisfaction survey.
 - D. Agency has a data management system with capacity for tracking and reporting on identified quality measures for individual clients.

- E. Agency's quality program philosophy reflects an understanding of the importance of clinical measures to demonstrate the effectiveness of all service activities.
 - F. Agency's description of its process for developing annual quality work plans reflects a grasp of the basic Plan-Do-Study-Act quality cycle.
5. **Agencies specifically applying for Culturally Appropriate Services** (10 points)
- A. Target population is clearly defined.
 - B. Cultural barriers to services are clearly identified and strategies employed to mitigate such barriers are realistic.
 - C. Agency involves the target population in defining, implementing, and evaluating services.
 - D. Agency meets Additional Agency Requirements in Section D. "Proposer Qualifications"
6. **Budget and Budget Justification Narrative** (15 points)
- A. The budget realistically supports the proposed program.
 - B. The budget narrative is justifiable and describes thoroughly the proposed use of funds.
 - C. The budget indicates that the program represents a "good value" in HIV/AIDS programming.
7. **Program Expenditure and Service Activity History – currently funded programs only** (10 points)
- A. For providers with a history of Ryan White funding, provider has adequately spent their Ryan White program funds in the past.
 - B. Provider has met contractual goals for number of clients served.

Shortly after the proposals are received at HSPHD, members of the proposal review committee will be sent each proposal with scoring sheets as well as the Program Expenditure and Service Activity Summary ([Attachment N](#)-to be completed by Hennepin County staff). The proposal review committee will read and individually score proposals prior to the review committee meeting. Scores will be totaled and averaged as part of the selection process for funding awards. Scores, however, will not be the sole basis for funding decisions. During the review meetings, reviewers will discuss proposals, determine which will be recommended for funding, and recommend funding award amounts.

Conflict of Interest is defined as the reviewer being involved with an applying agency/organization or benefiting in any way from an award being made to an applying agency. Involvement is defined as the reviewer being employed, volunteering (including board membership), consulting, receiving services, or connected with the organization through a family member/significant other. HSPHD will make every effort to manage conflicts of interest during the review process.

Staff from Hennepin County Human Services and Public Health Department and the Minnesota Departments of Human Services and Health will serve as information resources to the Proposal Review Committee. The staff representing these agencies will share information in response to

questions from the reviewers. As resources, the staff do not want to influence funding recommendations, but do want to serve as resources to those making the recommendations. However, in addition to responding to questions, the staff may interject information if there is past contractual experience contrary to information presented in a proposal or presented during the reviewers' discussion that is inconsistent with data or the direct experience of resource staff.

Applicant agencies will be notified by mail of the results of the review process by December 19, 2007. Results of the review committee's decisions will not be provided via the telephone, fax, or email.

Any contracts that may be awarded as a result of this RFP process are subject to final approval by the Hennepin County Board of Commissioners and contingent upon the receipt of federal funds under the Ryan White HIV/AIDS Treatment Modernization Act.

Attachment E

FEDERAL CERTIFICATIONS

1. CERTIFICATION REGARDING DEBARMENT AND SUSPENSION

The Provider (authorized official signing for the Provider) certifies to the best of his or her knowledge and the belief, that the defined as the primary participant in the accordance with 45 CFR Part 76, and its principals:

- (a) are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions by any Federal Department or agency;
- (b) have not within a 3-year period preceding this proposal been convicted of or had a civil judgment rendered against them for commission for fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State, or local) transaction or contact under a public transaction; violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;
- (c) are not presently indicted or otherwise criminally or civilly charged by governmental entity (Federal, State, or local) with commission of any of the offenses enumerated in paragraph (b) of this certification; and
- (d) have not within a 3-year period preceding this application/proposal had one or more public transactions (Federal, State, or local) terminated for cause or default.

Should the Provider not be able to provide this certification, an explanation as to why should be placed after the assurance page in the application package.

The Provider agrees by submitting this proposal that it will include, without modification, the clause titled "Certification Regarding Debarment, Suspension, Ineligibility, and Voluntary Exclusion—Lower Tier covered Transactions" in all lower tier covered transactions (i.e., transactions with sub-grantees and/or contractors) and in all solicitations for lower tier covered transactions in accordance with 45 CFR Part 76.

2. CERTIFICATION REGARDING DRUG-FREE WORKPLACE REQUIREMENTS

The Provider (authorized official signing for the Provider) certifies that the Provider will, or will continue to, provide a drug-free work-place in accordance with 45 CFR part 76 by:

- (a) Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession or use of a controlled substance is prohibited in the grantee's work-place and specifying the actions that will be taken against employees for violation of such prohibition;
- (b) Establishing an ongoing drug-free awareness program to inform employees about—
 - (1) The dangers of drug abuse in the workplace;
 - (2) The grantee's policy of maintaining a drug-free workplace;
 - (3) Any available drug counseling, rehabilitation, and employee assistance programs; and
 - (4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace;
- (c) Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph (a) above;
- (d) Notifying the employee in the statement required by paragraph (a), above, that as a condition of employment under the grant, the employee would --
 - (1) Abide by the terms of the statement; and
 - (2) Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction;
- (e) Notifying the agency in writing within ten calendar days after receiving notice under paragraph (d) (2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employee must provide notice, including position title, to every grant officer or other designee on whose grant activity the convicted employee was working, unless the Federal agency has designated a central point for the receipt of such notices. Notice shall include the identification number(s) of each affected grant;
- (f) Taking one of the following actions, within 30 calendar days of receiving notice under paragraph (d) (2), with respect to any employee who is convicted—
 - (1) Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or
 - (2) Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purpose by a Federal, State, or local health, law enforcement, or other appropriate agency;
- (g) Making a good faith effort to continue to maintain a drug-free workplace through implementation of paragraphs (a), (b), (c), (d), (e), and (f).

For purpose of paragraph (e) regarding agency notification of criminal drug convictions, the DHHS has designated the following central point for receipt of such notices:

Office of Grants and Acquisition Management
Office of Grants Management
Office of the Assistant Secretary for Management and Budget
Department of Health and Human Services
200 Independence Avenue, SW, Rm. 517-D
Washington, D.C. 20201

3. CERTIFICATION REGARDING LOBBYING

Title 31, United States Code, Section 1352, entitled "Limitation on the use of appropriated funds to influence certain Federal contracting and financial transactions," generally prohibits recipients of Federal grants and cooperative agreements from using Federal (appropriated) funds for lobbying the Executive or Legislative Branches of the Federal Government in connection with SPECIFIC grants or cooperative agreement. Section 1352 also requires that each person who request or receives a Federal grant or cooperative agreement must disclose lobbying undertaken with non-Federal (non-appropriated) funds. These requirements apply to grants and cooperative agreements EXCEEDING \$100,000 in total costs (45 CFR Part 93).

The Provider (authorized official signing for the Provider) certifies, to the best of his or her knowledge and belief that:

(1) No Federal appropriated funds have been paid or will be paid by or on behalf of Provider, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.

(2) If any funds other than Federally appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersign shall complete and submit Standard Form-LLL, "Disclosure of Lobbying Activities," in accordance with its instructions. (If needed, Standard Form-LLL, "Disclosure of Lobbying Activities," its instructions, and continuation sheet are included at the end of this application form.)

(3) The Provider shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by Section 1352, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

4. CERTIFICATION REGARDING PROGRAM FRAUD CIVIL REMEDIES ACT (PFCRA)

The Provider (authorized official signing for the Provider) certifies that the statements herein are true, complete, and accurate to the best of his or her knowledge, and that he or she is aware that any false, fictitious, or fraudulent statements or claims may subject him or her to criminal, civil, or administrative penalties. The Provider agrees that the Provider will comply with the Public Health Services terms and conditions of award if a grant is awarded as a result of this application.

5. CERTIFICATION REGARDING ENVIRONMENTAL TOBACCO SMOKE

Public Law 103-227, also known as the Pro-Children Act of 1994 (Act), requires that smoking not be permitted in any portion of any indoor facility owned or leased or contracted for by an entity and used routinely or regulated for the provision of health, day care, early childhood development services,

education or library services to children under the age 18, if the services are funded by Federal grant, contract, loan, or loan guarantee. The law also applies to children's services that are provided in indoor facilities that are constructed, operated, or maintained with such Federal funds. The law does not apply to children's service providers in private residence, portions of facilities used for inpatient drug or alcohol treatment, services providers whose sole source of applicable Federal funds is Medicare or Medicaid, or facilities where WIC coupons are redeemed.

Failure to comply with the provision of the law may result in the imposition of a civil monetary penalty of up to \$1,000 for each violation and/or the imposition of an administrative compliance order on the responsible entity.

By signing the certification, the Provider certifies that the Provider will comply with the requirements of the Act and will not allow smoking within any portion for any indoor facility used for the provision of services for the children as defined by the Act.

The Provider agrees that it will require that the language of this certification be included in any subawards, which contain provisions for children's services and that all subrecipients shall certify accordingly.

The Public Health Service strongly encourages all grant recipients to provide a smoke-free workplace and promote the non-use of tobacco products. This is consistent with the PHS mission to protect and advance the physical and mental health of the American people.