

**REQUEST FOR FUNDING APPLICATIONS (RFA)**

**HOUSING OPPORTUNITES FOR PERSONS WITH AIDS (HOPWA)**

**NORTHERN NEVADA ONLY**

**APPLICATION DEADLINE**  
**MAY 23, 2025**  
**12:00 NOON PST**



Office of HIV  
HOPWA Program  
2290 S. Jones Blvd.  
Suite 110  
Las Vegas, Nevada 89146  
Phone (702) 486-0767

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## BACKGROUND INFORMATION

The State of Nevada, Division of Public and Behavioral Health, Community Health Services Branch, Office of HIV (OOH) is now accepting applications from community stakeholders and organizations interested in delivering services to eligible clients through funding received from the U.S. Department of Housing and Urban Development (HUD) under the Housing Opportunities for Persons with HIV/AIDS (HOPWA) program.

HOPWA funds are authorized by the AIDS Housing Opportunity Act, and as amended by the Housing and Community Development Act of 1992. The program is designed to provide states and local jurisdictions with resources to develop long-term, comprehensive strategies for meeting housing needs and reduction of homelessness in low-income persons with acquired immunodeficiency syndrome (AIDS) and their families.

The HOPWA Program provides subgrants for activities delivering eligible housing and related supportive services to low-to-moderate income persons with Human Immunodeficiency Virus (HIV)/Acquired Immunodeficiency Syndrome (AIDS) and their families. Community stakeholders and/or organizations interested in applying for participation as a project sponsor under the HOPWA program must document their conformity with certain eligibility requirements.

A person considered eligible to receive HOPWA services must have medical documentation of having HIV/AIDS and a household income that does not exceed 80 percent of the median income for the area, as determined by the Secretary of HUD.

<b>Funding Opportunity Title:</b>	Housing Opportunities for Persons with AIDS (HOPWA)
<b>Release Date:</b>	Friday, April 25, 2025
<b>Due Date for Applications:</b>	<b>Friday, May 23, 2025, by 12 Noon PST</b>
<b>Review Period:</b>	May 27, 2025 – May 29, 2025
<b>Project Sponsor Notification:</b>	Monday, June 2, 2025
<b>Anticipated Total Annual Available Funding:</b>	\$400,000 - \$550,000
<b>Cost Sharing/Match Required:</b>	None
<b>Federal Project Period:</b>	July 1, 2025 – June 30, 2030 or until all funds are exhausted

*Please note that the above dates may be adjusted as needed.*

## ELIGIBILITY

Services proposed under this RFA are limited to northern Nevada, specifically the following counties: Washoe, Carson City, Douglas, Lyon, Mineral, Churchill, Pershing, Humboldt, Lander, Eureka, White Pine and Elko.

Applicants must be tax exempt under section 501 (c)(3) of the 1954 Internal Revenue Service Code and meet the statutory definition of a non-profit organization. Eligible organizations must have, among its purpose, significant activities related to providing services or housing to persons with AIDS or related diseases. HUD interprets the use of “related diseases” in this definition to include HIV infection.

Applicants must be either a community group/organization; private non-profit; or a government agency with tax exempt status.

## FUNDING INFORMATION, PROCESS, AND ELIGIBLE SERVICES

### Funding Information

HOPWA funding is provided in conjunction with the funding allocated by HUD upon submission and approval of a five-year Consolidated Plan and an Annual Action Plan. The forth coming 2025-2029 Consolidated Plan outlines OOH’s plans to provide services to eligible clients. Anticipated HOPWA funding awarded to OOH to provide services is between \$400,000 to \$550,000 annually. Applicants should be advised that applying for this RFA does not guarantee funding.

All subgrants are contingent on availability of funds. Funding is typically for a one-year performance period and available only for northern Nevada clients. Continuation of funding is not to be assumed or implied. Decisions about funding are made based on the established priorities, client or agency needs, project sponsor(s) program performance and available funding.

All funded subgrants must comply with applicable federal, state, and local statutory requirements including but not limited to those set forth in [Code of Federal Regulations 24 \(CFR\), Parts 50 and 574](#), as well as applicable administrative and accounting standards as set forth in [Office of Management and Budget \(OMB\) Circulars, 2 CFR Part 200](#).

Please note the following:

- Subgrants awarded through this RFA are for the 2025-2029 Consolidated Plan period OR until all HOPWA funding awarded to OOH is utilized, whichever one arises first.
- The performance period of the 1<sup>st</sup> year of this RFA will be tentatively July 1, 2025 – June 30, 2026.
- Funding allocations or subgrants will be partially based on (1) client need related to the available eligible services (see pages six - nine), (2) the unique needs of specific target populations, and (3) the availability of funds.
- Decisions about funding are made based on the established priorities, needs assessment, quality assurance, program performance and available funding.

- Lastly, OOH reserves the right to increase or decrease funding based on a project sponsor's rate of spending, or lack thereof, as delineated in their subgrant.

### Housing Opportunity Through Modernization Act

Please be advised that due to the [Housing Opportunity Through Modernization Act](#) (HOTMA) that was signed into law on July 29, 2016, the OOH HOPWA Program will no longer be classified as a HOPWA Non-Competitive Grantee after July 1, 2025. The conditions under HOTMA to continue as a Non-Competitive Grantee are:

- States must have more than 2,000 people living with HIV or AIDS, excluding those counted within an eligible Metropolitan Statistical Area (MSA) in the state.
- (Note: The previous eligibility requirement was more than 1,500 cumulative AIDS cases for both MSAs and states.) Required HUD to redetermine the continued eligibility of a grantee that received an allocation in FY 2016 at least once during the 10-year period following FY 2016.
- In FY 2026, HUD will redetermine eligibility of existing formula grantees, and States and MSAs must meet the eligibility criteria in the statute to receive a formula allocation regardless of previous status as a HOPWA grantee.

Based upon these criteria, it was determined that OOH currently serves 1,384 people living with HIV or AIDS in our MSA/State. OOH will continue to provide HOPWA services to eligible clients until all unencumbered allocations and last official allocation has been exhausted. The goal of this RFI is to work with awarded project sponsor(s) to leverage other housing resources, such as Section 8, and collaborations with public housing authorities (PHAs) in lieu of lack of continued HOPWA support.

### Process

**Deadline for RFA proposal submittal is Friday, May 23, 2025.** Only electronic submittals, via email, will be accepted. Submissions should be sent to [NVHOPWA@health.nv.gov](mailto:NVHOPWA@health.nv.gov). Hand-delivered, faxed or mailed proposals **WILL NOT** be accepted. For any issues related to submission or clarification questions related to the RFA, please contact [Tory Johnson, Health Program Manager II](#) at (702) 486-0767 or [ToryJohnson@health.nv.gov](mailto:ToryJohnson@health.nv.gov).

#### *Special Considerations:*

*Corrections and modifications to submitted applications are only permitted prior to the application deadline. Agencies will not be compensated for expenses related to the submission of the proposal.*

*OOH reserves the right to request clarification or additional information on any application, deny funding of any proposal submitted, and negotiate terms and amounts of the final budget. Also, OOH reserves the right to disqualify incomplete applications. Proposals will not be returned.*

*To ensure a fair and transparent process, a review panel will evaluate all submitted proposals and provide recommendations to OOH. OOH will retain final decision-making authority.*

## Eligible Services

- Rental Assistance:
  - A. Tenant-Based Rental Assistance (TBRA): Includes assistance for shared housing arrangements. Maximum monthly assistance for an eligible person may not exceed HUD approved subsidy standards. The rents shall be established by the Project Sponsor and shall not be more than the published Section 8 fair market rent rates (FMR) for the region eligible client is accessing services. **Funds are not paid directly to the client.**
  - B. Project-Based Rental Assistance (PBRA): Is the provision of subsidies to units in affordable housing developments, and the subsidy is attached to the unit, NOT the tenant. The unit MUST be occupied by a low-income tenant with HIV/AIDS.
- Short-Term Housing Assistance:
  - A. Short term rent, mortgage, and utility payments (STRMU) to prevent homelessness of the tenant or mortgager of a dwelling. STRMU cannot be applied to cost accruing over a period of more than twenty-one (21) weeks in any fifty-two (52) week period. STRMU assistance can cover three (3) types of payments, 1) Back and ongoing rent payments, 2) Back and ongoing mortgage payments, and 3) Back and ongoing utility payments. STRMU can also assist with late fees associated with overdue rent, mortgage, or utility payments.
  - B. STRMU **DOES NOT** include assistance such as rent payments or fees made to support the placement of a tenant or household in permanent housing, such as 1<sup>st</sup> or last month rent payments, security deposits, or application fees. These types of payments are eligible activities under Permanent Housing Placement (PHP).
- Supportive Services:
  - A. Eligible activities under Supportive Services, with OOH preferred services to be funded (\*)
    - Adult day care and personal assistance
    - Alcohol and drug abuse services
    - Case management/advocacy/coordination of benefits\*
    - Childcare
    - Education\*
    - Employment assistance and training for persons living with HIV/AIDS
    - Health and medical services [with restrictions described in [CFR 574.310\(a\)2](#) and in grant agreements]
    - Legal services
    - Life skills management\*
    - Nutritional services (including meals)
    - Mental health services
    - Outreach\*
    - Transportation

- B. Permanent Housing Placement (PHP), which can provide direct housing assistance, such as helping an eligible client establish a new residence where continued occupancy is expected. PHP costs CANNOT exceed the value of two (2) month's rent in the newly occupied unit. This can be accomplished by one of the following activities:
- Application Fees
  - Credit Checks
  - Security Deposits
- C. Housing Information includes assistance with referrals to affordable housing resources, assistance in locating available, affordable, and appropriate housing units, working with property owners to secure units for participants, homelessness prevention, and other housing-related activity. This DOES NOT include providing services such security deposits, 1<sup>st</sup> month rent, relocations, costs, etc. as this would be provided under housing PHP. Eligible activities consist of:
- Counseling (examples include fair housing counseling for eligible persons who encounter discrimination based on race, color religion, sex, age, national origin, familial status, LGBT or handicap), this would be a collaborative effort to work with Ryan White Part B and the awarded subrecipient for Other Professional Services: Legal Services.
  - Information
  - Referral
- D. Case Management focuses on housing assessments, placement, and housing stability. The core functions of case management consist of engagement, assessment, goal setting, service coordination, and discharge planning. Case managers funded to conduct case management, typically provide the following services:
- *Direct service.* Case managers may deliver program services such as group or individual counseling, substance abuse treatment, employment training, and other services depending on the program focus.
  - *Crisis intervention.* Case managers are often responsible for managing crisis services to respond to immediate critical client issues.
  - *Monitoring.* This may include regular, scheduled visits or checks on clients.
  - *Individual and system advocacy.* Case managers frequently advocate on behalf of clients to solve problems and help clients access services; advocacy to change larger systems of policies, however, is often a function of program and supervisory personnel.
  - *Resource development.* Case managers often work to create or encourage new resources needed by clients.
  - *Evaluation and reporting.* Case management client records are a primary source of data.

- Resource Identification:  
intended to help grantees establish, coordinate, and develop housing assistance resources in a community and to conduct research or carry out activities to determine the feasibility of specific housing-related initiatives. Resource ID-funded programs should help address access to and leveraging of mainstream housing to better meet the needs of People Living with HIV/AIDS (PLWHA), including targeted outreach and relationship-building with public housing authorities (PHAs).

Eligible Activities under [Resource Identification](#) are A) Development of Housing Resources, B) Needs Assessment and Research, C) System Coordination, and D) HOPWA Training Costs. This RFA will focus ONLY on A, and B. *Applicants can combine several options, and should be able to clearly show that in their responses.*

A. Development of Housing Resources:

- Option One (1): Outreach and relationship building with landlords. Which is the ability to build landlord relationships, develop lists of landlords willing to rent to clients, and otherwise broaden the “base” of available housing can benefit the entire system of HOPWA services.
- Option Two (2): Identify and track housing resources and vacancies. Which is the ability to create and maintain lists of housing resources, including private landlords, facility-based housing funded through all sources, units that may be affordable without subsidies, and other similar information. Also, the ability to compile this information and create a resource directory for public consumption, either via a pamphlet or electronic means, i.e., QR codes, website.
- Option Three (3): Leverage mainstream housing for PLWHA. Which is the ability to identify and work with PHAs and help leverage additional housing through a concentrated effort to work closely with sad PHAs, housing authorities, low-income housing tax credit (LIHTC) projects, HOME, and other HUD funding sources with the goal of prioritizing PLWHA on waitlists, arranging set-asides, combining funding sources to develop housing, and other ways to increase housing and housing access.
- Option Four (4): Interface with Public Housing Authorities (PHA). Which is the ability to engage regularly with housing authorities to result in closer relationships, better PHA understanding of PLWHA housing needs, and possible set-aside vouchers or priority for PLWHA.

B. Needs Assessment and Research:

- Option One (1): Collect and analyze local HIV housing-related data. Which is the ability to collect and analyze local data related to housing and housing stability, possibly community-wide needs assessment. Also, the ability to carefully analysis data on PLWHA needs, help communicate program impacts and service gaps while identifying and help establish HOPWA priorities and leverage other community resources.



- Option Two (2): Fund client surveys. Development and possible implementation of client surveys to produce information on housing needs, client stability levels, gaps, and other data.
  - Option Three (3): Conduct housing market studies. Which is the ability to conduct studies to help establish a baseline of information about available housing and its affordability.
  - Option Four (4): Conduct client focus groups. Which is the ability to conduct focus groups to produce qualitative and quantitative data, providing confidential feedback on client needs, desires, and experiences within the existing system of care.
- Administrative Expenses:  
No more than 7% of funds awarded to project sponsor can be allocated as an administrative expense. Please note that time directly provided by a program staff person, such as TBRA should be considered as a cost directly related to a grant activity and not charged to Administrative Expenses. Awarded project sponsor will need to be clearly delineate between direct and administrative expenses. Typical types of allowable activities consist of the following:
    - Staff Training
    - Oversight
    - Coordination
    - Evaluation
    - Activity Reporting
    - General Management

## EVALUTION CRITERIA AND FORMAT

### Evaluation Criteria

A complete application includes ALL requested forms and documentation. All complete and timely applications that are determined eligible for HOPWA funding and that meet national program objectives under federal regulations will be evaluated using the following criteria and there is a maximum of 100 points to be awarded:

- i. Background Information (Five points)
- ii. Summary of Application (Five points)
- iii. Service Provision (65 points)
  - a. Justification of Need (10 points) – Application must be able to document the community need that the proposed service is expected to address. Application must be able to provide agency-level or community-level data to justify need for the service. If there are other available sources of funding for the proposed service, the applicant must be able to demonstrate why there is a need to fund this service.
  - b. Description of Service(s) (10 points) – Application must clearly define the type of service to be provided and demonstrate the ability to service client needs. Application must be able to provide a description of the service, define the components covered by this service, and provide a description of steps

- required for service delivery. If available, attach and discuss policies and procedures that are already in place to provide these services.
- c. Client Eligibility Requirements (Five points) – Applicant must have eligibility requirements for clients and must be able to specify the eligibility screening process, as well as how eligibility will be documented to ensure non-eligible clients are not receiving services and/or possibly referred to other payor sources.
  - d. Estimated number of unduplicated clients and/or housing units to be provided (15 points) – Application must clearly define the type of service, the number of units to be provided, the number of unduplicated clients to be served and the population targeted by this service.
  - e. Outcome objectives and proposed evaluation methods (15 points) – Application should be able to identify at least one (1) client-level outcome objective as a result of providing the proposed service; specify objective outcome measures; and indicate the process for outcome measurement.
- iv. Project Management (10 points) – Application should be able to show the organization's capability and capacity to undertake providing HOPWA services, program planning, implementation, and any monitoring and evaluation efforts.
  - v. Budget and Diversity of Funding Source (5 points) – Due to the HOTMA conditions impacting future funding, application should strongly reflect the organization's ability to leverage funding sources and has diversified funding to supplement or temporarily sustain its services once OOH HOPWA funding ceases.
  - vi. Quality Improvement Methods (10 points)
    - a. Client Satisfaction (Five points) – Application should show the ability to gauge the level of quality of proposed services to clients, as well as be able to provide information the grantee, OOH, on how information will be distributed to clients and the grantee for quality improvement.
    - b. Grievance Procedures (Five points) – Application should show the steps taken for clients to seek the ability to grieve client issues, how they are resolved at the lowest possible level, but also include the ability to appeal decisions, as well as show grantee involvement, as needed, in the process.

Proposals should adhere to the following general guidelines for HOPWA funding. The proposal should be submitted with the required content, in the format requested and must address service delivery from July 1, 2025 – June 30, 2026.

Actual allocations are subject to the availability of funds. Applications that do not follow the proposal guidelines stated below will not be reviewed. Also be advised of the following:

- Applications should be submitted via email no later than by 12 noon PST on May 23, 2025. *Reminder: Hand delivered, faxed or mailed applications will not be accepted.*
- All required attachments should be uploaded with your proposal. If the file is too large, a zip version can be submitted and prepared in such a way that it matches the flow and structure of the RFA outline.
- Applications will be evaluated by the quality of the responses to the RFA questions. Answering all applicable questions is essential to the review process.

## Revisions

Section	Item	Added	Removed
Format	i. Background Information	e. (are considered attachments, and not count towards page limit)	None
Format	iii. Service Provision	[no more than six (6) pages]	None
Format	iv. Project Management	[no more than six (6) pages]	Form is below.
Format	v. Budget and Diversity of Funding Sources	a. (see document here, and this document should be submitted as an Excel document)	a. (see attachment AA)

## Format

- i. Background Information [no more than two (2) pages, not including attachments]
  - a. Name of Organization
  - b. Description of the Organization, i.e. how long in existence
  - c. Social media presence, such as web address
  - d. Unique Entity Identifier (UEI) number
  - e. Proof of Eligibility **(are considered attachments, and do not count towards page limit)**
    - i. Is your organization physically located in northern Nevada?
      1. Please attach organization registration or any another official document that shows address to support this response.
    - ii. Does your organization provide services within northern Nevada?
      1. Please attach any supporting documentation that supports this response.
    - iii. Is your organization either a community group/organization, private nonprofit organization, or a governmental entity?
      1. Please attached any supporting documentation that supports this response.
    - iv. Does your organization currently have Internal Revenue Service (IRS) 501(c)(3) status?
      1. Please attach verification of this response.
- ii. Summary of Application [no more than five (5) pages]
  - a. Give a brief description of your organization's work. What is your organization's mission statement? What are your organization's major programs?
  - b. Describe the eligible services to be provided by this grant. Please note if services are continuing, expanded, or new.
  - c. Target Population and Service Area(s)
  - d. Summary of Proposed Services
  - e. Description of Funding Request
- iii. Service Provision **[no more than six (6) pages]**

Name of Service Category or Categories

  - a. Description of community need and how the proposed service will address it. Note: Should include information on client needs based on any applicable data, other pertinent information.
  - b. Description of the service or services proposed to be offered. Note: Please be precise and offer enough detail to ensure that it is clear of what is and/or is not covered under that service category or service categories. Include clear and detailed information on limitations, including number of times the service may be provided in each time period and any applicable financial caps and/or other restriction applied in accordance with organization, state or federal policies
  - c. Description of client eligibility criteria(s) that must be met to ensure only eligible clients are receiving services. Note: Application should clearly indicate the eligibility criteria that will need to be met by the client to be considered for assistance for the service listed. For services that involve financial assistance, income thresholds must also be established; Refer to the [HOPWA Financial Management Training Manual](#).

- d. Describe the estimated number of clients to be assisted, eligibility, screening, determination and documentation processes that are proposed to be used. Given the client eligibility criteria, also specify the process for screening eligibility, determining need and providing assistance. Include the time it will take to determine eligibility and to process the request for service.
    - e. Identify at client-level outcome objectives as a result of providing the proposed service.
  - iv. Project Management **[no more than six (6) pages]**
    - a. Application should describe the role(s) of each key individual or staff person in your organization that will be responsible for HOPWA service delivery. ~~Form is below.~~ Note: Please provide an organizational chart.
      - i. Position/Title
      - ii. General Job Description(s) (attachments are appropriate)
      - iii. Key Responsibilities
        - 1. Service Delivery Area
        - 2. Supervision
        - 3. Planning
        - 4. Evaluation/Monitoring Service Delivery
        - 5. Client Satisfaction
        - 6. Grievance
        - 7. Reporting
        - 8. Fiscal
  - v. Budget and Diversity of Funding Sources
    - a. Budget Summary **(see attachment [here](#), and this document should be submitted as an Excel document)**
      - i. Administrative costs are not to exceed 7% and should be clearly described.
      - ii. Narrative clearing showing any leverage funds or future leverage funds to continue with HOPWA services beyond what OOH can provide.
      - iii. Travel should be based on GSA rates.
      - iv. Provision of service categories can be outlined under "Other."
      - v. Provide brief narrative explanation of how services might continue based upon the information related to HOTMA contained within the RFA. This can be a separate tab within the excel spreadsheet template.
  - vi. Quality Improvement Methods
    - a. Client Satisfaction
      - i. Does your organization currently conduct a client satisfaction survey? If yes, please attach a copy of the client satisfaction survey form in the attachment section.
      - ii. If yes, how often are surveys undertaken and when are reports available? If no, discuss how you will implement a client satisfaction survey.
    - b. Grievance Procedure
      - i. Application should describe what your organization client grievance procedure is. Attaching procedure is appropriate.
      - ii. Application should also clearly identify how clients are made aware and understand the grievance procedure and, how and when resolutions occur and involvement, as needed, of grantee.
  - vii. Attachments (no score) – [no more than five (5) pages]

- a. Memorandum of Understanding or Agreements with other community-based organizations
- b. Two (2) letters of support

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## Application Checklist

i.	Background Information completed	
ii.	Summary of Application completed	
iii.	Service Provision completed	
iv.	Project Management completed	
v.	Budget and Diversity of Funding Sources completed	
vi.	Quality Improvement Methods completed	
vii.	Attachments	
	a. MOU/MOA	
	b. Two (2) letters of support	
	RFA Cover Page completed and signed	



## Background Information

## Summary of Application

## Service Provision

## Project Management

### **Diversity of Funding Sources**

Please utilize budget template (Attachment AA)

## Quality Improvement Methods

## Cover Page

### Nevada Division of Public and Behavioral Health Office of HIV

#### Request for Funding Application to provide Housing Opportunities for People with AIDS (HOPWA) services **Northern Nevada Only**

**Release Date: Friday, April 25, 2025**  
**Deadline for Submission and Time: Friday, May 23, 2025, by 12 noon**

For additional information, please contact  
[NVHOPWA@health.nv.gov](mailto:NVHOPWA@health.nv.gov)

Website for Additional References: <https://endhivnevada.org/hopwa/>

**Agency Name:** \_\_\_\_\_

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

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Tel:** \_\_\_\_\_

**Executive Director/CEO:** \_\_\_\_\_

**Executive Director Email:** \_\_\_\_\_

**Point of Contact:** \_\_\_\_\_

**Point of Contact Email:** \_\_\_\_\_

I have read, understand, and agree to all terms and conditions herein.

**Signed:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Print Name:** \_\_\_\_\_ **Print Title:** \_\_\_\_\_