



# Gilead Relink HIV Pathways To Care Pre-Application Conference

February 24, 2026

# Agenda

- Key Information
- Introduction to Relink HIV Pathways To Care Project & Activities
- Review of Requirements For Applications
- Questions Regarding Application

# Key Dates For Application Process and Eligible Applicants



# Key Dates

## Deadline to Submit Applications:

- **Tuesday March 31, 2026 11:59 PM Eastern Standard Time**

# Key Dates

- Late applications will not be accepted.
- Early submission is strongly recommended in case there are any technical issues submitting the application.
- Please submit only one complete application. No additional unsolicited application materials or documents will be reviewed after submission.

# Key Dates

## Review and Scoring

- Complete by April 30, 2026

## Issuing Award Notifications

- Complete by May 15, 2026

# Key Dates

## Award Period

- Expected to be June 1, 2026 to May 31, 2028

*May be different if awards are executed later than expected.*

*NASTAD expected awarded applicants to be able to execute contracts within a reasonable timeframe post award. Applicants with significant delays in executing a contract may have their award rescinded.*

# Eligible Applicants

- Public Health Agencies (state, local, and tribal health departments or any other government agency with public health authority).
- 501(c)3 nonprofit organizations with experience providing HIV services.
- Universities or institutions of higher education with experience providing

# Cost Reimbursement

- The grant will be a cost reimbursement grant.
- Awarded organizations will submit monthly billings with backup documentation.

# Relink HIV Pathways To Care Project

Overview of Project



# Goals of Relink HIV Pathways To Care

- The Relink HIV Pathways to Care project's primary goal is increasing re-engagement into HIV care for persons who are out of care across the United States.
- The project also aims to improve health outcomes for persons with HIV as measured by the HIV care continuum measures of diagnosis by improving linkage to care, retention in care, and achieving viral suppression.

# Goals of Relink HIV Pathways To Care

**Objective 1.** Creating and implementing an intensive HIV re-engagement in care service delivery model with up to fifteen organizations in the United States. The process of design and implementation will leverage the strengths and knowledge of public health departments, HIV healthcare providers, government funded programs providing healthcare coverage, and persons with HIV to create the program.

**Objective 2.** Evaluate the effectiveness of the Relink HIV Pathways to Care program model and the impact on re-engagement in care and HIV health outcomes in the participating jurisdictions. This evaluation will be used to identify re-engagement activities that worked the most effectively, which can then be disseminated to and replicated by other organizations and communities in the United States.

**Objective 3.** Disseminate findings and best practices from the Relink HIV Pathways to Care project through multiple methods so the knowledge gained from the project can be utilized by organizations and communities across the United States to improve HIV care outcomes in their jurisdictions.

# Project Activities

- Develop and implement a two-year strategic plan to identify and re-engage out-of-care persons with HIV.
- Strengthen re-engagement in care infrastructure and cross-system coordination between local partners supporting re-engagement in care.
- Implement or expand re-engagement in HIV care services – these can include but are not limited to: disease intervention services, patient navigation models, and case management services. These services must focus on linkage and retention in care for persons with HIV who are not in care.
- Establish or enhance state-local partnerships with local HIV service provider organizations.
- Participate in NASTAD-led learning collaboratives to share best practices and foster peer learning.
- Submit quarterly performance and fiscal reports demonstrating progress on key metrics.
- Develop a sustainability plan outlining how activities will continue post-funding.

# Project Activities

- Participate in 60-minute monthly calls with NASTAD
- Provide depersonalized data quarterly to NASTAD. NASTAD will maintain the confidentiality of this data and not use or publish data without permission. The data elements are included in the Attachment Relink HIV Data Reporting Template. This data will be used to evaluate the effectiveness of the program locally and nationally.
- Conduct dissemination activities as approved by NASTAD which can include one or more of the following: writing an article published in an academic journal, presenting a poster at a national HIV conference, or presenting findings in an oral session or workshop at a national conference.
- Provide appropriate staffing for grant activities.

# Project Activities

- Develop a baseline Not-In-Care List for persons with HIV in their jurisdiction for NASTAD to measure the success of the program.
- Conduct re-engagement in care activities to re-engage clients identified in the Not-In-Care List in HIV care.
- **Work to achieve goal of re-engaging into HIV care 25% of persons identified in the Not-In-Care List.**

# Review of Requirements For Applications



# Funding Limits

Maximum funding for applicants is \$500,000 over a two-year period.

Applications over this amount will not be considered.

# Table of Contents and Cover Letter

- Must be included in applications.
- One page limit for each.

# Project Narrative

- Should provide a comprehensive description of need, strategy, and how project objectives will be achieved.
- Important to describe local HIV healthcare landscape and data systems.
- Ten page limit.

# Work Plan and Timeline

- Provide description of how activities will be accomplished, persons responsible.
- Applicants are required to utilize NASTAD provided Work Plan template.
- Six page limit.

# Budget and Budget Narrative

- Provide clear justification of costs.
- Costs should be connected to activities described in Project Narrative and Work Plan concretely.
- Applicants are required to utilize NASTAD provided Budget and Budget Narrative template.
- No page limit.

# Budget – Allowable Costs

- Personnel (Salaries)
- Fringe Benefits (Employee Related Expenses)
- Travel
- Equipment
- Supplies
- Database and or IT related expenses
- Professional and Outside Services.
- Other Operating Expenses.
- Administrative Costs

# Budget – Unallowable Costs

- Prescription drugs or any prescription drug or medication costs (copays, coinsurance, deductibles)
- Medical expenses (including doctor's visits and diagnostic lab expenses)
- Research activities
- Lobbying activities
- Direct payments to persons with HIV
- Activities prior to the start of the grant period
- Activities that directly advance pharmaceutical manufacturer's business interests.

# Budget – Unallowable Costs

If there are questions about whether certain costs are allowable email [relink@nastad.org](mailto:relink@nastad.org).

# Letters of Support

- If there are key partners (e.g., local health departments, RWHAP Parts A–F, CBOs) integral in completing work plan goals provide letters of support from those partners.
- Limit to one page per organization.

# Organizational Chart and Key Personnel

- Describe project management, key staff, and reporting relationships.
- Limit to two pages

# NASTAD Data Sharing Agreement

- Organizations are required to report deidentified client level data to NASTAD.
- As part of this reporting applicants must sign and submit a data sharing agreement agreeing to share Relink HIV data with NASTAD if awarded.

# Letters of Commitment or Attestations

- As part of re-engagement in care applicants must provide medical appointments within five days of contact in re-engagement process and assistance with obtaining health care coverage or must partner with an organization(s) that can provide those services.
- If not providing directly the applicant should provide letters of commitment from those organizations stating they will provide those services.
- If applicant is directly providing services then the applicant should provide a letter(s) stating they will directly offer those services.

# Risk Assessment Questionnaires

- NASTAD Risk Assessment Questionnaire Form must be filled out and submitted with application.
- NASTAD provided form must be used.
- Organizational policies and procedures noted as being in place in the form must be attached.

# Financial Documents

- Most recent single audit or certified audit
- If nonprofit provide copy of IRS 501(c)3 determination letter
- Federally approved indirect rate letter from cognizant federal agency if requesting indirect costs above 15% de minimis rate.

# Data Sharing Agreements

- If available data sharing agreements demonstrating access to HIV surveillance data.
- If available data sharing agreements demonstrating access to other data sources relevant to project.
- If key data sharing agreements are not in place a letter of commitment stating that an agreement will be in place by three months after the grant award.

## Data Sharing Agreements (cont'd)

- While data sharing agreements or commitments to establish data sharing agreements are not required it is strongly recommended that they be included as part of applications.
- In particular, some level of access or ability to use HIV surveillance data is strongly preferred.

# Application Submission

- Submit applications as one PDF document to [relink@nastad.org](mailto:relink@nastad.org). If there are difficulties submitting a large document by email, please notify NASTAD.
- We strongly encourage applicants to submit their applications before the due date. NASTAD will confirm receipt of your application.
- Documents should be in the order provided in the RFP.

# Priorities For Funding



# Priorities

- Organizations that demonstrate access to extensive data sources to support re-engagement in care efforts including but not limited to the following examples: HIV surveillance data, Health Information Exchange data, Medicare data, pharmacy data, Electronic Health Records from large healthcare systems, Lexis Nexis data, and other similar data sources.
- Organizations can demonstrate access by owning or controlling the data, or by having access to it through data sharing agreements or contracts.
- Organizations that do not have access to the data sources described, but demonstrate they will obtain access to those sorts of data sources within three months of grant award.
  - Organizations should also demonstrate which data sources they will be able to gain access to.

# Priorities (cont'd)

- Applicants who propose to deliver re-engagement in care services in jurisdictions with case rates of 200 per 100,000 or greater.
- Jurisdictions able to demonstrate large numbers of persons with HIV not engaged in HIV care.
- Applicants able to demonstrate they will re-engage in care either large numbers of clients or, if working with smaller numbers, demonstrate that they are focusing on populations where social determinants of health contribute to greater difficulties re-engaging in HIV care.
  - An example of such a population that might require more intensive support to re-engage smaller numbers of clients would be persons who are unhoused.

# Priorities (cont'd)

- Organizations do not need to meet all of these priorities to be considered for funding.
- However, organizations that demonstrate that they meet more of these priority areas, or are particularly well positioned to succeed in a particular priority area are likelier to be scored more highly in the review process.
- Likewise, organizations that demonstrate the ability to partner with others and work in an integrated manner with the local or state HIV healthcare delivery system are likelier to be scored higher in the review process.

# Data Reporting



# Data Reporting

- Organizations are required to submit quarterly data reports to NASTAD.
- Data reports will be submitted through REDCap database provided by NASTAD.
- Data will be depersonalized client level data.

# Data Reporting

- The Relink HIV Pathways To Care - HIV Data Report Template contains the data elements for which reporting is expected.
- Data reporting is a required component. Organizations not able to provide data required are not eligible to apply.
- The NASTAD Data Sharing Agreement is part of the application and is required to share data with NASTAD. It must be submitted as part of the application.

# Questions About Application Process



# Questions Related to RFP

- Questions can be directed to [relink@nastad.org](mailto:relink@nastad.org) for responses from NASTAD.
- Responses to questions with general applicability to all potential applicants will be posted on the NASTAD Relink HIV website.  
<https://nastad.org/pathways-to-care/>

# Questions?