

**State of Alaska
Department of Health
Division of Public Health**



**Request for Proposals
Tobacco Prevention and Control (Community Based Grants)
For FY2027 Through FY2029
Grants and Contracts**

NOTICE: Proposals will ONLY be accepted through GEMS. Applicants are responsible for reviewing the [State of Alaska GEMS Welcome Page](#) for details regarding agency registration and availability of technical assistance. Log into GEMS through [myAlaska](#) to begin the application process. Once you are logged into GEMS, guidance and instruction are available in the Documents tab and from the film strip icon. Applicants are responsible for monitoring GEMS or the State Online Public Notices site for any changes or amendments that may be issued regarding this solicitation.

Relay Alaska provides assisted communication services at 711 or 1-800-770-8973 from a TTY phone, and at 1-800-770-8255 from a voice phone.

CONTACT PERSON: Kari Lovett, Grants Administrator

PHONE: (907)713-4554

E-MAIL: kari.lovett@alaska.gov

PROPOSAL DUE DATE: June 9, 2026, 3:59 PM

DEADLINE FOR WRITTEN INQUIRIES: June 1, 2026, 3:59 PM

PROJECT PERIOD BEGINS: July 1, 2026

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Application Groups

Application Group Name	Description
Application Group: Community Coalitions	Community Coalition grants will fund the development or expansion of community coalitions and cross sector partnerships focused on policy, systems, and environmental change strategies to promote healthy behaviors and social norms to prevent and reduce tobacco use and exposure to secondhand smoke.
Application Group: Health Systems Change	Health Systems Change grants will fund health systems to assess, plan, and implement system changes within healthcare settings to increase referrals and access to tobacco and substance use treatment and prevent and manage smoking-related chronic health conditions.

Amendments

Amendment 1 Amendment to Clarify Personnel Requirements

Posted: 5/27/2026

Explanation

This amendment serves to clarify program personnel requirements to include number of individuals to fill the positions as required by the RFP.

Additional Information

Amendment 1, issued May 27th, 2026 serves to clarify personnel requirements.

1.06 Program Funding

Staffing

- Minimum 0.95 FTE for Application Group 1 Community Coalition Coordinator
- Minimum 1.0 FTE for Application Group 2 Health Systems Change Coordinator

Staffing minimums have the following limitations.

- Community Coalition Coordinator position needs to be filled by one individual, unless otherwise approved by grant program manager.
- Health Systems Change Coordinator position can be filled by up to two individuals.

Section 1 Grant Program Information

1.01 Introduction and Program Description

The Department of Health, Division of Public Health, is requesting proposals from eligible applicants to provide Tobacco Prevention and Control (Community Based Grants) services for the State of Alaska in FY2027 through FY2029. Program Services are authorized under 7 AAC 78 Grant Programs. Additional governing statutes are 7AAC 78 - Grant Programs, AS 44.29.020; AS 47.05.010. State of Alaska statutes and regulations are accessible at [the Department of Law Document Library](#) or through the contact person identified on the cover page of this Request for Proposals (RFP).

The Tobacco Prevention and Control Program will offer grants that encourage cross-sector relationships to support policy, systems, and environmental change strategies, address key barriers to cessation, and address chronic diseases associated with tobacco and nicotine use and secondhand smoke exposure. The grant will also support policy, systems, and environmental change strategies to increase opportunities for physical activity and healthy eating and support evidence-based programs for the management of chronic disease risk factors and conditions such as high blood pressure, prediabetes, and diabetes, like those featured in the [State of Alaska's Fresh Start](#) campaign.

The Tobacco Prevention Control program is intended to serve all of Alaska's seven public health regions while collaborating statewide with other Tobacco Prevention and Control stakeholders and coalitions working to address tobacco use and prevent chronic disease.

There are two (2) Application Groups which agencies can apply to. Agencies may submit one application per application group if they choose to apply to more than one group. The two application groups are:

Application Group 1: Community Coalition

Community Coalition grants will fund the development or expansion of community coalitions and cross sector partnerships focused on policy, systems, and environmental change strategies to promote healthy behaviors and social norms to prevent and reduce tobacco use and exposure to secondhand smoke.

Application Group 2: Health Systems Change

Health Systems Change grants will fund health systems to assess, plan, and implement system changes within healthcare settings to increase referrals and access to tobacco and substance use treatment and prevent and manage smoking-related chronic health conditions.

1.02 Program Goals and Anticipated Outcomes

The proposed project must demonstrate a thorough understanding and support of the grant program activities, goals, and outcomes anticipated by the Department.

The goal of the Tobacco Prevention Control program is to implement proven interventions to prevent youth tobacco use, enhance access to tobacco cessation and substance use treatment, provide community education about the harms of tobacco and nicotine use and exposure to secondhand smoke, promote evidence-based public health policies, and streamline health system screening and referral procedures. Collectively, these efforts aim to identify, address, and eliminate tobacco related disparities.

Complementing the program's initial objective, the second goal of the program is to support efforts to prevent

chronic disease through increased physical activity and healthy eating, as well as increased referrals to programs for management of chronic health conditions such as high blood pressure and diabetes.

Application Group 1: Community Coalition

Goals:

- **Goal 1 Youth Prevention Strategies:** In partnership with youth, prevent and reduce youth tobacco use through policy, systems, and environmental changes to increase protective factors and promote healthy behaviors and social norms.
- **Goal 2 Secondhand Smoke Strategies:** Reduce secondhand smoke and vape aerosol exposure through updated Smokefree and tobacco-free policies and Tribal resolutions.
- **Goal 3 Increase Access to Treatment and Health Promotion Programs:** Increase community access to free or low-cost tobacco cessation and chronic disease prevention or management programs through innovative outreach and promotion of programs within the Fresh Start campaign and local, evidence-based programs.
- **Goal 4 Community Coalition:** Enhance partnership and coalition capacity for communities to build protective factors, reduce risk factors such as tobacco use, and promote healthy behaviors and social norms through policy, systems and environmental change.

Outcomes:

- Increased youth leadership in communities, peer education, and outreach
- Increased school and community policies to reduce risk factors relating to tobacco and substance use and increase protective factors
- Decreased youth access to tobacco products, drugs, and sugary drinks within a community
- Increased protections for shared environments which reduce secondhand smoke and vape aerosol exposure
- Increased community access, education, and awareness of tobacco cessation and chronic disease prevention and management programs
- Increased cross-sector partnerships and community engagement in tobacco prevention and control strategies

Application Group 2: Health Systems Change

Goals:

Goals 1 through 5 for Application Group Health Systems Change are rooted in the Change Concepts in the CDC Million Hearts Tobacco Cessation Change Package.

- **Goal 1 Key Foundations:** Implement approaches and tools to assess the current status of tobacco dependence and related chronic disease treatment in your practice or system and to make tobacco dependence and related chronic disease management priorities.
- **Goal 2 Equipping Care Teams:** Implement approaches and tools to prepare and motivate healthcare staff to consistently address tobacco use, substance use, and related chronic diseases.
- **Goal 3 Screening:** Implement approaches and tools that promote consistent screening for tobacco use, substance use, and related chronic diseases as a prerequisite for intervening with patients or clients who use tobacco or other substances.
- **Goal 4 Treatment:** Implement approaches and tools to help ensure that patients or clients who use tobacco and other substances are consistently advised to quit, assessed for willingness to make a quit attempt, and offered treatment for tobacco or other substances use.
- **Goal 5 Referral and Follow-Up:** Implement approaches and tools for arranging follow-up for patients or

clients who use tobacco or other substances, and for providing referral to internal or external resources that can serve as an adjunct to treatment provided by the clinician.

- **Goal 6 Identify and Manage Chronic Disease Conditions:** Implement approaches and tools to identify patients who are at risk for or experiencing chronic disease conditions, including cancer, caused or worsened by tobacco use and incorporate patient supports for management of conditions.
- **Goal 7 Fresh Start and Chronic Disease Resources:** Increase patient access to free or low-cost cessation and chronic disease prevention or management programs through promotion and referrals to Fresh Start and local, evidence-based programs.

Outcomes:

- Increased staff engagement in and support of selected concepts and policies
- Improved smokefree and tobacco free campus policies
- Increased number of staff trained on tobacco and nicotine products, health effects and cessation. Increased training in related chronic disease and effective prevention and management strategies and programs for patients.
- Increased number of staff trained in substance misuse and treatment and available programs and resources.
- Improved trainings for onboarding and annual requirements.
- Increased provider/care team awareness and completion of Brief Intervention training, trainings on universal screening tools, and other related trainings
- Improved workflows and protocols for staff supporting patients ready to quit tobacco and other substances
- Increased patient referrals to treatment, such as Alaska's Tobacco Quit Line, Fresh Start programs, local tobacco and substance use treatment programs, or local chronic disease management programs
- Increased patient enrollments in tobacco and substance use treatment programs, or local chronic disease management programs
- Increased quit attempts among patients
- Decreased tobacco use, substance use, and improved chronic disease outcomes among patient-population

1.03 Program Services/Activities

Application Group 1: Community Coalition

Activities:

Community Coalition applicants must select one (1) activity from each of the four (4) goals to work on in Year 1 of the grant.

Goal 1 Youth Prevention (Y): Community education and implementation for youth prevention policies. These activities include:

- **Y-1 Promote community price increases on tobacco products:** Educate community leaders on the impact and importance of increasing the prices to prevent youth use of tobacco products. Provide community education on proven policies which increase the price of tobacco products.
- **Y-2 Update K-12 school district policies:** Support implementation and enforcement of school policies which promote healthy behaviors and social norms to prevent and reduce tobacco use, substance use, and related chronic diseases. This may include updating language in existing policies to include new and emerging tobacco products, promoting standardized, evidence-based tobacco and substance use prevention curriculum and alternative to suspension programs within school district, policies which promote physical activity and nutrition, and promoting participation in school-based youth surveys.

- **Y-3 Restrict youth access to tobacco products:** Support a comprehensive community-based approach to restrict minor access to tobacco products. This is a combination of interventions (i.e. education, local restrictions, policy, etc.) designed to increase public awareness of the issue of minor access to tobacco and strategically address local access issues. One example is increasing the minimum age of purchase and possession to 21.

Goal 2 Secondhand Smoke (SHS): Strengthen public protections from secondhand smoke, aerosol, and tobacco exposure. These activities include:

- **SHS-1 Education for Smokefree Indoor Settings and Enclosed Spaces:** Engage communities through education on the importance of smokefree and tobacco free policies in indoor settings. Partner with public and private entities to assess community priorities and promote relevant smokefree education, such as smokefree multiunit housing, multigenerational living, and vehicles.
- **SHS-2 Outdoor Smokefree Policies:** Complete community assessment of needs relating to smokefree policies and gaps, promote and implement community priorities for smoke and tobacco free policies in outdoor settings not covered by the Alaska Smokefree Workplace Law. This may include support for policies for parks, event grounds, or other outdoor public spaces, as well as new campus policies for vocational schools, colleges, universities, or healthcare organizations. This does not include K-12 schools, nor does it include individual event policies.
- **SHS-3 Smoke and Tobacco Free Tribal Resolutions:** Update tribal resolutions for improved smoke and tobacco free environments and support implementation of updated resolutions.

Goal 3 Increase Access to Treatment and Health Promotion Programs (A): Increase community access to free or low-cost cessation and chronic disease prevention or management programs through innovative outreach and promotion of Fresh Start and local, evidence-based programs.

- **A-1 Conduct public education and campaigns:** Promote free or low-cost cessation and chronic disease prevention and management programs for youth and adults such as Alaska's Tobacco Quit Line, local evidence-based tobacco treatment, local chronic disease prevention and management programs, and programs within the Fresh Start campaign.

Goal 4 Community Coalition (CC): Sustain a strong community coalition to support tobacco prevention efforts

- **CC-1 Build a community coalition:** Identify partners and build a community coalition focused on building protective factors through policies, systems and environmental change strategies.
- **CC-2 Sustain a community coalition:** An established community coalition actively works to implement policy, systems, and environmental change strategies to build protective factors and reduce risk factors, broaden their partnerships, and promote their work in the community.

Application Group 2: Health Systems Change

Activities:

Health Systems Change applicants must select at least two (2) goals, in addition to goal 7. It will be expected for grantees to work on all activities under each select goal.

Activities for Goals 1 through 5 are rooted in the Change Concepts in the CDC Million Hearts Tobacco Cessation Change Package and expanded to integrate relevant, often co-occurring, substance use and chronic diseases. Applicants will be required to select at least two (2) goals and its activities to work on in Year 1, including Goal 7

Fresh Start Resources which is required for all.

Goal 1 Key Foundations (KF) Activities:

- **KF-1 Make Tobacco and Substance Use Treatment and Related Chronic Disease Management Practice and System Priorities:** Identify 1-2 key champions and assemble a multidisciplinary team; As a multidisciplinary group, conduct an assessment of your clinic/system and develop an action plan to address the current gaps; Adopt or update a unit, practice or system-wide policy to reflect prioritization of tobacco treatment.
- **KF-2 Create a Supportive Environment for Cessation:** Implement and strengthen hospital or clinic-wide tobacco-free or smokefree campus policies; leverage mass-reach media to encourage and normalize quitting [e.g. with media in awaiting rooms, throughout clinic or hospital system]; Support employees and their family members in quitting smoking by providing health benefits for tobacco cessation.

Goal 2 Equipping Care Teams (ECT) Activities:

- **ECT-1 Equip All Staff to Engage in Tobacco Cessation, substance use treatment, and related chronic disease management Efforts:** Adopt a clinician/staff training policy to train and retrain staff; Conduct onboarding and annual trainings on policies, systems, and procedures; Optimize billing practices by leveraging existing codes to capture all billable services.
- **ECT-2 Provide Clinician and System-Level Feedback on Progress and Impact** Set and communicate specific, measurable performance and quality goals; Make tobacco cessation and substance use treatment quality improvement measures at the clinician or system level; Track clinician, clinic, hospital, and system performance to provide feedback to clinicians and decision-makers.

Goal 3 Screening (S) Activity:

- **S-1 Make Tobacco and Substance Use a Vital Sign: Screen Every Patient for Tobacco and Substance Use at Every Visit:** Adopt a tobacco, nicotine, and substance use screening protocol; Establish a workflow and determine roles for tobacco use screening and documentation; Embed a tobacco and substance use status prompt in the EHR or other patient record-keeping system; Embed decision support scripts for screening into the EHR or other patient record-keeping system.

Goal 4 Treatment (T) Activities:

- **T-1 Establish a Treatment Protocol:** Implement a treatment intervention; Establish a workflow to determine roles for delivering the treatment intervention.
- **T-2: Enhance Clinical Decision Support:** Embed treatment intervention prompts into the EHR or other patient record-keeping system; Embed decision support scripts for each intervention step into the EHR or other patient record-keeping system; Implement standard order sets for counseling and medication; Adopt tools to guide medication selection.
- **T-3 Implement Standardized Approaches to Support Cessation Efforts:** Deliver standard patient education regarding medication for treatment (e.g., nicotine replacement therapy, Bupropion, or other medications); Adopt a clinical decision support tool for helping patients plan their quit attempt.

Goal 5 Referral and Follow-Up (RF) Activities:

- **RF-1 Establish Protocols to Identify and Connect Patients to Referral Resources:** Implement a protocol or workflow to ensure clinician follow-up with patients; Identify and partner with referral services that can serve as an adjunct to care; Set up direct referrals to internal and external resources by creating standard referral orders; Establish two-way communication with referral services to get information on whether

referrals were accepted by the patient.

- **RF-2 Employ Population Management Strategies to Better Identify and Reach Patients Who Use Tobacco and other substances or who now experience related chronic disease:** Use registries or other methods to track patients who use tobacco or other substances; Conduct proactive follow-up with patients who use tobacco or other substances.

Goal 6 Identify and Manage Chronic Disease Conditions (IM) Activities: Implement approaches and tools to identify patients who are at risk for or experiencing chronic disease conditions, including cancer, caused or worsened by tobacco use and incorporate patient supports for management of conditions. These activities are rooted in the evidence-based CDC Change Packages and Action Guides for clinicians, employers, and practitioners.

- **IM-1 Assess and Identify Clinical Need for Improving Health Systems Change of One Chronic Condition Related to Tobacco Use:** Internal team to assess needs for various chronic conditions, either physical or behavioral, to plan for and implement systematic enhancements.
- **IM-2 Population Health Management:** Identify patients who are at risk of chronic disease conditions and create protocols to ensure proactive chronic disease management supports for patients.
- **IM-3 Individual Patient Supports:** Individualize and optimize patient support before, during, and after appointments; Provide relevant resources and referrals to programs for management of chronic diseases.

Goal 7 Fresh Start and Chronic Disease Resources (R) Activity:

- **R-1 Share Fresh Start materials:** Promote free or low-cost cessation and chronic disease prevention or management programs through promotion and referrals to Fresh Start and local, evidence-based programs.

Required Activities of All Applicants:

Applicants will upload a timeline for the initiation of services and project activities.

Applicant proposals must describe the ways in which the project aligns with program intent. The submitted project proposal will identify agency resources available to the project; describe project activities; and clearly state the project's anticipated goals, outputs, and outcomes.

For awareness, awarded applicants will be required to comply with the following special conditions of award and service standards. Additional standards specific to each application group can be found in the RFP Workbook Attachment.

Year 1 Activities:

- Develop and complete a Needs/Readiness Assessment based off TPC Guidelines
- Develop an annual workplan in FY27 Quarter 1 with Grant Manager
- Attend Orientation Training with Grant Staff. Any new hires for the duration of the grant must attend Orientation Training when offered.
- Complete Evidence-Based Public Health Training Series. Any new hires for the duration of the grant must complete this training series within the first complete quarter they are hired.
- Complete TPC Competencies Survey and Recommended Trainings based on survey results

Annual Activities:

- Attend the Annual TPC Lobbying vs Advocacy Training
- Budget for and attend the annual training in Anchorage typically held in January of each year. A minimum of two (2) people must attend Regularly attend and participate in at least one Community of Practice

(Partnerships COP or Health Systems Change COP)

- Attend all Quarterly Grant Partner Calls, Regional Calls, and other required TPC-sponsored trainings.
- Attend monthly check-ins with Grant Manager. Applicant must communicate with Grant Manager on scheduling changes in advance.

1.04 Program Evaluation Requirements and Reporting

Projects are required to align with program objectives expressing Department priorities and core services. Projects will use performance measures to evaluate progress toward meaningful outcomes, and to initiate data collection and reporting consistent with Department priorities.

The Department Priorities, Core Services, Objectives, and Performance Measures of Effectiveness and Efficiency for this program are:

Department Priorities

- 1 Health & Wellness Across the Life Span

Department Core Services

- 1.1 Protect and Promote the Health of Alaskans

The applicant's proposed evaluation plan will incorporate the performance measures of effectiveness and efficiency identified above. Applicants can propose additional performance measures for evaluating the project's progress in achieving results supportive of program goals and outcomes.

The applicant's proposed action plan must include indicators and data gathering strategies that will be used. For more information on elements to be addressed please reference the Tobacco Prevention Control RFP Workbook in the attachments.

Performance Measures

Application Group 1: Community Coalition

- Number of coalition meetings and events held
- Number of new coalition members or partnerships
- Number of coalition goals achieved
- Grantee-specific measures include:
 - Partner meetings hosted or attended,
 - Presentations delivered
 - Resources created
 - Policies implemented
 - Mass communication campaigns conducted,
 - Surveys/needs assessments or readiness assessments administered
 - Evaluations conducted

Application Group 2: Health Systems Change

- Number of Partnership Meetings, Presentations, Resources Created, Patients Screenings, E-Referrals, Fax Referrals, Enrollments, Number of Patients Screened, and Other Related Activities Average
- Cost Per of Partnership Meeting, Presentation, Resource Created, Patients Screened, E-Referral, Fax Referral,

Enrollment, Patient Screened, and Other Related Activities

- Number and range of community partners involved

Grant Reporting

Required reporting will include:

1. Cumulative Fiscal Reports recording overall grant and match expenditures by budget line; and
2. Program Reports in the format prescribed by the program.
3. Cumulative Detailed Expenditure Report verifying amounts reported in Cumulative Fiscal Reports due at Q2 and Q4

1.05 Target Population and Service Area

Target Population: The target populations for the solicited services are people who use or at risk of using tobacco products, people who are affected by or at risk of chronic diseases caused by or related to tobacco use, and youth and young adults.

Service Areas and Communities: The service areas and communities solicited are statewide.

Community Coalition applicants must describe the community in which they intend to provide services through this grant.

Funding preference will be given to agencies that serve geographically large areas, demonstrate the ability to serve the identified service area, demonstrate a history of collaboration across the identified service area, and provide documentation of support by leadership within the organization to implement evidence-based tobacco prevention and control interventions. Additional preference will be given based upon demonstration of need within the service area.

Health Systems Change applicants must describe the health system in which they intend to provide services through this grant, as well as the community the health system serves.

Funding preference will be given to agencies that serve communities with disproportionate impacts from tobacco use, demonstrate the ability and capacity to provide services, and demonstrate support by senior leadership within the health system. Additional preference will be given to agencies that demonstrate IT capacity and support for the project if strategies involve electronic health records or other technology-based interventions.

Applicants must clearly describe the population targeted by the project, including the area or communities that will be served. Proposals will be evaluated for compatibility with the program's intended target population identified in this solicitation. The narrative must include the following information:

- A description of the community to be served
- A description of the historical, political, economic, and socio-cultural influences of the community as they relate to tobacco use and health
- A description of the burden of tobacco use within the population, community, region, or proposed service area. This should include tobacco prevalence rates and information on tobacco-related chronic diseases.
- A description of the anticipated opportunities and challenges of implementing the proposed project in their proposed service area.
- A description of the community infrastructure including healthcare centers, large employers, community or health organizations, and existing coalitions

Applicants must reference applicable data sources for their application. Applicants are encouraged to reference data from:

- [State of Alaska Tobacco Prevention & Control Program](#)
- [State of Alaska Section of Chronic Disease Prevention & Health Promotion](#) and the [2025 Brief Report](#)
- [State of Alaska Behavioral Risk Factor Survey \(BRFSS\) Data](#)
- [State of Alaska Youth Risk Behavior Survey \(YRBS\) Data](#)

1.06 Program Funding

The total anticipated Tobacco Cessation funding for all grant awards is \$3,815,000 per fiscal year; \$11,445,000 for the entire duration of this procurement. The program will award up to seven (7) Community Coalition grants and up to fourteen (14) Health Systems Change grants.

Application Group 1: Community Coalition

This application group will consist of up to 7 grants (1 per public health region) with a maximum award amount of \$215,000. Alaska's Public Health regions are Anchorage, Gulf Coast, Interior, Mat-Su, Northern, Southeast, Southwest (See the RFP Workbook for more information).

Application Group 2: Health Systems Change

This group will consist of up to 14 awards within Alaska health systems with a maximum award amount of \$165,000.

Proposed Budget: The applicant must submit a budget proposal for the first fiscal year of the project. The proposed budget detail and narrative, will support the program's results-based service delivery and staffing requirements stated in this RFP. The applicant's proposed budget must include the following:

Staffing

- Minimum 0.95 FTE for Application Group 1 Community Coalition Coordinator
- Minimum 1.0 FTE for Application Group 2 Health Systems Change Coordinator

Travel

- A minimum of two (2) people, including subgrantees, are required to attend the annual training in Anchorage, typically held each January. At least one of the two attendees must be the applicant coordinator.

Allowable use of grant funds with distinction to application group may include, but is not limited to:

Sub-contracts

- Sub-contracts are not a required budget item but may be utilized by all grantees for media development and distribution purposes or for evaluation services.
- Sub-contracts may be utilized by Community Coalition applicants for specified community projects.
- **Note:** Sub-contracts are subject to the requirements of 7 AAC 78.180 Subcontracts and 78.270 Purchasing practices and procedures for operating grants.

Program Specific Budgeting Restrictions Include:

- If budgeting for incentives or swag, the grantee may expend no more than \$5,000 of their award for this purpose. If the grantee wishes to spend more within the fiscal year on these items, they may work with their

Grants Administrator and Grant Manager for approval. Swag items are promotional items or giveaways typically handed out at health fairs or public events like pens, bags, t-shirts, stress balls, etc. This restriction does not include educational tools and materials such as pig lungs, educational brochures or posters, toolkits, etc. Items in question can be discussed with a grant manager.

- State of Alaska grantees are prohibited from using grant funds to lobby. Clear documentation must be kept to ensure that time charged to the SOA TPC grant was not used for lobbying activities.
- State of Alaska TPC grant funds are not allowed to be used for direct cessation activities, this includes purchase of Nicotine Replacement Therapy (NRT) medications.

Daily per diem rates must not exceed the State of Alaska Current Travel ME&I rates (<https://doa.alaska.gov/dof/travel/resource/rates.pdf>)

The proposed budget will be fully compliant with the limitations described in this RFP, and those detailed in 7 AAC 78.160 (Costs). Regulations are provided under the GEMS Documents tab.

Resources specific to budgeting are also available under the GEMS Documents tab. The Department's Grant Budget Preparation Guidelines provide information and guidance about budget lines, cost detail groupings, and narrative requirements. Grantee User Manual Part I provides detailed instructions for entering a budget proposal in the chapter "Responding to a Solicitation."

Other Agency Funding: Prior to submitting a proposal, applicants are required to list all other agency funding received and applied for. This task must be completed by an Agency Power User in the Other Funding section of the Agency Administration tab. This is part of the pre-award risk assessment required under Uniform Guidance 2 CFR 200.

Indirect Costs: If the proposed budget includes indirect costs, 7 AAC 78.160(p) requires a copy of the agency's current federally approved Indirect Cost Rate Agreement. The agreement is to be uploaded in the Agency Administration tab. If an agency has never entered into a federally approved Indirect Cost Rate Agreement or no longer has a federally approved agreement in place, the agency may include administrative costs in the applicant's proposed budget as direct costs as directed by 7 AAC 78.160 (q).

Payment for Services/Grant Income: If applicable to the services proposed in response to this solicitation, awarded grantees will have a Medicaid Provider Number or apply to obtain one, and will make reasonable effort to bill all eligible services to Medicaid and any other available sources of payment before seeking grant support for delivery of the proposed services. Department funds are the payer of last resort.

In the applicant's proposed budget, anticipated receipts and expenditures for all grant income must be evident in the detail and narrative. Fiscal reports for awarded income generating projects will include the receipts and expenditure of all grant income.

Section 2 Applicant Qualifications

2.01 Agency Experience

Proposal evaluation will include consideration of the applicant's history of compliance with service and grant requirements, and previous experience in providing the same or similar services. Evaluation may include Department site reviews, program audits, and confirmation of the successful resolution of any findings. This is part of the pre-award risk assessment required under Uniform Guidance 2 CFR 200.

The applicant must describe previous experience providing services the same or similar to those proposed. The

description must clearly identify the time period over which services were provided and the target population served.

Applicants must attach documentation that demonstrates experience in the following services and activities:

1. **Demonstrate the ability to engage and involve partners in project planning and achieving objectives.** Applicants will provide written examples and documentation demonstrating effective partnerships. This includes engaging new partners, identifying and collaborating on shared goals, and sustaining partnerships.
2. **Demonstrate ability to identify, implement, and evaluate public health objectives through prior experience. Examples of documentation: strategic plans, work plans, logic models, etc.** Applicants will provide a brief overview of prior experience providing same or similar services provided to their identified target population. Applicants will provide a proposed action plan and other supporting documentation that will demonstrate ability to manage projects related to public health.
3. **Provide a brief history that demonstrates sustainable fiscal and administrative capacity, capability, and responsibility.** Applicants will provide written examples, identify administrative personnel/departments, and prior experience in managing fiscal deliverables.

2.02 Project Staffing

Project staffing must be sufficient to implement the proposed activities in order to meet program goals and the anticipated outcomes.

Resumes and position descriptions and professional credentials for key project personnel must be uploaded as part of the response. This is part of the pre-award risk assessment required under Uniform Guidance 2 CFR 200.

Applicants that hire key personnel throughout the duration of the grant must arrange for appropriate staff training and provide a training plan for the grant manager. All funded coordinators must attend:

- Orientation training from State TPC staff
- The self-paced modules for Evidence Based Public Health Training Series within 3 months of hire
- Annual training conference in Anchorage
- Web-based training opportunities sponsored by the TPC program

Key personnel are encouraged to pursue additional online training opportunities through state and national resources as appropriate.

2.03 Administrative, Management, and Facility Requirements

The applicant must demonstrate the agency's sustainable fiscal and administrative capacity. Executive, administrative, and financial staff must be qualified, as indicated by the resumes of position holders uploaded as an element of the proposal. This is part of the pre-award risk assessment required under Uniform Guidance 2 CFR 200.

1. The applicant must ensure procedures are in place to protect client confidentiality compliant with State and federal standards.
2. The applicant must ensure its most recent financial audit was submitted to the appropriate state office (see Audit Requirements below), and any findings identified have been resolved.

Awarded proposers will be required to submit additional agency information if the agency GEMS record is not current.

Audit Requirements:

Federal Requirements: Agencies spending \$1,00,000 or more total Federal Financial Assistance in the agency fiscal year may be required to comply with conditions of the Single Audit Act of 1984, P.L. 98-502, as amended by the Single Audit Act Amendments of 1996, P.L. 104-156, and as defined in 2 CFR 200.

State Requirements: Agencies spending \$750,000 or more total State Financial Assistance in the agency fiscal year are required to comply with the conditions of 2 AAC 45.010-090. The current regulations may be viewed at the State of Alaska, Department of Law website, [Department of Law Document Library](#), or copies may be obtained from the contact identified on the cover page of the RFP.

Information on State and Federal Single Audit Acts compliance may be obtained from:

State Single Audit Coordinator
Department of Administration
Division of Finance
PO Box 110204
Juneau, AK 99811-0204
Telephone: (907) 465-4666
Fax: (907) 465-2169

Department of Health Program Audit Requirements: All DHSS grantees are subject to the requirements of 7 AAC 78.230. If awarded, agencies which are not required to file State Single Audits under 2 AAC 45.010 must ensure a fiscal audit of the agency operations under the grant program is performed by an independent, licensed, certified public accountant at least once every two years and submitted to:

State of Alaska Department of Health and Social Services
Finance and Management Services
Audit Section
PO Box 110602
Juneau, AK 99811-0602
Telephone: (907) 465-3120

Facility, Service Access, and Safety:

1. The applicant must address potential safety concerns for clients and staff in the management of services proposed in response to this RFP.
2. The applicant should describe client accessibility to services and the way in which that will enhance project success.
3. All applicants for Department grants should have a written plan for emergency response and recovery that provides for potential safety concerns and the safe evacuation of clients and staff. This plan is mandatory for agencies providing residential and/or critical care services as noted in the State Grant Assurances.

2.04 Support/Coordination of Services

Applicants must demonstrate the proposed project has the necessary support and coordination for the successful delivery of services. The proposal must address the following:

1. Community support where services are proposed;
2. Involvement of the public and potential service recipients in the planning process;

3. Partnerships and collaborations specific to the proposed project; and
4. Coordination with necessary referring agencies and the role of each described.

For more information on elements to be addressed in letters of support and memorandums of understanding please reference the Tobacco Prevention Control RFP Workbook.

Section 3 General Instructions for Proposal Submission

3.01 Eligibility

Applicants must be eligible to apply under 7 AAC 78.030 (Eligible Applicants). Eligible applicants are state agencies; political subdivisions of the state such as cities, organized boroughs, and Regional Educational Attendance Areas; nonprofit organizations and consortia of nonprofits; and Alaska Native entities. As follows, eligibility will be verified by Grants and Contracts.

1. Political subdivisions of the state and Regional Educational Attendance Areas will be verified by State records.
2. Eligible nonprofits are listed in the State's database of registered nonprofit entities or the US Internal Revenue Service's register of tax-exempt organizations. Nonprofit subsidiaries of nonprofit corporations must also provide a letter from the parent organization confirming nonprofit status.
3. Alaska Native entities as defined in 7 AAC 78.950(1) must submit, with the application, a legally binding resolution waiving the entity's sovereign immunity to suit through the duration of the program, identified in RFP Subsection 3.05. The resolution must be authorized in compliance with the tribe's constitution, either by the tribal council or by majority vote of the tribal membership. The required template is provided at Subsection 4.02, Other Technical Requirements.

Effective April 4th, 2022, the US Federal Government transitioned from the Dun & Bradstreet Data Universal Numbering System (DUNS) number to a System for Award Management (SAM) generated Unique Entity Identifier (UEI) alpha-numeric value for federal awards management. All grantees receiving awards with federal funds are required to have a UEI. More information regarding this transition can be found on the [U.S. General Services Administration](#).

The Grants Electronic Management System (GEMS) has been updated to include fields for both the DUNS nine-digit number and the UEI twelve-digit alpha-numeric value under the General section of the Agency Administration tab. An Agency Power User must confirm the current UEI number is listed in GEMS. The DUNS number will continue to be displayed in GEMS until further notice.

Applicant agency GEMS records must contain the agency's current State of Alaska Business License number, and a current governing board roster which includes titles, contact information, and terms of office for each seat. The roster must include emergency contact information outside the applicant agency for one or more officers.

Grants and Contracts will verify neither the applicant agency nor its principals are presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from receiving grant assistance from any State or federal department or agency. If an agency or its principals are excluded from receiving grant assistance, the proposal may not be considered.

Applicants who have had a contract or grant to help produce this RFP are not eligible to apply and any submitted proposal will not be considered.

3.02 Acceptance of Terms

By submitting a proposal, an applicant accepts all terms and conditions of this RFP including all identified attachments and guidelines, 7 AAC 78, and any other applicable statutes and regulations. Copies of these may be accessed through the contact person identified on the cover page or through the web address(es) identified in this RFP.

If a grant is awarded, this RFP and the applicant's proposal become part of the grant agreement. The applicant will be bound by the provisions contained in the awarded proposal unless the Department agrees that specific parts of the proposal are not part of the agreement.

Proposals and other materials submitted in response to this RFP become the property of the State and may be returned only if the State allows. Proposals are public documents and may be inspected or copied by anyone after grants have been awarded.

3.03 Inquiries

Applicants should immediately review this RFP for defects and questionable or confusing content. Questions that can be answered by directing the applicant to a specific section in the RFP may be answered verbally by the contact person identified on the RFP cover page. Questions that cannot be answered by directing an applicant to a specific section of the RFP may be declared substantive. The applicant will be directed to submit the question in writing to the contact person at the email address on the cover page no later than the Deadline for Written Inquiries, also identified on the cover page. This will allow issuance of any necessary amendments and/or clarifications to all prospective applicants.

Applicants are responsible for monitoring GEMS or the State's Online Public Notices website ([Online Public Notices](#)) for any clarifications or amendments that may be issued regarding this solicitation.

Proposals will not be accepted after 3:59 PM prevailing local time on the due date identified on the cover page.

3.04 Proposal Costs and Content

The Department will not be responsible for any expenses incurred by the applicant prior to the authorized grant performance period. All costs of responding to this RFP are the responsibility of the applicant.

The applicant is responsible for the content of the proposal.

3.05 Duration

This RFP is for a three-year period, beginning 7/1/2026 through 6/30/2029. At the discretion of the Department, a project funded under this RFP may be considered for continued funding in subsequent program year(s). The annual decision to continue funding for the subsequent year(s) of the three-year grant cycle is based on the following general conditions:

1. the Department's judgment that there is a continued need for the grant project service;
2. the grantee's satisfactory performance during the previous grant year;
3. the availability of sufficient grant program funds, and whether continuation of the financing is consistent with public health and welfare; and
4. the ability of the grantee and the Department to agree on any adjustments in payments or service.

Applicants will submit a budget proposal for year one of the grant only. Funding in each subsequent year will require submission and approval of documents needed to update service plans, evaluation measures, and budgets. Grants and Contracts will notify grantees of specific submission requirements necessary to qualify for consideration of continued funding.

3.06 Proposal Review

Following the deadline for receipt of proposals, no revisions will be accepted unless provided in response to a request from the contact person named in this RFP. Proposals will be reviewed as follows:

1. Proposals will be evaluated in a manner that will avoid disclosure of contents before notices of grant award have been issued.
2. Department of Health staff will evaluate each proposal for minimum responsiveness and other technical requirements and eliminate nonresponsive proposals from consideration.
3. Using the criteria set out in this RFP and 7 AAC 78.100 (Criteria for Review of Proposals), Department staff will evaluate each responsive proposal. **Scores for each criterion will be based solely on the response to the associated question. Points will not be earned if the information was provided in response to another question in Section 4.** Department staff will also review relevant departmental documentation regarding the applicant. Staff recommendations regarding awards and levels of funding will include consideration of the following:
 - i. a history of the applicant's compliance with grant requirements, to include records of program performance, on-site program reviews, and prior year audits;
 - ii. priorities in applicable State health and social services plans;
 - iii. requirements of applicable State and federal statutes; and
 - iv. municipal ordinances or regulations applicable to the grant program.

If there are multiple responsive proposals for which there is insufficient money to fully fund, or supplementary expertise is deemed necessary to the review of proposed services, the Department may appoint a Proposal Evaluation Committee (PEC) as an additional advisory body. PEC members will initially evaluate proposals, independently of other committee members. As a committee the PEC will meet in a **closed session** (7 AAC 78.090 Review of Proposals) to further review proposals and develop recommendations. Scores will be assigned based on the applicant's response to each individual question and the associated criteria. **Applicants will not earn points for a given question based on a response to another question in the RFP.** The PEC review will include discussion of each proposal's merits. PEC recommendations will rank proposals in priority order and include approval or disapproval for award, modifications to the proposed project, and special compliance conditions.

All staff advisory recommendations and, if applicable, those of the PEC, and all review materials will be submitted for consideration by the Division Director, who will make recommendations to the Commissioner of the Department of Health or the Commissioner's designee.

3.07 Final Decision Authority

Recommendations are advisory only, including those from any PEC that may be held. The final decision to approve or disapprove award, the amount of each award, and whether to impose special conditions or modifications rests with the Commissioner or Commissioner's designee.

NOTE: The final decision may include additional considerations, such as a lack or duplication of services in certain

locations, or alternative services that may be available; a critical need for services by vulnerable populations; and matters of health, life and safety. The Department has the responsibility to ensure public monies are utilized in a manner that protects the interests of the people of the State and retains the right to make final awards that ensure responsible distribution of grant funds.

3.08 Notification of Grant Award and Appeals

Within fifteen (15) days after the decision regarding grant awards, applicants will be notified of the final funding decisions, and, if awarded, any conditions of award or modifications. Following any necessary negotiations for revisions to the proposed budget and scope of services, successful applicants will be issued a grant agreement. This formal agreement will contain specific performance and reporting requirements consistent with Department policy and procedure and 7 AAC 78.

Per 7 AAC 78.305 (Request for Appeal), an applicant may appeal a final grant award decision. Requests for hearing must be addressed to the Commissioner and received in writing at the address below within 15 days after the applicant receives notification of the decision. The request must contain the reasons for the appeal and must cite the law, regulation, or terms of the grant upon which the appeal is based.

With a copy to the contact identified on the solicitation cover page, send appeal to:

Heidi Hedberg, Commissioner
 Department of Health
 3601 C Street, Suite 902
 Anchorage, Alaska 99503-5923

3.09 Cancellation of the RFP/Termination of Award

Contingent upon funding appropriations and the Governor's approval, the Department may fund proposals from eligible applicants. The Department may withdraw this RFP at any time and reserves the right to refrain from making an award when such action is deemed to be in the best interest of the State. Funds awarded for a grant as a result of this RFP may be withheld and the grant terminated by written notice from the State to the grantee at any time for violation by the grantee of any terms or conditions of the grant award, or when such action is deemed to be in the best interest of the State.

Section 4 Submission Requirements/Evaluation Criteria

4.01 Minimum Responsiveness Criterion per 78.100(2)(A)

Proposals that fail to meet the minimum responsiveness requirements below will be eliminated from consideration per 7 AAC 78.090(b)(2).

- 1 (Application Group: Community Coalitions, Application Group: Health Systems Change) - Applicant is eligible per 7 AAC 78.030.**

Evaluation/Review Criteria		Review	Points
a	Applicant is eligible per Alaska Administrative Code 7 AAC 78.030 .	☑	

4.02 Other Technical Requirements per 7 AAC 78.060, 78.090(b) and 78.100

Response & Organizational Documentation

1 (Application Group: Community Coalitions, Application Group: Health Systems Change) - If applying as a non-profit organization, confirm non-profit status is documented.

Evaluation/Review Criteria		Review	Points
a	The agency is listed as a non-profit in good standing on the State's corporation database, confirmed at State Corporation Database and/or	<input checked="" type="checkbox"/>	
b	The agency's current 501(c)(3) status is confirmed on the Exempt Organizations page, accessible at IRS Tax Exempt Organization Search	<input checked="" type="checkbox"/>	
c	If a non-profit subsidiary of a non-profit corporation, a verifying letter from the parent non-profit agency is uploaded to the applicant's agency GEMS record (under General in the Agency Administration tab). The parent corporation must meet criteria a and/or b.	<input checked="" type="checkbox"/>	

2 (Application Group: Community Coalitions, Application Group: Health Systems Change) - If applying as a Federally recognized tribal entity, upload the signed Resolution for Tribal Entities using the template provided below. Confirm the following criteria are met.

Evaluation/Review Criteria		Review	Points
a	The applicant is a recognized Alaska Native entity as verified by the Federal Register at Federal Register . If a tribal consortium, all members are recognized Alaska Native entities.	<input checked="" type="checkbox"/>	
b	A Resolution, completed on the provided form, is uploaded in the space provided. If a tribal consortium, a Resolution from each member tribe is uploaded as a single file.	<input checked="" type="checkbox"/>	

3 (Application Group: Community Coalitions, Application Group: Health Systems Change) - If applying as a government entity, confirm the following criterion is met.

Evaluation/Review Criteria		Review	Points
a	The applicant is another State Agency, such as the University; a political subdivision such as a city or municipality, verified at Local Boundary Commission ; or an REAA under AS 14.08.031 verified at Department of Education Alaska School Map .	<input checked="" type="checkbox"/>	

4 (Application Group: Community Coalitions, Application Group: Health Systems Change) - Confirm neither the applicant agency nor its principals are presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from receiving grant assistance from any State or federal department or agency. If an agency or its principals are excluded from receiving grant assistance, the proposal may not be considered.

Evaluation/Review Criteria		Review	Points
a	The applicant agency nor its principals are barred from receiving federal assistance as verified in the federal System for Awards Management at System for Award Management (SAM) .	<input checked="" type="checkbox"/>	

5 (Application Group: Community Coalitions, Application Group: Health Systems Change) - Electronically sign the State Grant Assurances form.

Evaluation/Review Criteria		Review	Points
a	State Grant Assurances form is signed by an individual authorized to enter into legal agreements on behalf of the applicant agency.	<input checked="" type="checkbox"/>	

6 (Application Group: Community Coalitions, Application Group: Health Systems Change) - Confirm the following information is provided at the Agency Administration tab. These tasks must be completed by a Power User. If the information is found to be incomplete or not current, there may be delay in execution of any offered award.

Evaluation/Review Criteria		Review	Points
a	The General section contains a current governing board roster. The roster includes terms of each seat and contact information outside the applicant agency for one or more officers.	<input checked="" type="checkbox"/>	
b	The Other Funding section contains a record for each source of agency operating funds. The record includes funds applied for under this solicitation. This is part of the pre-award risk assessment required under Uniform Guidance 2 CFR 200.	<input checked="" type="checkbox"/>	
c	The General section contains a State of Alaska business license number, verified at Alaska Business Licenses Search .	<input checked="" type="checkbox"/>	
d	All agency contact records are up to date, including Head of Agency, Primary Contact, and Head of Financial Operations.	<input checked="" type="checkbox"/>	
e	The applicant's agency record contains the Agency Fiscal Year Start Date.	<input checked="" type="checkbox"/>	

	<p>f The applicant's agency GEMS record contains a current Federally Negotiated Indirect Cost Rate Agreement. If lapsed, the agreement is uploaded with written confirmation from the negotiating agency that the rate is valid until a new agreement is approved.</p>	<input checked="" type="checkbox"/>	
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4.03 History of Compliance with Grant Requirements per 7 AAC 78.100(2)(B)

- 1** *(Application Group: Community Coalitions, Application Group: Health Systems Change) - Previous recipients of grant awards will confirm the following criteria pertaining to past performance and compliance are met. This is part of the pre-award risk assessment required under Uniform Guidance 2 CFR 200. All other applicants will mark Complete without confirming.*

Evaluation/Review Criteria	Review	Points
<p>a Fiscal, narrative, and data reporting in prior years has been complete and timely.</p>	<input checked="" type="checkbox"/>	
<p>b Required State and Federal Single Audits have been submitted, verified at Division of Finance, State Single Audit. Any prior year audit exceptions have been resolved, verified by the Finance and Management Services Audit Section contact identified at Finance and Management Services Audit Contact.</p>	<input checked="" type="checkbox"/>	
<p>c Activities in prior year(s) demonstrate effective delivery of services. The departmental review may include documentation such as performance reports, audit reports, grant records, site visits, etc.</p>	<input checked="" type="checkbox"/>	
<p>d Agency historically maintains required standards. Verification may include, though is not limited to, quality assurance reviews, licensing, and certifications.</p>	<input checked="" type="checkbox"/>	
<p>e If a site visit was conducted at the agency for any Department of Health Grant Programs within the past three years, please identify in the application response, the date of the visit and if there were findings. If there were findings, please identify what the findings were.</p>	<input checked="" type="checkbox"/>	

4.04 Questions and Criteria Related to Program Policy, Goals, Outcomes, and Activities

- 1** *(Application Group: Community Coalitions, Application Group: Health Systems Change) - Describe the proposed project in the text box below, identifying the ways in which it will achieve the program goals and anticipated outcomes stated in this RFP.*

Evaluation/Review Criteria		Review	Points
a	The description demonstrates a thorough understanding of program goals and outcomes, and clearly identifies the ways in which they will be achieved.	<input type="checkbox"/>	80

2 (Application Group: Community Coalitions, Application Group: Health Systems Change) - Provide the timeline for the initiation of services and implementation of project activities in the upload field below.

Evaluation/Review Criteria		Review	Points
a	The timeline proposed for initiation of services and project activities is compatible with program intent.	<input type="checkbox"/>	120

3 (Application Group: Community Coalitions) -

In the text box below, describe the ways in which the project aligns with program intent. In the upload field below, provide a single-file upload of the Agency's Community Coalition Proposed Action Plan. The responses will identify project resources, activities, and clearly state the project's anticipated goals, outputs, and outcomes in alignment with program intent.

Evaluation/Review Criteria		Review	Points
a	The applicant has selected the required number of activities identified for the respective application group. The described activities are well developed, reasonable and supportive of program intent.	<input type="checkbox"/>	80
b	The applicant's proposed action plan identifies project resources, activities, and projected outcomes that meet program intent.	<input type="checkbox"/>	120

4 (Application Group: Health Systems Change) -

In the text box below, describe the ways in which the project aligns with program intent. In the upload field below, provide a single-file upload of the Agency's Health Systems Change Proposed Action Plan. The responses will identify project resources, activities, and clearly state the project's anticipated goals, outputs, and outcomes.

Evaluation/Review Criteria		Review	Points
a	The applicant has selected the required number of activities identified for the respective application group. The described activities are well developed, reasonable and supportive of program intent.	<input type="checkbox"/>	80
b	The applicant's proposed action plan identifies project resources and projected outcomes that meet program intent.	<input type="checkbox"/>	120

5 *(Application Group: Community Coalitions, Application Group: Health Systems Change) - In the text box below, describe the project evaluation plan, including indicators and data gathering strategies that will be implemented to address the program's performance measures identified in Subsection 1.04.*

Evaluation/Review Criteria		Review	Points
a	The proposed evaluation plan includes indicators and data gathering strategies aligned with the program performance measures identified in Subsection 1.04.	<input type="checkbox"/>	80

6 *(Application Group: Community Coalitions, Application Group: Health Systems Change) - In the text box below, describe the target population and service area(s) of the proposed project. The narrative must include the following information:*

- *A description of the community to be served.*
- *A description of the historical, political, economic, and socio-cultural influences of the community as they relate to tobacco use and health.*
- *A description of the burden of tobacco use within the population, community, region, or proposed service area. This should include tobacco prevalence rates and information on tobacco-related chronic diseases.*
- *A description of the community infrastructure including healthcare centers, large employers, community or health organizations, and existing coalitions.*

Evaluation/Review Criteria		Review	Points
a	The description clearly identifies the proposed target population and service area and meets the intent of the services solicited.	<input type="checkbox"/>	80
b	The response demonstrates project need through thorough description of impacts of tobacco and related chronic disease, gaps in programming, and any other relevant information related to their proposed service area.	<input type="checkbox"/>	40
c	The description include anticipated opportunities and challenges of implementing the proposed project in their proposed service area.	<input type="checkbox"/>	40

7 *(Application Group: Community Coalitions, Application Group: Health Systems Change) - Provide the proposed budget for the first year of the project. Include detail and supporting narrative as shown in the provided Grant Budget Preparation Guidelines (Documents tab). Confirm the following criteria are met.*

Evaluation/Review Criteria		Review	Points
a	The budget narrative is complete and mutually consistent with the budget detail.	<input checked="" type="checkbox"/>	

	b Cost line items are allowable under 7 AAC 78.160 and are compliant with stated program requirements.	<input checked="" type="checkbox"/>	
	c Travel costs are consistent with 7 AAC 78.160(h) and (i), and with any program requirements or limitations identified in the solicitation.	<input checked="" type="checkbox"/>	
	d Equipment costs and subcontract costs are allowed by the program and consistent with 7 AAC 78.280.	<input type="checkbox"/>	40
	e Indirect costs are fully compliant with rates and exemptions of the agency's current Federally Negotiated Indirect Cost Rate Agreement, uploaded in the General section of the Agency Administration tab.	<input checked="" type="checkbox"/>	
	f The budget supports the proposed project and program intent, includes required staffing and travel costs, and the appears achievable with demonstrated resources.	<input type="checkbox"/>	40
	g Costs are reasonable and substantiated in the narrative.	<input type="checkbox"/>	20
	h The proposed budget narrative clearly describes any necessary allocation of resources among target populations or service areas.	<input type="checkbox"/>	20
	i Proposed sources of Required Match are identified in the budget narrative as well as in the Matching Fund Source table located near the beginning of the application. All proposed sources of matching funds are eligible, and the level of match is met.	<input checked="" type="checkbox"/>	

4.05 Applicant Qualifications - Criteria Relating to Personnel, Management, and Facilities

- 1** *(Application Group: Community Coalitions, Application Group: Health Systems Change) - In the text box below, describe the agency's previous experience in providing services the same as, or similar to, those proposed. Clearly identify the time period over which services were provided and the population served. This is part of the pre-award risk assessment required under Uniform Guidance 2 CFR 200.*

Evaluation/Review Criteria	Review	Points
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	<p>a The applicant's previous experience providing the same or similar services demonstrates the resources and capacity needed to provide the solicited program services. Note: the review by department staff will also include documentation such as prior year performance reports, audit reports, site visits, etc. as noted in Subsection 4.03.</p>	<input type="checkbox"/>	60
	<p>b Agency has the financial strength and capacity to manage grants and verifies that it has the capacity to implement funds if received.</p>	<input checked="" type="checkbox"/>	

2 *(Application Group: Community Coalitions, Application Group: Health Systems Change) - In the text box below, describe the proposed project's program and administrative staffing needs. Scan the following documents as a single file and upload in the space provided below: 1) Position descriptions for key project positions 2) Resumes and professional credentials for position holders 3) Resumes of administrative staff providing supervision, fiscal, reporting, and management needs. This is part of the pre-award risk assessment required under Uniform Guidance 2 CFR 200.*

Evaluation/Review Criteria	Review	Points
<p>a Staff providing services are qualified and competent as demonstrated by the uploaded position descriptions, resumes, and professional credentials.</p>	<input type="checkbox"/>	120
<p>b Staffing levels are sufficient to support the requirements of the proposed project and compliant with all identified program mandates.</p>	<input type="checkbox"/>	80
<p>c Position descriptions support the intent of the RFP and the project proposed.</p>	<input type="checkbox"/>	60
<p>d Administrative staff is qualified as demonstrated by the resumes provided.</p>	<input type="checkbox"/>	80
<p>e Administrative capacity demonstrates capability to meet management and reporting needs.</p>	<input type="checkbox"/>	80
<p>f A current organizational chart showing relationship of this project to the other functions within the organization are included.</p>	<input type="checkbox"/>	40
<p>g Agency has indicated in the narrative proposal what the overall agency staff turnover rate has been during the past two years.</p>	<input checked="" type="checkbox"/>	

3 *(Application Group: Community Coalitions, Application Group: Health Systems Change) - In the text box below, describe the procedures that will be used to protect client confidentiality.*

Evaluation/Review Criteria	Review	Points
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	a The applicant's description identifies the procedures necessary to protect client confidentiality compliant with State and Federal standards.	<input type="checkbox"/>	100
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4 *(Application Group: Community Coalitions, Application Group: Health Systems Change) - In the text box below, describe the service delivery facilities and locations and the ways in which access to services will enhance project success.*

Evaluation/Review Criteria	Review	Points
a The facilities described are safe and appropriate to the purpose of the program.	<input type="checkbox"/>	60
b Access to the locations will enhance delivery of services to the targeted populations.	<input type="checkbox"/>	60

4.06 Demonstration of Support/Coordination of Service

1 *(Application Group: Health Systems Change) -*

In the upload field below, provide a single-file scan of documented administrative support for the proposed project.

- *One (1) Memorandum of Understanding of Letter of Support was provided by agency's IT department demonstrating understanding, support, and prioritization of proposed project.*

Evaluation/Review Criteria	Review	Points
a Appropriate documentation of support is provided from each community in which the applicant proposes to provide services.	<input type="checkbox"/>	60

2 *(Application Group: Community Coalitions, Application Group: Health Systems Change) -*

In the upload field below, provide a single-file scan of documented organizational and community support for the proposed project.

- *One (1) Letter of Support was provided by agency's leadership demonstrating understanding, support, and prioritization of proposed project*
- *Three (3) Letters of Support were provided by community partners demonstrating agency's experience, community impact, and support for project.*

Evaluation/Review Criteria	Review	Points
a Required Letter of Support was provided by agency's leadership demonstrating understanding, support, and prioritization of proposed project	<input type="checkbox"/>	30

	b Required Letters of Support were provided by community partners demonstrating agency’s experience, community impact, and support for project.	<input type="checkbox"/>	30
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3 *(Application Group: Community Coalitions) -*

In the text box below, describe partnerships or collaborations necessary to the proposed project. In the upload field below, provide a single-file scan of the attached Community Coalition form documenting existing partnerships and collaborations specific to the proposed project.

Evaluation/Review Criteria	Review	Points
a Partnerships and collaborations necessary for the effective delivery of services are well described. Evidence specific to the proposed project is provided.	<input type="checkbox"/>	60

4 *(Application Group: Health Systems Change) -*

In the text box below, describe partnerships or collaborations necessary to the proposed project. In the upload field below, provide a single-file scan of the attached Health Systems Change Internal Healthcare Partners form documenting existing partnerships and collaborations specific to the proposed project.

Evaluation/Review Criteria	Review	Points
a Partnerships and collaborations necessary for the effective delivery of services are well described. Evidence specific to the proposed project is provided.	<input type="checkbox"/>	60

5 *(Application Group: Community Coalitions, Application Group: Health Systems Change) - In the text box below, describe the in-place or planned coordination with the State or other providers for referrals necessary to project success. Identify the project staff involved as well as the responsible positions at the referring agencies.*

Evaluation/Review Criteria	Review	Points
a The applicant's description demonstrates a clear understanding of the roles that must be performed by the applicant and by referring agencies for the effective delivery of services to the targeted population.	<input type="checkbox"/>	60