



PROJECT CHECKLIST

Approved

For CPAC Team Use Only	
Date Received	_____
Date Returned	_____
Date Accepted	_____

IMPORTANT: PLEASE READ AND FOLLOW THE INSTRUCTIONS FOR COMPLETING THE PROJECT CHECKLIST AND CONTACT THE APPROPRIATE TEAM LEADER IF YOU HAVE ANY FURTHER QUESTIONS. ALL INFORMATION SHOULD BE COMPLETED, INCLUDING THE SUPPLEMENTAL CHECKLIST REQUIRED BY THE SPECIFIC CPAC TEAM. ATTACH ALL REQUIRED MATERIALS AND SUBMIT FOR HANDLING TO THE DEPARTMENT OF PROCUREMENT SERVICES, ROOM 403, CITY HALL, 121 N. LASALLE STREET, CHICAGO, ILLINOIS

PROJECT

Date: 1/12/06 Contact Person: Maribel Valdez
 ID No. (Spec, RX, Project): 43385 Tel: 7-8828 Fax: 7-1031 E-mail: _____
 Department: #41 Health Project Manager: Jim Dohr
 Bureau: HIV/AIDS Tel: 7-9649 Fax: 7-9420 E-mail: _____
 Contract No. (if known) 25152 Estimated Value \$1,500,000
 Project Title/Description TECHNICAL ASSISTANCE, QUALITY ASSURANCE, AND PROGRAM EVALUATION

SCOPE STATEMENT

Attached is a detailed scope of services and/or specification

IMPORTANT: THIS IS A CRITICAL PORTION OF YOUR SUBMITTAL. IN ORDER FOR A TEAM TO ACCEPT YOUR SUBMITTAL YOU MUST COMPLETE ALL TEAM SPECIFIC SCOPE REQUIREMENTS AS SET FORTH IN THE SUPPLEMENTAL CHECKLIST FOR THAT TEAM.

The following is a general description of what would be included in a Scope of Services or Specification:
 A clear description of all anticipated services and products, including: time frame for completion, special qualifications of prospective vendors, special requirements or needs of the project, locations, anticipated participating user departments, citation of any applicable City ordinance or state/federal regulation or statute.

05 JAN 12 PM 4:33

TYPE OF PROCUREMENT REQUESTED (check all that apply)

Competitive Bid RFQ/RFP/RFS/RFI Sole Source Term Agreement One Shot
 Mod/Amendment Time Extension Additional Funding Small Order S/O Emergency

FORMS F-25* (add line items) F-10 *(special approval) SSRB** (Sole Source approval)
 F-26* (new term agreement) RX (one-shot requisition) OBM Authorization
 F-27* (time extension) APRF (all purpose request form)
 F-29* (change vendor limit)

** Sole source requests must include vendor quotes/proposal and MBE/WBE compliance requirements

FUNDING

City: Corporate Bond Enterprise Grant* Other _____
 State: IDOT/Transit IDOT/Highway Grant* Other _____
 Federal: FHWA FTA FAA Grant* Other _____

Funding Strips 05-0562-41-3350-0100-0140-05BS71

no compliance due to contract with city

*75% of work is done in the city way
20% of work is done by*

* Attach copy of applicable grant agreement terms and conditions language:

TIME FRAME

Date Needed: 2/1/06

Requested Contract Term (y/m/d): 3/1/06-2/28/08

PRE BID/SUBMITTAL REQUIREMENTS

Requesting Pre Bid/Submittal Conference? Yes No Requesting Pre Bid/Submittal be Mandatory? Yes No
 Requesting Site Visit? Yes No Requesting Site Visit be Mandatory? Yes No

**CITY OF CHICAGO
 PURCHASE REQUISITION**

Copy (Department)

DELIVER TO: 041-3350 DEPAUL 2FL 333 S. STATE ST. 2ND FLOOR Chicago, IL 60604	REQUISITION: 25152 PAGE: 1 DEPARTMENT 41 - DEPARTMENT OF HEALTH : Maribel E Valdez PREPARER: NEEDED: 1/10/2006 APPROVED:
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REQUISITION DESCRIPTION

NEW BLANKET PURCHASE ORDER FOR THE COMPANY
 SPECIFICATION NUMBER: 43385

COMMODITY INFORMATION

LINE	ITEM	QUANTITY	UOM	UNIT COST	TOTAL COST						
1	94855	1,500,000.00	USD	0.00	0.00						
TEACHNICAL ASSITANCE, QUALITY ASSURANCE AND PROGRAM EVALUATION											
SUGGESTED VENDOR:			REQUESTED BY: Maribel E Valdez								
DIST	BFY	FUND	COST CTR	APPR	ACCNT	ACTV	PROJECT	RPT CAT	GENRL	FUTR	Dist. Amt.
1	005	0562	0413350	0100	220140	0000	00000000	05BS71	00000	0000	0.00
LINE TOTAL:											0.00
REQUISITION TOTAL:											0.00

Where a commodity is for a particular or unique use other than standard quality, grades, color, size or other characteristics, give details of how it will be and for what purpose.
 Requisitions prepared incorrectly will be returned to the using department.

JUSTIFICATION FOR NON-COMPETITIVE PROCUREMENT

COMPLETE THIS SECTION IF NEW CONTRACT

For contract(s) in this request, answer applicable questions in each of the 4 major subject areas below in accordance with the Instructions for Preparation of Non-Competitive Procurement Form on the reverse side.

Request that negotiations be conducted only with BOARD OF TRUSTEES
UNIV. OF ILLINOIS for the product and/or services described herein.
(Name of Person or Firm)

This is a request for _____ (One-Time Contractor Requisition # _____, copy attached) or Term Agreement or
_____ Delegate Agency (Check one). If Delegate Agency, this request is for "blanket approval" of all contracts within the

_____ (Attach List) Pre-Assigned Specification No. _____
(Program Name) Pre-Assigned Contract No. _____

COMPLETE THIS SECTION IF AMENDMENT OR MODIFICATION TO CONTRACT

Describe in detail the change in terms of dollars, time period, scope of services, etc., its relationship to the original contract and the specific reasons for the change. Indicate both the original and the adjusted contract amount and/or expiration date with this change, as applicable. Attach copy of all supporting documents. Request approval for a contract amendment or modification to the following:

Contract #: _____ Company or Agency Name: _____
Specification #: _____ Contract or Program Description: _____
Mod. #: _____ (Attach List, if multiple)

JAMES DONR 747-9649 James R. Donr PUBLIC HEALTH 11-15-2005
Originator Name Telephone Signature Department Date

Indicate SEE ATTACHED in each box below if additional space needed:

() PROCUREMENT HISTORY <p style="text-align: center;"><i>SEE ATTACHED</i></p>
() ESTIMATED COST <p style="text-align: center;"><i># 1,500,000 FOR 3-YEAR PERIOD</i></p>
() SCHEDULE REQUIREMENTS <p style="text-align: center;"><i>SEE ATTACHED</i></p>
() EXCLUSIVE OR UNIQUE CAPABILITY <p style="text-align: center;"><i>SEE ATTACHED.</i></p>
() OTHER

APPROVED BY: [Signature]
DEPARTMENT HEAD
OR DESIGNEE

DATE: 11/15/05

BOARD CHAIRPERSON

DATE

Non-Competitive Procurement Request for Midwest AIDS Training and Education Center (MATEC)

Chicago Department of Public Health
Division of STD/HIV/AIDS Public Policy and Programs

Procurement History

1. The Department of Public Health needs specialized evaluation, quality assurance and HIV/AIDS-specific technical assistance services as mandated by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services.
2. This is a continuation of previous procurement. MATEC has been a long time subcontractor for HIV/AIDS training, evaluation and other technical services. MATEC is one of only 11 sites in the U.S. funded through the Ryan White CARE Act, the same legislation that funds Title I HIV care planning and services to Chicago, created to provide these services. MATEC is the only such entity in the Midwest. MATEC has historically been essential in helping ensure that Title I legislative and administrative requirements are met.
3. There have been no attempts to competitively bid this the requirement.
4. Ryan White CARE Act legislation and Health Resources and Services Administration's requirements are the sources that have been used.
5. This request is for a 3-year period, which is in-line with nearly all HIV/AIDS contracts and planning cycles. Future requests will likely be made for doing business with MATEC.
6. The Ryan White CARE Act is reauthorized every 5-years. Future competitive bidding may be possible if the Ryan White requirements change the scope of work or requirements for grantees, or funds and trains other entities to provide AIDS education and training services.

Estimated Cost

1. The estimated cost is \$1,500,000 for the 3-year period 2006-2008. This amount may vary depending on the needed services each year. The funding source is the federal Ryan White CARE Act Title I grant.
2. The estimated cost per fiscal year is \$500,000.
3. The basis for estimating the cost is an examination of previous years contracts and amendments. The current estimate increases the level from previous budget amounts in anticipation of increased grant requirements effective March 1, 2006 as part of new reauthorization language.
4. As a long time collaborator on the Title I grant, MATEC has both institutional and historical information relevant to the success of the grant and the expertise required to develop and enhance existing surveys, a strong relationship with our common funder; a good and neutral reputation in the HIV/AIDS community; and the respect of providers.
5. Negotiation of the price will occur between CDPH STD/HIV/AIDS program staff, CDPH Contracts staff and MATEC. The negotiations will base on a detailed analysis of anticipated required and needed activities. The estimated cost is deemed reasonable based on historical activities, best current information about

upcoming requirements and activities, and allowable amounts for these activities within different portions of the Title I grant budget.

Schedule Requirements

1. The schedule was developed based on the grant's fiscal year. This schedule does not vary and is always known.
2. Not applicable.
3. The schedule is mainly determined by the fiscal year for the grant which is March 1 - February 28. The schedule for some of the specific activities will be determined by the funder and the HIV Service Planning Council's annual calendar of needs assessment and priority setting activities.
4. Delays for competitive bidding would impact the Chicago Area HIV/AIDS Planning Council's, the 50-member Mayoral appointed community planning group's, ability to complete it's legislatively required activities. Delays would also compromise the STD/HIV/AIDS Division's ability to comply with all parts of the Title I grant including loss of grant funds due to unexpended monies.

Exclusive or Unique Capability

1. Please see attached
2. Please see attached
3. Please see attached
4. Not applicable
5. Please see attached
6. Not applicable
7. No
8. Not applicable

MBE/WBE Compliance Plan

This agreement is with the Board of Trustees of the University of Illinois who request a waiver of the MBE/WBE requirements.

Non-Competitive Procurement Justification

Agency: Midwest AIDS and Training and Education Center

Estimated Dollar Allocation: \$1,500,000

Funding Source: The HIV Emergency Relief Project Grant, Ryan White CARE Act Title I, awarded by the Department of Health and Human Services, Services Health Resources and Services Administration (HRSA). CFDA 93.914

Services to be provided: Specialty Evaluation, Quality Assurance, Technical Assistance, and Data Consultation Services

Timeline: Services will commence on March 1, 2006 and extend through February 28, 2009.

Justification:

Midwest AIDS and Training and Education Center (MATEC) has been providing high quality, specialized evaluation, quality assurance, and technical assistance consultation services for more than 7 years to the Chicago Department of Public Health's, Division of STD/HIV/AIDS. These activities are mandated by HRSA. MATEC is a federally funded regional HIV/AIDS Training and Education Center. There are 11 Centers across the country. The Centers are designed to provide specialized technical assistance to Grantees of Ryan White CARE Act grants and AIDS Service Providers throughout their respective regions. There are no other know entities that provide these Ryan White CARE Act-specific services. MATEC is based at the University of Illinois at Chicago in the Jane Addams College of Social Work. MATEC provides training and information services through seven local sites in seven states including Illinois, Indiana, Iowa, Michigan, Minnesota, Missouri, and Wisconsin. The Centers promote the utilization of the U.S. Health and Human Services' Public Health Services guidelines for the provision of health care to people living with HIV/AIDS. In addition to the contracted evaluation consultation services provided to the Division, MATEC also provides trainings to CDPH staff, Division funded delegate agencies and other medical care providers.

The Division wishes to ensure through the utilization of consultation services from MATEC the provision of U.S. Public Health Services supported HIV specific evaluation, quality assurance, and technical assistance consultation services for our nine county regions. It is these reasons that the Division of STD/HIV/AIDS, the Grantee for the Chicago EMA Ryan White CARE Act Title I program, wishes to initiate a non-competitive procurement contract with Midwest AIDS and Training and Education Center.

Delegate Agency Non-Competitive Procurement Justification

Agency: Midwest AIDS and Training and Education Center

Estimated Dollar Allocation: \$1,500,000

Funding Source: The HIV Emergency Relief Project Grant, Ryan White CARE Act Title I, awarded by the Department of Health and Human Services, Services Health Resources and Services Administration (HRSA). CFDA 93.914

Services to be provided: Specialty Evaluation, Quality Assurance, Technical Assistance, and Data Consultation Services

Timeline: Services will commence on March 1, 2006 and extend through February 28, 2009.

Justification:

Midwest AIDS and Training and Education Center (MATEC) has been providing high quality, specialized evaluation, quality assurance, and technical assistance consultation services for more than 7 years to the Chicago Department of Public Health's, Division of STD/HIV/AIDS. These activities are mandated by HRSA. MATEC is a federally funded regional HIV/AIDS Training and Education Center. There are 11 Centers across the country. The Centers are designed to provide specialized technical assistance to Grantees of Ryan White CARE Act grants and AIDS Service Providers throughout their respective regions. There are no other known entities that provide these Ryan White CARE Act-specific services. MATEC is based at the University of Illinois at Chicago in the Jane Addams College of Social Work. MATEC provides training and information services through seven local sites in seven states including Illinois, Indiana, Iowa, Michigan, Minnesota, Missouri, and Wisconsin. The Centers promote the utilization of the U.S. Health and Human Services' Public Health Services guidelines for the provision of health care to people living with HIV/AIDS. In addition to the contracted evaluation consultation services provided to the Division, MATEC also provides trainings to CDPH staff, Division funded delegate agencies and other medical care providers.

The Division wishes to ensure through the utilization of consultation services from MATEC the provision of U.S. Public Health Services supported HIV specific evaluation, quality assurance, and technical assistance consultation services for our nine county regions. It is these reasons that the Division of STD/HIV/AIDS, the Grantee for the Chicago EMA Ryan White CARE Act Title I program, wishes to initiate a non-competitive procurement contract with Midwest AIDS and Training and Education Center.

Board of Trustees University of Illinois
Midwest AIDS Training and Education Center (MATEC)

Schedule of Compensation

March 1, 2006 - February 28, 2007	\$500,000 (estimate)
March 1, 2007 – February 29, 2008	\$500,000 (estimate)
March 1, 2008 - February 28, 2009	\$500,000 (estimate)

Agency will be paid an hourly rate of \$70.00 (USD) for successful completion of each project. Agency will submit invoices to the Chicago Department of Public Health (CDPH) at the completion of each project detailing the date, the number of hours worked and description of services rendered. CDPH will pay the invoice within 60 days after receipt of invoice.

Compensation includes all expenses whatsoever that the agency incurs; and, maximum compensation must not exceed \$1,500,000 over the three year period.

BOARD OF TRUSTEES
UNIVERSITY OF ILLINOIS AT CHICAGO
Midwest AIDS Training and Education Center
SCOPE OF SERVICES

Information Gathering

- Develop and conduct data gathering for HIV service delivery planning in the Eligible Metropolitan Area (EMA), focusing on specific programmatic or geographic areas as identified by CDPH and other stakeholders.
- Conduct needs assessment studies among service providers, such as social workers, dentists, on specific training topics as identified by CDPH.

Quality Assurance

- Gather input from a variety of sources, e.g., focus groups, surveys, on Quality Standards for HIV care in the EMA and compile relevant materials for use by sub-grantees to ensure that quality standards in service delivery are met.
- Analyze the peer review process and provide recommendations on conducting and using the results of that process.
- Provide technical assistance for case management assessment.
- Provide technical assistance in the implementation of system-wide client-level data project and participate in advisory group for sub-grantees.
- Provide technical assistance and support for Client Grievances project.
- Develop mechanisms for input from sub-grantees and Planning Council to assess CDPH Title I management and to collect and analyze data.

Provider Training in Support of Quality Assurance

- Train medical providers from sub-grantees on Public Health Service (PHS) Guidelines and other best practices through the Physician Core Seminar, the Chicago HIV Providers Breakfast Club and the Southside HIV Providers Forum.
- Train CDPH and sub-grantee staff members through the Multidisciplinary Core Training.
- Train CDPH sub-grantees staff on HIV-related topics, with topics to be decided, e.g., HIV Counseling/Testing, Cultural Competence, Adherence Counseling, and Prevention with Positives.
- Conduct one Training of Trainers workshop on Cultural Competency in HIV Services for sub-grantees.
- Based on data collected from the needs assessment of medical providers, offer an appropriate training opportunity, as identified.
- With assistance from CDPH, continue to maintain an updated list of medical providers from sub-grantees EMA-wide.
- Develop evaluation of training activities in support of sub-grantees.

Cross-Title and Inter-State Collaboration

- Assist in increasing HIV service delivery knowledge sharing and collaboration within Illinois and across the Midwest.



MIDWEST AIDS TRAINING + EDUCATION CENTER

HEADQUARTERS

University of Illinois at Chicago
Jane Addams College of Social Work
1640 W. Roosevelt Road (M/C 779)
Suite 511
Chicago, IL 60608-1316
(312) 996-1373
FAX (312) 413-4184
www.matec.info

REGIONAL SITES

Clarian Health Partners, Inc.
Indianapolis, Indiana

University of Iowa
College of Public Health
Iowa City, Iowa

University of Minnesota
Department of Medicine
Minneapolis, Minnesota

University of Missouri-Kansas City
School of Nursing
Kansas City, Missouri

Wayne State University
School of Medicine
Detroit, Michigan

University of Wisconsin
Medical School
Madison, Wisconsin

September 29, 2005

To Whom It May Concern:

The AIDS Education and Training Centers (AETC) Program of the Ryan White CARE Act currently supports a network of only 11 regional centers that conduct targeted, multi-disciplinary education and training programs and technical assistance for healthcare providers treating persons with HIV/AIDS in the United States. The Midwest AIDS Training and Education Center (MATEC) is the funded entity in this region that was established to develop HIV/AIDS training, information services and technical assistance to meet the needs of the Midwest states of Illinois, Indiana, Iowa, Michigan, Minnesota, Missouri, and Wisconsin. MATEC is based at the University of Illinois at Chicago in the Jane Addams College of Social Work and includes leadership from among the preeminent researchers at the University. MATEC has taken leadership in national training and clinical advisory groups and formed extensive networks of HIV experts across the country.

As the only Ryan White CARE Act funded entity in this region, coupled with its expertise in research, training, community advisory leadership, and national networking, makes MATEC a unique entity to engage with the CDPH in Quality Assurance and Evaluation work.

Sincerely,

Barbara Schechtman, MPH
Project/Executive Director

*Need to have
copy in letter*

5/20/05/yr for 3 yrs.

1. DATE ISSUED: 03/01/2005		2. PROGRAM CFDA: 93.914		DEPARTMENT OF HEALTH AND HUMAN SERVICES HEALTH RESOURCES AND SERVICES ADMINISTRATION  NOTICE OF GRANT AWARD AUTHORIZATION (Legislation/Regulation) Public Health Service Act, Title XXVI, Section 2603b Public Health Service Act Section 2603(b), 42 U.S.C 300ff-13(b)					
3. SUPERCEDES AWARD NOTICE dated: <small>except that any additions or restrictions previously imposed remain in effect unless specifically rescinded.</small>									
4. GRANT NUMBER: 2 H89HA00008-15-00		5. FORMER GRANT NUMBER: BRH890008							
6. PROJECT PERIOD: FROM: 04/04/1991 THROUGH: 02/28/2006									
7. BUDGET PERIOD: FROM: 03/01/2005 THROUGH: 02/28/2006									
8. TITLE OF PROJECT (OR PROGRAM): HIV EMERGENCY RELIEF PROJECT GRANTS									
9. GRANTEE NAME AND ADDRESS: CITY OF CHICAGO DEPARTMENT OF PUBLIC HEALTH 333 SOUTH STATE STREET STE 200 CHICAGO, IL 60604-3900 UDS #			10. DIRECTOR: (PROGRAM DIRECTOR/PRINCIPAL INVESTIGATOR) Christopher Brown CITY OF CHICAGO DEPARTMENT OF PUBLIC HEALTH 333 S State St RM 200 Chicago, IL 60604-3970						
11. APPROVED BUDGET: (Excludes Direct Assistance) <input checked="" type="checkbox"/> Grant Funds Only <input type="checkbox"/> Total project costs including grant funds and all other financial participation			12. AWARD COMPUTATION FOR FINANCIAL ASSISTANCE						
a. Salaries and Wages: \$ 0.00 b. Fringe Benefits: \$ 0.00 c. Total Personnel Costs: \$ 0.00 d. Consultant Costs: \$ 0.00 e. Equipment: \$ 0.00 f. Supplies: \$ 0.00 g. Travel: \$ 0.00 h. Construction/Alteration and Renovation: \$ 0.00 i. Other: \$ 0.00 j. Consortium/Contractual Costs: \$ 0.00 k. Trainee Related Expenses: \$ 0.00 l. Trainee Stipends: \$ 0.00 m. Trainee Tuition and Fees: \$ 0.00 n. Trainee Travel: \$ 0.00 o. TOTAL DIRECT COSTS: \$ 24,992,277.00 p. INDIRECT COSTS: (Rate: % of S&W/TADC) \$ 0.00 q. TOTAL APPROVED BUDGET: \$ 24,992,277.00 i. Less Non-Federal Resources: \$ 0.00 ii. Federal Share: \$ 24,992,277.00			a. Authorized Financial Assistance This Period \$ 24,992,277.00 b. Less Unobligated Balance from Prior Budget Periods i. Additional Authority \$ 0.00 ii. Offset \$ 0.00 c. Unawarded Balance of Current Year's Funds \$ 0.00 d. Less Cumulative Prior Award(s) This Budget Period \$ 0.00 e. AMOUNT OF FINANCIAL ASSISTANCE THIS ACTION \$ 24,992,277.00						
			13. RECOMMENDED FUTURE SUPPORT: (Subject to the availability of funds and satisfactory progress of project)						
			<table border="1"> <thead> <tr> <th>YEAR</th> <th>TOTAL COSTS</th> </tr> </thead> <tbody> <tr> <td colspan="2" style="text-align: center;">Not Applicable</td> </tr> </tbody> </table>			YEAR	TOTAL COSTS	Not Applicable	
YEAR	TOTAL COSTS								
Not Applicable									
			14. APPROVED DIRECT ASSISTANCE BUDGET: (In lieu of cash)						
			a. Amount of Direct Assistance \$ 0.00 b. Less Unawarded Balance of Current Year's Funds \$ 0.00 c. Less Cumulative Prior Awards(s) This Budget Period \$ 0.00 d. AMOUNT OF DIRECT ASSISTANCE THIS ACTION \$ 0.00						
15. PROGRAM INCOME SUBJECT TO 45 CFR PART 74, SUBPART F OR 45 CFR 92.25 SHALL BE USED IN ACCORD WITH ONE OF THE FOLLOWING ALTERNATIVES: A=Additional Cost B=Deduction C=Finance Non-Federal D=Cost Sharing or Matching E=Other [A] Estimated Program Income: \$ 0.00									
16. THIS AWARD IS BASED ON AN APPLICATION SUBMITTED TO, AND AS APPROVED BY HRSA, IS ON THE ABOVE TITLED PROJECT AND IS SUBJECT TO THE TERMS AND CONDITIONS INCORPORATED EITHER DIRECTLY OR BY REFERENCE IN THE FOLLOWING: <small>a. The grant program legislation cited above. b. The grant program regulation cited above. c. This award notice including terms and conditions, if any, noted below under REMARKS. d. 45 CFR Part 74 or 45 CFR Part 92 as applicable. In the event there are conflicting or otherwise inconsistent policies applicable to the grant, the above order of precedence shall prevail. Acceptance of the grant terms and conditions is acknowledged by the grantee when funds are drawn or otherwise obtained from the grant payment system.</small>									
REMARKS: (Other Terms and Conditions Attached <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No) THIS NGA INCLUDES \$2,161,969 FOR MAI FUNDS.									
Electronically signed by Dorothy Kelley, Grants Management Officer on: 03/01/2005									
17. OBJ. CLASS: 41.15		18. CRS-EIN: 1366005820B8		19. FUTURE RECOMMENDED FUNDING:					
FY-CAN	CFDA	DOCUMENT NO.	AMT. FIN. ASST.	AMT. DIR. ASST.	SUBPROGRAM CODE				
05-3770790	93.914	H89HA0008O	\$ 12,840,297.00	\$ 0.00	N/A				
05-3770791	93.914	H89HA0008O	\$ 12,151,980.00	\$ 0.00	N/A				

Terms and Conditions

Failure to comply with the special remarks and condition(s) may result in a draw down restriction being placed on your Payment Management System account or denial of future funding.

Program Conditions:

1. Due Date: Within 90 days of Budget Start Date
 - a. A revised budget, SF 424A and narrative justification for Administration, Quality Management, Planning Council Support, Program Support, and Services reflecting FY2005 funding must be received for by the Division of Grants Management Operations (DGMO) for approval. Budget narratives must be prepared according to instructions in the 2005 Application Guidance. All contracts must be listed on the Contractual line on the SF424A, including all contracts for Administration, Quality Management, Planning Council Support, and Program Support. Budget and Narrative must be sent electronically. Grantee will incur costs at its own risk until this condition is satisfied and removed. (See Remark No.7).
 - b. The FY2005 Planned Allocation Table indicating the priority areas established by the Planning Council and the dollar amount of FY 2005 Title I funds allocated to each prioritized service category. Format for the table will be sent to all grantees. Use only the categories identified on the Table. The Table must be sent electronically. Also include a letter from the HIV Health Services Planning Council (PC) Chairperson/ co-Chairs indicating endorsement of the allocations and program priorities.
 - c. A complete FY2005 Implementation Plan which reflects all the service categories and priorities established by the Planning Council and reflected in your FY 2005 Planned Allocations Table. Minority AIDS Initiative (MAI) funds must be clearly identified. The Plan must be sent electronically.
 - d. A FY 2005 MAI Plan, the grantee must submit a plan for use of funds consistent with Title I MAI program guidelines. The plan must contain the following information specific to each service to be provided to each minority community: 1) the amount of funds budgeted for that service; 2) the type and total number of service units to be provided; 3) the number of infants, children, women and youth expected to be served as well as the total number of clients planned to be served; and 4) client-level outcomes expected to be achieved. The Plan must be sent electronically.
2. Due Date: Within 120 days of Budget Start Date
The grantee must submit to the following information:
 - a. The final FY 2004 Final Allocation Table. Format for the table will be sent to all grantees. The FY 2004 Final Allocation Tables must be sent electronically using the prescribed format.
3. Due Date: Within 150 days of Budget Start Date
A Contract Review Certification (CRC), for all contracted funds in Administration, Quality Management, Planning Council support, Program support, and HIV Services, and a consolidated list of contracts. A CRC for each provider/contractor is no longer required. A single CRC that covers all providers/contracts is required. Required format for the CRC and consolidated list of contracts will be sent to all grantees. This condition will not be satisfied until all grant funds are obligated.
 - a. The Consolidated List of Contracts, must include the name of the contractor/agency (use the name of the agency as it appears on the CRC); full address (NO PO box numbers); Tax ID; whether or not the contractor is a minority provider; whether or not clients are served directly; service type; amount of contract; and the overall total of the budgets submitted with the list. The CRC must be submitted electronically.
 - b. Contract Review Certification: Section B.1. of the Certification form refers to the administrative requirements for the entity (grantee or administrative agent) who conducted the RFP process, negotiated the budgets, and awarded the contracts (requires signature of the Grantee Program Director). Section B.2 refers to the cost principles applicable for the type of organization receiving Title I funds to provide services (requires signature of the Grantee fiscal representative). The Certification is to be signed by the grantee (not a contracted Administrative Agent). There must be scanned signatures of two different people in sections A and B. Do not use acronyms on the CRC.

The grantee will have, at a minimum, available for inspection by project officers or other HRSA officials, a copy of all contracts or formal agreements with sub grantees, the most recent program report for the respective sub grantee, the

most recent fiscal or audit report for sub grantees and site visit reports.

Program Terms:

1. Please note that there is a new document number each budget period that must be used to draw down and report the grant funds.
2. Foreign travel is not permitted.
3. The grantee may not use more than five (5) percent of the FY 2005 grant funds for administration, accounting, reporting, and program oversight. Indirect costs are considered administration
4. The amount available, in the aggregate, for first-line entities to spend on administrative costs is calculated by subtracting the grantee's administrative costs (up to 5%) and the grantee's quality management costs (up to 5% or \$3,000,000, whichever is less) from the total grant amount and multiplying the difference by 10%.
5. Requests to carry over unobligated funds from the prior budget period into this current award must be received no later than 10/01/ of this current calendar year.
6. The Grantee is required to notify the DGMO, within 30 days, of any changes in Planning Council Composition that impact legislative compliance with Reflectiveness or the 15 mandated membership categories. A letter signed by the Planning Council Chair(s) must be submitted assuring that 33% of the Council members are non-conflicted persons living with HIV Disease (PLWH) and are receiving Title I funded HIV-related services. In addition, the 33% PLWH Council members and the Council as a whole must accurately reflect the demographics of the epidemic in the EMA. Reflectiveness must be based on the prevalence of HIV Disease (AIDS Prevalence plus HIV Prevalence, real or estimated) in your EMA as reported in your FY2005 application. The notification and letter must be accompanied by revised tables or narrative describing compliance with Planning Council Composition and Reflectiveness.
7. Refer to Condition 1b. Subsequent revisions to the allocations must be submitted to the DGMO along with a letter from the Planning Council Chair(s).
8. MAI Funds may be used only for MAI activities. MAI Funds must be expended for the purposes identified by Congress.
9. WICY Waiver: If the grantee can document that one or more WICY priority populations are receiving HIV-related health services through the state Medicaid program under Title XIX of the Social Security Act, the State Children's Health Program (SCHIP) under Title XXI of the same Act, or other qualified federal or state programs in accordance with HRSA guidelines, then the grantee may request a waiver of the minimum WICY expenditure requirement from HRSA. Grantees approved for a WICY waiver do not have to report the amount of FY 2005 Title I funds used to provide services to WICY. (See DSS May 27, 2002 letter for specific waiver instructions.)
10. In accordance with Program Policy No. 97-03, grant funds may not be used for: 1.) outreach programs which have as their purpose exclusively, HIV prevention education, or 2.) broad-scope awareness activities about HIV services that target the general public (See HAB website www.hab.hrsa.gov for information on DSS Program policies).
11. If your organization purchases or reimburses for outpatient drugs, an assessment must be made to determine whether the organization's drug acquisition practices meet Federal requirements regarding cost-effectiveness and reasonableness (See 42 CFR Part 50, Subpart E, and OMB Circulars A-122 and A-87 regarding cost principles). If your organization is eligible to be a covered entity under Section 340B of the Public Health Service Act and the assessment shows that participating in the 340B Drug Pricing Program and its Prime Vendor Program is the most economical and reasonable manner of purchasing or reimbursing for covered outpatient drugs (as defined in Section 340B), failure to participate may result in a negative audit finding, cost disallowance or grant funding offset. (See Condition 5 above)
12. An annual final Financial Status Report (Standard Form 269), covering expenditures for the current budget period, must be received by the DGMO no later than May 31, of each year. Written approval must be obtained for late reports, however, extensions beyond 9/30 of each year will not be approved. The request for extension must be received no later than May 31, of each year. A final FSR may not include unliquidated obligations and must agree with the PMS SF 272 report of disbursements for the document number for the budget period being reported. Points for expenditures will not be given for FSRs received after 9/30/ of each year.
13. One copy of all Conditions and Reporting Requirements must be electronically submitted to the Division of Grants Management Operations (DGMO) using the e-mail address of the Grants Management Specialist listed below, concurrently with a electronic copy submitted to the Division of Service System (DSS) using the e-mail message

address of the Program Project Officer listed below. Both the original and copy must be submitted on the same date.

Standard Terms:

1. The HHS Appropriations Act requires that when issuing statements, press releases, requests for proposals, bid solicitations, and other documents describing projects or programs funded in whole or in part with Federal money, all grantees receiving Federal funds, including but not limited to State and local governments, shall clearly state the percentage of the total costs of the program or project which will be financed with Federal money, the dollar amount of Federal funds for the project or program, and percentage and a dollar amount of the total costs of the project or program that will be financed by nongovernmental sources.
2. Recipients and sub-recipients of Federal funds are subject to the strictures of the Medicare and Medicaid anti-kickback statute (42 U.S.C. 1320a - 7b(b) and should be cognizant of the risk of criminal and administrative liability under this statute, specifically under 42 U.S.C. 1320 7b(b) Illegal remunerations which states, in part, that whoever knowingly and willfully:
 - (A) Solicits or receives (or offers or pays) any remuneration (including kickback, bribe, or rebate) directly or indirectly, overtly or covertly, in cash or in kind, in return for referring (or to induce such person to refer) an individual to a person for the furnishing or arranging for the furnishing of any item or service, OR
 - (B) In return for purchasing, leasing, ordering, or recommending purchasing, leasing, or ordering, or to purchase, lease, or order, any goods, facility, services, or item....For which payment may be made in whole or in part under subchapter XIII of this chapter or a State health care program, shall be guilty of a felony and upon conviction thereof, shall be fined not more than \$25,000 or imprisoned for not more than five years, or both.
3. The HHS Appropriations Act requires that to the greatest extent practicable, all equipment and products purchased with funds made available under this award should be American-made.
4. Requests that require prior approval from the awarding office as indicated in 45 CFR Part 74.25 [Note: 74.25 (d) HRSA has not waived cost-related or administrative prior approvals for recipients unless specifically stated on this Notice of Grant Award] or 45 CFR Part 92.20 must be submitted in writing to the Grants Management Officer (GMO). Only responses signed by the GMO are to be considered valid. Grantees who take action on the basis of responses from other officials do so at their own risk. Such responses will not be considered binding by or upon the Health Resources and Services Administration.
5. Payments under this award will be made available through the DHHS Payment Management System (PMS). PMS is administered by the Division of Payment Management, Financial Management Services, Program Support Center, which will forward instructions for obtaining payments. Inquiries regarding payment should be directed to: Payment Management, DHHS, P.O. Box 6021, Rockville, MD 20852, <http://www.dpm.psc.gov/> or Telephone Number: 1-877-614-5533.
6. The DHHS Inspector General maintains a toll-free hotline for receiving information concerning fraud, waste, or abuse under grants and cooperative agreements. Such reports are kept confidential and callers may decline to give their names if they choose to remain anonymous. Contact: Office of Inspector General, Department of Health and Human Services, Attention: HOTLINE, 330 Independence Avenue Southwest, Cohen Building, Room 5140, Washington, D. C. 20201, Email: Htips@os.dhhs.gov or Telephone: 1-800-447-8477 (1-800-HHS-TIPS).
7. Submit audits, if required, in accordance with OMB Circular A-133, to: Federal Audit Clearinghouse Bureau of the Census 1201 East 10th Street Jefferson, IN 47132 PHONE: (310) 457-1551, (800)253-0696 toll free <http://harvester.census.gov/sac/facconta.htm>

Reporting Requirements:

1. Due Date: Within 90 days of Budget End Date
Financial Status Report SF-269a/short form at (<http://www.psc.gov/forms/sf>) is due within 90 days after expiration of

the budget period. This report should NOT reflect cumulative reporting from budget period to budget period and must be electronically submitted to the HRSA Division of Grants Management Operations.

2. Due Date: Within 120 days of Budget End Date

A final annual progress report (in the format prescribed by the HIV/AIDS Bureau, Division of Service Systems) must be received by the DGMO no later than 120 days after the end of the each budget period end date.

3. Due Date: 03/15/2005

Acceptance of this grant award indicates the grantee's assurance that it will comply with data Requirements of the CARE Act Data Report (CADR), and that it will mandate such compliance by each of its contractors and subcontractors. CADRs are due annually on March 15.

4. Due Date: Within 90 days of Budget End Date

A final report on the use of the MAI funds during the prior budget period must be submitted to HRSA consistent with HRSA's Title I MAI reporting guidelines.

5. Due Date: Within 120 days of Budget End Date

Report on Expenditures for Women, Infants, Children and Youth (WICY). As of FY 2004, all Title I grantees must be able to document Title I expenditures separately for Women, Infants, Children and Youth as mandated by the CARE Act amendments of FY 2000. a. The amounts and percentages of prior budget period grant funds (for example FY 2004, FY 2003, etc.) used to provide services to women, infants, children and youth (WICY) separately; and b. Whether the reported amounts are, at a minimum, not less than the percentage constituted by the ratio of each population with Acquired Immune Deficiency Syndrome (AIDS) to the general population with AIDS living within the EMA. (See Remark No. 9 for Waiver Information)

Failure to comply with these reporting requirements will result in deferral or additional restrictions of future funding decisions.

Contacts:

Program Contact: For assistance on programmatic issues, please contact Frances Hodge at:

7A-39
5600 Fishers Lane
Rockville, MD 20857-0001
Phone: (301)443-1892
Email: frances.hodge@hrsa.hhs.gov

Division of Grants Management Operations: For assistance on grants administration issues, please contact Janene

Dyson at:
HRSA, OFAM, DGMO, GSF
5600 Fishers Ln RM 11A-16
Rockville, MD 20857-0001
Phone: (301)443-8325
Email: jdyson@hrsa.gov

Responses to reporting requirements, conditions, and requests for post award amendments must be mailed to the attention of the Office of Grants Management contact indicated above. All correspondence should include the Federal grant number (item 4 on the award document) and program title (item 8 on the award document). Failure to follow this guidance will result in a delay in responding to your request.

Valdez, Maribel

From: Dohr, James
Sent: Thursday, January 12, 2006 10:27 AM
To: White, Peg; Valdez, Maribel
Subject: RE: MATEC

Please remember that we are contracting with the Board of Trustees University of Illinois (NOT MATEC). U of I is a government agency. I would think that the agreement between the City's lawyers and U of I's lawyers that was supposed to go to City Council last month would contain an agreement regarding the MBE/WBE issue.

Jim Dohr
Director of Administrative Services
Division of STD/HIV/AIDS Public Policy and Programs
Chicago Department of Public Health
33 South State Street, DePaul Center 2nd Floor
Chicago, IL 60604-3972

Phone: 312.747.9649
Fax: 312.747.5862
Fax: 312.747.9663

---Original Message-----

From: White, Peg
Sent: Thursday, January 12, 2006 9:28 AM
To: Valdez, Maribel; Dohr, James
Subject: RE: MATEC

Right. So, Jim, does MATEC/UIC have a statement of their non profit status we can get faxed over?

-----Original Message-----

From: Valdez, Maribel
Sent: Thursday, January 12, 2006 8:44 AM
To: White, Peg; Dohr, James
Subject: RE: MATEC

The issue still needs to be addressed. I am sure Procurement or any processing the contract may not know they are non for profit.

Thanks

-----Original Message-----

From: White, Peg
Sent: Wednesday, January 11, 2006 3:53 PM
To: Valdez, Maribel; Dohr, James
Subject: RE: MATEC

MV, Jim:

Isn't MAITEC a not for profit? They are not usually subject to compliance.

-----Original Message-----