

New York State Department of Health (NYSDOH)

AIDS Institute

Solicitation of Interest (SOI) # 2097079
Supplemental Support to Ryan White Programs

QUESTIONS AND ANSWERS DOCUMENT

All questions are stated as received by the deadline announced in the SOI. Identifying or unrelated information has been removed for clarity. The NYSDOH is not responsible for any errors or misinterpretation of any questions received.

The responses to questions included herein are the official responses by NYSDOH to questions by potential applicants and are hereby incorporated into the **SOI # 2097079**. In the event of any conflict between the SOI and these responses, the requirements or information contained in these responses will prevail.

Any additional questions should be submitted to RyanWhiteSupplemental@health.ny.gov by Tuesday, April 25th to be included in a subsequent questions and answers document.

Question 1: How do I apply for this SOI opportunity?

Answer 1: [Electronic Surveys must be completed and submitted by the 4PM ET on May 2, 2023. Surveys responses will not be accepted via email. <https://www.surveymonkey.com/r/853TPMH>](#)

Question 2: What constitutes a completed and submitted survey?

Answer 2: [A survey will be completed and submitted when the respondent completes all of the required questions and verifies their signature by checking the signature box, entering their name and clicking the “Next” button. After clicking the “Next” button a screen will be displayed thanking the respondent for submitting the survey. Questions on your survey’s status can be directed to \[RyanWhiteSupplemental@health.ny.gov\]\(mailto:RyanWhiteSupplemental@health.ny.gov\).](#)

* Respondent Signature

By checking this box, I authorize that typing my name below represents the equivalent of a hand-written signature and that I am an authorized signatory for my organization

* Please type your name here

Prev Next

Question 3: If a response is not received by 4PM ET on May 2, 2023, will it be considered?

Answer 3: No. It is the applicant's responsibility to see that all survey responses are completed and submitted by the date and time specified. Only complete submissions received by the due date will be considered.

Question 4: Can each organization only submit one survey for the SOI?

Answer 4: Only one survey will be accepted per organization, should a second survey be received, NYSDOH will only consider the first survey received.

Should the content of this Q&A document change how your agency would have responded to the survey but one survey was already submitted, please email RyanWhiteSupplemental@health.ny.gov and request for your previous submission to be disregarded, and then submit the survey with your amended responses.

Question 5: For agencies with several locations, should the survey be completed once overall, or once per location?

Answer 5: The survey should be completed just once per agency.

Question 6: What is the purpose of the survey and required uploads?

Answer 6: The purpose of the survey, as well as the documentation requested, is to determine eligibility as well as gather other related information for potential funding to be made available to organizations that receive Ryan White funding that will be affected by the loss of 340B associated pharmacy revenue.

Question 7: When answering Medicaid Managed Care 340B Cost Specific Questions, should this be specific only to the Ryan White patients?

Answer 7: Please include Medicaid Managed Care costs from all patients.

Question 8: How much is available for this initiative?

Answer 8: The SOI is to determine eligibility, there is no guarantee or promise of funding.

Question 9: Does "latest fiscal year" apply to the most recently completed fiscal year, or the most recently audited fiscal year?

Answer 9: Please refer to your most recently audited fiscal year.

Question 10: Would you like overall 340B revenue, or specifically Managed Medicaid 340B revenue?

Answer 10: Please include the amount which is verifiable by your submitted financial statements. We recognize that some audited financial statements do not break out Medicaid Managed Care 340B revenue amounts separately. If this is the case for your organization, please include overall 340B revenue, and the percentage that Medicaid Managed Care represents of the total amount.

Question 11: Would you like the number of unduplicated clients from any Ryan White-funded program, or just those who benefit from 340B savings?

Answer 11: Please include the number of unduplicated clients from any Ryan White-funded program.

Question 12: Which types of Ryan White funding which are received by organizations make them eligible to complete the survey?

Answer 12: Any organization that receives funding from any Ryan White Part (e.g., not limited to Part B) is encouraged to complete the survey.

Question 13: If started but not finished, will the survey “save” pre-loaded information so it does not need to be filled out multiple times?

Answer 13: The survey will not pre-save responses. Please refer to the questions included in the PDF when preparing answers and complete the survey when you are ready to submit.

Question 14: Where are the bid documents for the survey?

Answer 14: The SOI is to determine eligibility, there is no guarantee or promise of funding, thus no separate bid documents exist.