Request for Proposals Question and Answers

Subrecipient for Implementation and Evaluation of Healthy Native Babies Project (HNBP) Materials

Date Issued: October 22, 2026

Questions and Answers

Q1: The provided budget template includes Personnel and Overhead/Indirect categories but does not include a separate Fringe Benefits category. Should fringe benefits applicable to direct personnel costs be included within the Personnel cost calculation, reported under Overhead/Indirect, or otherwise identified in the budget narrative?

A1: Fringe benefits should be included as part of personnel costs and reflected in the fringe calculation section of the budget template. Applicants should describe their fringe benefit methodology, including the applicable rate, in the budget narrative. See the budget template instructions regarding fringe benefit calculations.

Q2: Would a business entity wholly owned by a federally recognized Tribe qualify as a Tribal Serving Organization under this RFP when it proposes to implement the project in partnership with the Tribe's health program and within the Tribe's service area?

A2: Yes. A business entity wholly owned by a federally recognized Tribe may be considered eligible as a Tribal Serving Organization if it meets all other eligibility requirements outlined in the RFP and demonstrates its capacity to serve AI/AN populations within the proposed service area.

Q3: The eligibility requirements state that applicants must have demonstrated experience developing or using HNBP materials. Must this experience reside within the applicant organization itself, or may it be demonstrated through a Tribal health-program partner, subcontractor, or proposed key personnel? Would experience with Safe to Sleep or closely related culturally grounded infant safe-sleep programming satisfy this requirement?

A3: Applicants should demonstrate experience in the development or use of Healthy Native Babies Project materials through their proposed project team, which may include organizational staff, key personnel, consultants, subcontractors, or implementation partners. Experience with Safe to Sleep® or other culturally grounded infant safe-sleep initiatives may be considered relevant; however, applicants should clearly describe how that experience relates to implementation of HNBP materials.

Q4: May an applicant rely on subcontractors or affiliated Tribal entities for implementation, training, evaluation, or project-management capacity?

A4: Yes. Applicants may utilize subcontractors, consultants, or affiliated Tribal entities to support project implementation, training, evaluation, and project management activities. Any subcontracted activities should be clearly described in the proposal and budget.

Q5: Are there restrictions on the percentage of work or budget that may be subcontracted? May the requirement for adequate staffing capacity at the time of award be satisfied through committed subcontractors and named consultants, including a remote public-health or evaluation lead, or must all key personnel be employees of the applicant?

A5: The RFP does not establish a specific limit on the percentage of work or budget that may be subcontracted. Applicants must demonstrate adequate staffing capacity to successfully complete the proposed work. Staffing capacity may include a combination of organizational staff, subcontractors, consultants, and partners identified in the proposal.

Q6: What documentation should a Tribe or wholly Tribal-owned entity submit if it is not required to file IRS Form 990? Would an audited Tribal or parent-organization financial statement, exemption documentation, or another financial disclosure be acceptable? Please also clarify what is meant by an 'audited and signed' Form 990.

A6: Organizations that do not file IRS Form 990 should submit alternative documentation demonstrating financial standing and organizational oversight, such as audited financial statements, Tribal government financial documentation, or documentation supporting their exemption from IRS Form 990 filing requirements. If selected for award, additional documentation may be requested during the pre-award review process.

Q7: Does the CDC Foundation expect each awardee to implement across multiple organizational sites, or does 'across multiple T/TSO/UIO sites' refer collectively to the group of awardees?

A7: The reference to "multiple T/TSO/UIO sites" refers collectively to the broader project across funded awardees. Individual applicants should propose an implementation approach that is appropriate for their service area and organizational capacity.

Q8: Are there minimum expectations for the number of programs, implementation settings, families reached, staff trained, partners engaged, or materials distributed?

A8: No specific minimum targets have been established. Applicants are encouraged to propose realistic and meaningful implementation and evaluation activities that align with community needs, organizational capacity, and project objectives.

Q9: Can applicants review the complete suite of updated HNBP materials before submitting a proposal? Which materials or messages are mandatory, and what local cultural, linguistic, design, or content adaptations are permitted? Is prior approval required for adaptations?

A9: Selected awardees will receive access to the updated HNBP materials upon contract execution. Materials include a brochure, flyers, doorhanger, data posters, and social media/graphic cards. There are no mandatory materials to implement. Awardees will have flexibility to select materials for implementation during this project from the available suite. While no modifications are allowed to CDC-approved materials, awardees can adapt dissemination approaches to reflect local cultural and community contexts while maintaining alignment with evidence-based safe sleep recommendations.

Q10: Will the CDC Foundation provide standardized evaluation questions, instruments, indicators, or reporting templates?

A10: Applicants are expected to propose their own evaluation approach consistent with the requirements outlined in the RFP. CDC and CDC Foundation will not provide standardized evaluation instruments but will provide technical assistance and support in developing appropriate implementation evaluations. CDC Foundation will provide reporting templates for invoicing, progress reports, and final reporting.

Q11: Are awardees expected to collect individual-level data, demographic information, or pre/post measures, and is there a minimum sample size or response-rate expectation?

A11: The RFP does not prescribe specific data collection instruments, minimum sample sizes, or response-rate requirements. Applicants should propose evaluation methods appropriate to their implementation setting and evaluation objectives.

Q12: Does the CDC Foundation consider this work program evaluation rather than human-subjects research? Are IRB review, Tribal research-review approval, informed consent, or other formal approvals expected?

A12: This project is intended to support implementation and evaluation activities to improve programmatic function. The standard agreement specifies that awarded funds may not be used for research and development purposes as defined by 2 CRF 200.1. Awardees remain responsible for obtaining any Tribal, organizational, or other approvals required by their respective jurisdictions or institutions.

Q13: Who will own the site-specific data and resulting evaluation products? Will each participating Tribe retain the right to review and approve external dissemination of its findings, including incorporation into cross-site reports, presentations, or publications?

A13: Site-specific data should be managed consistent with applicable Tribal, organizational, and legal requirements. Awardees should anticipate collaborating with CDC and CDC Foundation regarding reporting and dissemination of project findings. Any data-sharing or dissemination requirements will be finalized during contracting and project implementation.

Q14: What cost principles and reimbursement requirements will govern the award?

A14: Awards will be issued as cost-reimbursable agreements. Reimbursement will be limited to allowable costs that are within project scope, consistent with the approved budget, and compliant with applicable federal cost principles and agreement requirements. Supporting documentation must be maintained and provided upon request.

Q15: Please clarify whether fringe benefits, indirect costs, consultant costs, participant incentives, printing, translation, travel, and subcontractor costs are allowable, and whether fee or profit is permitted.

A15: The awards resulting from this solicitation are expected to meet the criteria of "Subrecipient" as defined by 2 CFR (Code of Federal Regulations) 200.331; a final determination will be made at the time of award. The Subrecipient must comply with Uniform Administrative Requirements, Cost Principles, and Audit Requirements, Cost Principles, and Audit Requirements for Federal Awards (2 CFR Part 200). Additional subaward requirements will be communicated to successful applicants.

Allowable costs may include personnel, fringe benefits, travel, supplies, equipment, other direct costs, subcontractors, consultants, and indirect costs when properly justified and included in the approved budget. Participant incentives may be allowable if approved and consistent with the agreement requirements. Costs must be reasonable, allocable, and necessary to achieve project objectives. Fee or profit is not allowable under cost-reimbursable agreements.

Q16: What frequency and approximate time commitment should applicants' budget for orientation, technical-assistance sessions, and cross-site learning activities? Are all activities expected to be virtual, or should applicants budget for travel?

A16: Applicants should budget for participation in project orientation, monthly or biweekly project update meetings, monthly progress reporting, and cross-site learning activities described in the RFP. In addition, applicants should budget for travel and related expenses associated with participation in a two-day cross-site learning meeting in Atlanta, GA, tentatively planned for August 3-4, 2027. At this time, applicants may assume these activities will be conducted virtually unless otherwise communicated during project implementation.

Q17: Because the federal government has transitioned from DUNS numbers to Unique Entity IDs, may an applicant submit only its UEI if it does not maintain a current DUNS number?

A17: No. While the federal government does not require a DUNS number, a DUNS number is a requirement for CDCF and serves as a key data point in the CDC Foundation's pre-award risk ranking assessment. The number assists the Foundation to verify business identity and assess risk levels. A DUNS number is required.