DIS/PS RFP Frequently Asked Questions

Will partner Services training be coming to Indianapolis for supervisors and other staff needing ISTDI training?

If enough people in the state need to take it we will ask CDC to hold training in Indianapolis.

What is the average salary for an Indiana DIS?

The average DIS salary is $35,000.00

What factors generally should be considered when establishing the salary of a DIS?

This RFP allows for a flat rate of 50,000/FTE. This amount covers all expenses associated with the position, including salary, fringe, travel, supplies, rent, utilities, etc. Those factors should be taken into consideration when determining the salary.

The document on cdc.gov entitled Partner Services FAQ suggests that local health departments that implement an integrated DIS/PS program and are already using PEMS will only need to submit data through that system. "Data need only be entered into one system at the local level and will be integrated in the national database." Please Explain?

Contractors will need to input all data related to STD activities into the SWIMSS data base. Any HIV testing done through DIS activities that use either the state lab or state supplies will also need to input data into Evaluation Web®

How are local health departments or CBOs that will be administering DIS positions, be advised to augment the $50000/FTE awards to also accommodate for operating expenses?

Several local health departments use county funds to augment operating costs. CBOs normally have multiple funding sources and use those funds for operating costs.

Can you give some examples where multiple health departments or CBOs within a district are sharing resources or budgets to accommodate their District DIS position(s)?

I do not have access to the total operating budgets of LHDs or CBOs in order to give examples. I can say that Elkhart County independently funds a DIS.

On page 7 of the RFP, under Activities Plan it talks about each eligible population --- are you requesting and implementation plan for each infection or should the plan cover them all as one implementation plan?

That will be up to the agency submitting the proposal. The PS activities will probably be the same for all of the diseases; however the treatment verification process may be different depending on the disease. For instance, HIV is chronic infection treatment verification would include an active referral to medical services or care coordination not just a one-time doctor visit for medication.

What if travel is 100% in-kind?

Any in-kind contributions that will be used to cover expenses should be indicated in the budget along with the source of the in-kind donation.

Are you anticipating adding or moving DIS in any districts?

Because we are flat funded we will not be able to add DIS but will consider increasing the number of DIS in a district if morbidity indicates it. This would be offset by reducing DIS in another district.

Can agencies submit a proposal that would involve sharing a DIS?

No

How are costs covered for a part-time DIS?

The award would be a percentage of the 50,000/FTE based on the time spent. i.e. .5 FTE would equal 25,000.00

How many DIS are currently funded in each District?

District 1 – 4 DIS; District 2 - .5 Elkhart region; 2.5 remaining District 2 region;
District 3 – 3 DIS; District 4 – 1 DIS; District 5 - 4 DIS; District 6 – 1 DIS;
District 7 – 1 DIS; District 8 – 2 DIS; District 9 – 1 DIS

Can DIS currently being funded through the STD grant be moved to the HIV prevention grant?

The prevention RFP is not funding DIS activities. DIS proposals will only be considered under this RFP.

We currently have an STD DIS and an HIV DIS who does Counseling Testing and Referral activities (CTR) how is this impacted by the new RFP?

DIS are expected to perform CTR activities when offering partner services to an HIV positive. However, they are not being funded to perform stand alone CTR activities. An agency wishing to offer CTR activities as an intervention should submit a proposal using the HIV RFP. However, staff funded through this proposal will not be performing DIS activities because that would be a contract violation.

Is it okay for DIS activities to include field testing and field delivered therapy in the new RFP?

Yes; however, the only type of in-clinic activity that will be supported through this RFP will be activities that support the partner services component of the RFP. DIS will not be funded to perform patient exams, clinic phlebotomy, or any other health care service that should be performed by health care staff.