Responses to Questions

National Patient-Centered Clinical Research Network Coordinating Center Request for Proposal

Posted July 2, 2013

General Funding

Q: Additionally, we are trying to determine what is the maximum allowable funding amount for this award?
A: PCORI did not list a funding cap in the RFP in order to encourage competitive proposals that do not include extraneous costs. The cost proposal should directly align with the proposed scope of work. Since this is a Best Value solicitation, the Offeror’s ability to provide a technical solution is paramount. It is also expected that competitive Offerors will have accurate pricing data from similar past/current projects.

Q: Can PCORI provide an estimated funding range for this requirement?
A: Please see above.

Q: Is there a ceiling for the total budget? Can PCORI provide guidance on the coordinating center budget?
A: PCORI did not prescribe a targeted funding amount in order to encourage innovative and competitive cost proposals. However, PCORI will negotiate and establish a cap with the successful Offeror. Also, please see above.

Q: Is this grant subject to the NIH salary cap?
A: No. Note that PCORI issues contracts, not grants.
Q: Will there be any restrictions on DHHS approved indirect cost agreements or may full indirects be charged?
A: Traditionally, PCORI has covered up to 40% of fully supported indirect costs. It is expected that the award recipient shares any remaining indirect costs that are not covered. Regardless, Offerors should submit their federally approved facilities and administrative (F&A) rate agreements, negotiated indirect cost rate agreements (NICRAs), or independently audited substantiation for any/all proposed indirect rates.

Q: We are located off campus and our federal rate agreement allows us to charge space rent. Can space rent be included as a direct cost?
A: Yes. Offerors should include their NICRAs and/or fully substantiate any and all indirect costs requested in their cost proposals.

Q: I note that the RFP states in the Volume II: Cost Proposal section that “all costs should be included” is there any further guidelines re: what direct costs are allowed vs not allowed by PCORI?
A: No. As stated in the previous question, Offerors should follow the rules and regulations that apply to their particular type of organization.

Collaborative Projects

Q: In the Program Management section of the Statement of Work, the RFP says that the coordinating center’s financial staff will be responsible for managing the funding for collaborative projects between the CC and the SC, SAB, CDRNs, and PPRNs. Should offerors include funding for these collaborative projects in the coordinating center budget? If so please provide guidance on the nature of these projects. In either case, please provide details on the tasks involved in managing this funding.
A: PCORI cannot provide you with detailed information on the number and cost of the collaborative projects at this time. This will be established post-award. The Offeror should budget for their financial staff to disburse funds to the awardees and pass these costs through to PCORI.

Q: Does this funding for collaborative projects need to be shown in the cost proposal or is it acquired by the PPRN and CDRN grantees via their funding streams?
A: The funding for these projects will be disbursed by the Coordinating Center (CC), and these costs will be passed through to PCORI.

Q: What is the level of funding for the collaborative projects that PCORI envisions?
A: This will be established post-award.

Q: What is the number of collaborative projects that PCORI anticipates in the 24 month performance period?
A: This will be established post-award.
Q: The RFP states that the contractor will manage the funding for collaborative projects between the CC and the SC, SAB, CDRNs and PPRNs. Does PCORI anticipate that the CC will disburse funds to the SC, SAB, CDRNs and PPRNs for these purposes? If so, should we include these funds in our initial budget (and can you provide an estimate?), or will the funds for these projects be allocated later, when collaborative projects are better defined?
A: Please see above.

Q: Regarding the discussion of online collaborative tools on page 16, can you clarify the extent and type of data that will need to be hosted and “shared with researchers external to the NCRN.”
A: This will be determined post-award. No data will actually be shared with researchers external to the National Patient-Centered Clinical Research Network (NCRN) during Phase I, but policies, practices, and tools to facilitate this activity will need to be anticipated and pilot-tested during Phase I.

Coordination Center Roles and Responsibilities

Q: Will the Coordination Center be responsible for executing, monitoring and evaluating compliance by all contract stakeholders?
A: Yes. The terms and conditions of the contract award will flow down to all subcontractors and stakeholders. If there are specific additional costs associated with these activities, then they should be delineated and justified in the cost proposal.

Q: The Coordination Center is to write “short issue briefs” for each named Steering Committee subcommittee. Has PCORI previously identified potential issues? If so, could some examples be provided?
A: Issue briefs are likely to be needed in the following areas: Governance, Health Systems Involvement and Sustainability, Ethical Oversight of Research, Data Privacy and Security, Data Standards and Interoperability, Patient-Reported Outcomes, Patient Engagement in Research, Collaboration, and Biorepositories and Sharing Biological Samples. Additional issues briefs may be requested as needed, and the final list will be determined post-award.

Q: The RFP states "... the CC will support the writing manuscripts, white papers...". Can PCORI elaborate on what included in "support"? For example, does it include analyzing data, or providing graphics support for charts? Does it include coordinating any research that will result in a manuscript being written? Or is the support more one of editorial assistance and version/author coordination among the different awardees?
A: No data will be generated by the NCRN in Phase I. The CC may need to anticipate and test policies, procedures, and tools for facilitating the shared analysis of data in Phase II. However, even in Phase II, the scientific lead for data analysis will come from investigators from funded Clinical Data Research Networks (CDRNs) and Patient-Powered Research Networks (PPRNs) under the oversight of the Steering Committee (SC). Therefore, CC support will consist predominately of editorial and technical support, such as data
management, production of tables and graphs, editorial assistance, formatting, version control, and related tasks. In most cases, this would not include authorship. PCORI has not yet made a final determination on the nature and extent of the support that will be required for manuscript development and the support may be context dependent. With regard to authorship, PCORI will adhere to the JAMA “Editorial Policies for Authors” (URL: jama.jamanetwork.com/public/InstructionsForAuthors.aspx#GeneralInformation).

Q: Does manuscript support refer to authorship or editorial services or both?
A: Please see above.

Q: Is the Coordinating Center to conduct data synthesis of research or disseminate findings of research synthesis as part of agenda activities?
A: In general, the CC will provide supportive services for these activities, but the scientific lead will come from investigators from funded CDRNs and PPRNs under the oversight of the SC. PCORI has not yet made a final determination on the nature and extent of the support. We remind Offerors that awardees in the first phase of the network award will not be conducting comparative effectiveness research. This will occur in a later phase of this funding stream.

Q: Publication and white paper are on the list of cross-awardees activity group. How many publications are expected during the contract period?
A: This will be determined post-award.

Q: Please provide additional detail on what is meant by vested interest in “the Offeror should have no vested interest in promoting any particular type of data or other infrastructure components...”? 
A: The primary role of the CC is to execute decisions made by the governing bodies within the network, including PCORI and the SC. The Contractor must ensure that the CC acts as a neutral convener of all the awardees and only implements structure and policy that PCORI and the SC deem necessary for the awardees.

Q: Is the Coordinating Center expected to execute all recommendations by the Steering Committee subcommittee work groups?
A: The primary role of the CC is to execute decisions made by the governing bodies within the network, including PCORI and the SC. This includes the subcommittees of the SC.

Q: There is a maximum of 26 awardees for CDRNs (8) and PPRNs (18), but what is the maximum number of workgroups/subcommittees the Coordinating Center will work with (appear to be 11 specified currently)?
A: Subcommittees of the SC tentatively include: Governance, Health Systems Involvement and Sustainability, Ethical Oversight of Research, Data Privacy and Security, Data Standards and Interoperability, Patient-Reported Outcomes, Patient Engagement in Research, Collaboration,
Biorepositories and Sharing Biological Samples, Obesity Cohort, and Rare Diseases Cohort. Others may be specified by the SC post-award.

**Q: Will Coordinating Center provide travel for any other committee or awardees or just Coordinating Center staff to Face-to-Face events?**
A: The CC will provide travel only for its staff. Travel expenses must receive prior PCORI approval and will be reimbursed at cost. However, the CC will play a role in coordinating and arranging travel for all attendees.

**Q: Will the CC be expected to support the travel for these members for any in person meetings?**
A: No. However, the CC will play a role in coordinating and arranging travel for all attendees.

**Q: How many attendees are expected for Face-to-Face events per awardee/committee?**
A: We estimate the following membership of each group: SC: 35–40; Scientific Advisory Board (SAB): 10–15; Special Experts Group (SEG): 10–15; SC subcommittee (average size): 5–10; and SC working group (average size): 5–10. The exact number committee members will be determined post-award.

**Q: Do Face-to-Face events need to be at a specific location or city?**
A: We expect that face-to-face meetings will take place in different locations around the country to distribute the amount of travel necessary for NCRN participants and minimize costs. It is likely that some meetings will take place in Washington, DC.

**Q: How many times a year do these entities meet in person, per committee/group/board (excluding the kickoff meeting required and specified on top of page 14)?**
A: Face-to-face SC and SC subcommittee meetings will take place on a bi-monthly basis. The exact number of meetings will be determined post-award. We are interested in recommendations from the Offeror based on prior experience.

**Q: For budgeting purposes, can PCORI provide more specifics on the anticipated location, duration, frequency, and number of attendees at the various meetings (steering committee, SC subcommittees, and grantee working groups)?**
A: Please see above.

**Q: The CC will hold regular teleconferences with the PPRNs and the CDRNs. Is there a preference for how often these meeting should be held annually?**
A: PCORI invites Offerors to submit their proposed models for frequency of teleconferences and other forms of communications based on their prior experience. Final determination will be made post-award.
Q: What is the Coordinating Center role in awardee compliance with federal regulations (Human Subjects Protection, Required Education of Key Personnel of Human subject Participants, PCORI Public Access Policy (not inclusive)?
A: The Offeror is required to describe what its optimal role should be in this respect and provide evidence of expertise in this area.

Q: Three deliverables for planning, forming, and best practices for IRB formation are indicated. Does PCORI desire the CC to establish a new IRB for the NCRN? Or is the CC mainly supporting the NCRN collaborations by helping to negotiate multiple IRB approval processes between centers?
A: The CC’s role will be to implement the solutions that are proposed by the working group tasked with Ethical Oversight. However, CC experience in this area is welcome.

Q: The provision of technical assistance (TA) and infrastructure for data sharing are both noted as ongoing deliverables. Can PCORI describe more specifically what is meant by infrastructure?
A: The Offeror is required to make suggestions for this aspect. Infrastructure includes policies, practices, and governance for facilitating data sharing as well as IT systems and informatics tools for ensuring that data elements are interoperable. The CC should include or have access to technical expertise on these topics as well as on the pros and cons of different broad strategies—such as federated data systems versus centralized data pooling—for achieving these goals.

Q: Will Coordinating Center need to create database for awardees to populate or “organize and manage activities within the NCRN…..NCRN logistical support”?
A: It is unlikely that the CC will create a database; however, final determination will be made post-award. No data will be generated by the NCRN in Phase I. The CC may need to anticipate and test policies, procedures, and tools for facilitating the shared analysis of data in Phase II.

Q: Are there specific requirements to host a particular piece of the information system within PCORI's IT infrastructure? If so, are there particular development platforms required?
A: This will be determined post-award.

Q: Will PCORI require and/or invite the Coordinating Center to identify potential members for the scientific advisory board and Special Experts Group?
A: PCORI may request this information from the CC.

Q: Deliverables for the CC include the following: “Onboard External PPRNs/CDRNs.” Would you provide a specific definition for “onboard” in this context?
A: The details of the onboarding activities are described on page 14 of the RFP. Please note that this is not meant to be an exhaustive list. We welcome suggestions from the Offeror.
Q: The RFP states that the contractor will triage technical assistance requests from each awardee. Page 15-16 describes a diversity of TA the CC will provide to support working groups and subcommittees of the SC, including providing SME or other direct TA to support objectives. This seems a little inconsistent with the Page 17 statement that CC will triage TA requests. Can PCORI clarify if “triage” is simply an information management service to accept and route TA requests or if the CC should be prepared to address the majority of technical assistance requests directly? In other words, will the CC both manage and respond to such requests or will the CC mainly manage and triage to the SAB or SEG for response/support?
A: PCORI expects the CC to be able to triage and provide technical assistance for many matters. For particularly complex issues that require additional expertise, PCORI expects that the CC will work with the SAB, SEG, or other experts, as needed.

Q: What is the desired frequency and content of the evaluation meetings cited in deliverable 4 in this list?
A: PCORI invites Offerors to submit their proposed models for evaluation needs based on their previous expertise.

Q: From the context, it appears that the evaluation related deliverables (deliverables 3 and 4 in the table) refer to the self-evaluation described on page 14 of the RFP. There do not appear to be any deliverables associated with the external evaluation described on page 19. Is this a correct interpretation?
A: Deliverables 3 and 4 (“Program Evaluation Plans and Metrics for Each Awardee” and “PPRN/CDRN Program Evaluation Meetings”) in the top table on page 24 of the RFP refer to the self-evaluation described on page 14. Please note that while deliverables for the external program evaluation are not provided in the table, the CC will provide technical and logistical support to the SAB, including collection and initial analysis of required information. Please see page 19 for more details regarding some of the deliverables that will be required for the external program evaluation.

Q: Will Coordinating Center work with raw data collected, have access to data or monitor progress from reports provided by NCRN or other entity?
A: The CC will monitor progress through the Program Evaluation department of the CC. Please see pages 14 and 19 of the RFP for more details. We do not envisage the CC working with raw data in the first two years of the award.

Q: Providing legal advice is listed as an additional activity that may be required but not part of the “technical assistance consultations”. What type of legal advice is anticipated by PCORI.
A: At this time, PCORI is not anticipating the need for any legal advice; however, we have included it in the RFP in case the need should arise.
Participation in CC and CDRN or PPRN

Q: Can PCORI grantee organizations serve as subcontractors (not prime contractors) for this opportunity if they are awarded a CDRN or PPRN grant?
A: Yes. If an organization receives a CDRN or PPRN award, then the organization may also serve as a subcontractor to the CC. However, Principal Investigators (PIs), co-PIs, and PIs of a subcontract to the CDRN or PPRN may not serve in leadership positions on the CC award. Technical assistance and scientific consultation is permissible.

Q: If an organization is selected for the coordinating center, can it also participate on either a CDRN/PPRN project as a subcontractor? Does the answer depend upon what role the organization has on the CDRN/PPRN project?
A: Please see above.

Q: If an organization applies for and becomes a CDRN, are members of that organization (not bid on the CDRN) able to subcontract to another organization for the coordinating center?
A: Please see above.

Q: Can an investigator participate in the Coordinating Center application and a CDRN/PPRN application?
A: An investigator may participate in both applications but will not be permitted to serve on two awards as a PI, co-PI, or PI of a subcontract. Technical assistance and scientific consultation is permissible.

Q: Can an investigator participate in the Coordinating Center application if another investigator from their organization is leading a CDRN/PPRN application?
A: An investigator can participate in the CC application if another investigator from his or her organization is leading the CDRN/PPRN application. Please see above for more detail.

Q: Can an investigator participate in the Coordinating Center application if their organization is participating in a CDRN/PPRN application?
A: An investigator may participate in the CC application if his or her organization is participating in a CDRN/PPRN. Please see above for more detail.

Q: Will an investigator from the Coordinating Center be eligible to participate in future funded PCORI NCRN projects in partnership with a CDRN/PPRN?
A: Yes. However, PCORI reserves the right to modify this decision should it ascertain that being an investigator in the CC constitutes an unfair advantage with respect to future PCORI funding opportunities with the NCRN.
Q: Will there be any conflict between a CDRN based at medical school and a coordinating center based at one of its major teaching affiliates? The affiliate has a separate DUNS number.
A: This may be permissible if the personnel on the two awards are clearly separated organizationally and are not members of the same research team for either a previous data network or coordinating center project.

Q: Can PCORI grantee organizations serve as contractors or subcontractors for this opportunity if their current PCORI grant does not pertain to the CDRN and PPRN opportunities?
A: Yes. Please also note that PCORI issues contracts, not grants.

Staffing

Q: Can individual investigators on PCORI grants serve as expert consultants and/or technical assistance providers (not prime contractors) for the coordinating center?
A: Yes. However, PIs, co-PIs, and PIs of subcontracts to the CDRN and PPRN should not hold leadership positions on the CC and vice-versa. Technical assistance and scientific consultation is permissible.

Q: Can you confirm that the PCORI NCRN Program Director is an employee of PCORI, whereas the CC director is an employee of the contractor? If that is correct, is PCORI at liberty to disclose the name of the NCRN program director at this time?
A: Yes. The NCRN Program Director (PD) is an employee of PCORI, and the CC Director is an employee of the contractor. The NCRN Program is housed under the Accelerating PCOR Methods Program, which is currently led by Dr. Rachael Fleurence, who currently serves as the acting NCRN Program Director.

Q: I understand the Program Evaluation Manager should be separate from the other managers, but do each of the other three manager roles need to be held by a different person? Could any of these roles also be held by the Coordinating Center Director?
A: The CC Director may serve as one of the other three managers. PCORI encourages the Offeror to submit appropriate staffing models for its organization and personnel. If the Offeror proposes that several of the managerial roles (Program Evaluation not included) be supported by one individual, the Offeror should provide a clear justification that the workload can be executed appropriately under the proposed staffing model. Additionally, the Offeror should detail how the individual’s education and experience makes him or her uniquely qualified to lead several programs.
Q: Since the Director is required to have substantial experience (10 years working/managing similar contracts) and a minimum Level of Effort (LOE) of 20%, is a LOE of 100% expected if the Director also functions as one of the four required Project Managers?
A: PCORI encourages the Offeror to submit appropriate staffing models for its organization and personnel. However, the Offeror must provide a clear justification that the workload can be executed appropriately under the proposed staffing model.

Q: Can PCORI provide an estimated number of full time equivalent staff anticipated for this scope of work?
A: No. However, PCORI encourages the Offeror to submit appropriate staffing models for its organization and personnel, commensurate with the tasks it proposes to fulfill for the CC. We are interested in different approaches to fulfilling the overall responsibilities of the CC and therefore have purposefully not been prescriptive on all aspects of the RFP.

Q: Can PCORI provide an estimate of the minimum % time required for each of the four project managers for the four task areas?
A: Please see above.

Q: What is the level of effort estimated by PCORI experts for the work to be performed by the CC?
A: Please see above.

Q: Program Evaluation, page 19 states: the CC will house a separate program evaluation support function. Does separate mean separate organization or simply fire-walled? Please clarify.
A: The contractor can either provide program evaluation within its organization through a separate fire-walled department, or it may work with a subcontractor to carry out the evaluation duties.

Q: CC personnel working in the program evaluation task will be separated from the rest of the CC staff by an internal firewall... Can the program evaluators be employed by the same organization as the organization awarded the NCRN CC?
A: Please see above.

Q: The program evaluation (PE) component is independent from the other four categories of assistance. Does PCORI expect any direct communication between PE and other groups? In order to develop evaluation metrics, the PE staff may need to seek information from other categories.
A: The contractor will work in collaboration with the PCORI PD and the SAB to produce, within 60 days of the SC’s kickoff meeting, a program-evaluation plan and metrics for each activity area. PCORI requires that the program evaluation staff will be completely firewalled from the other departments of the CC. There must be no communication between the PE department and the other departments within the CC.
Q: The RFP states: “The CC will house a separate program evaluation support function...” and “the CC must establish a firewall between this evaluation team and the rest of the CC team.” Could PCORI please elaborate on the specific requirements of the firewall? For example, is any staff cross-over allowed (e.g., are staff (including the CC Director) who work on the project management, technical assistance, logistic support and/or cross-awardee activities prohibited from any activity related to the program evaluation?
A: There must be a complete firewall with no communication between the PE department and the other departments within the CC.

Q: Both the program evaluation PE component and technical assistance (TA) need staff with research expertise. Can qualified staff work on both components?
A: No. Please see above.

Q: Can PCORI clarify what would be a sufficient “firewall” between the evaluation team and the rest of the CC team? Must they have no contact or separate management? What is sufficient separation to PCORI?
A: Please see above.

Q: Can PCORI clarify the lines of authority with regards to the program evaluation? It appears that the program evaluation team reports directly to the Scientific Advisory Board and indirectly to the Program Director through the Coordinating Center. Will the chair of the SAB have final decision making authority with regards to evaluation?
A: The exact lines of reporting will be determined post-award. However, it is likely that the program evaluation manager/staff will report directly to the PCORI PD and work closely with the SAB and its chair.

Q: Will Program Evaluation Manager/staff report to the awardee’s Director or directly to PCORI?
A: Please see above.

Data Collection

Q: Will NCRN collect data directly from CDRNs and PPRNs?
A: Data-sharing policies and processes will be determined post-award by the SC.

Q: Is the CC to provide the supporting data sharing systems and requesting data from centers be uploaded or merged into a central database housed by the CC? Or is the CC providing technical
assistance to network members needing support to pool their data (support with design, programming, and execution)? Please clarify what the expectations are for the CC in relation to these tasks.
A: It is more likely that the CC will provide technical assistance to network members needing support to exchange and share their data.

Q: Can PCORI please clarify the extent of support the CC will provide related to data interoperability? Does the CC have any responsibility to bring data together from more than one research network grantee? In parts of the RFP it seems that EHR interoperability specifically was the responsibility of the networks and/or committees and that the main function of the CC was to standardize non-EHR data formats. Is that correct? Please clarify the expectations for the CC with regard to supporting data interoperability.
A: The CC will provide technical support to awardees around data standards and interoperability based on decisions and policies established by the SC. The CC is not responsible for defining the procedures and policies to establish standards and interoperability between network awardees. It will be responsible for providing technical assistance.

Q: Will the CC work involve establishing data collection and coordination systems to ensure interoperability? or will this be primarily the responsibility of the research network members and the PCORI leadership and coordinating bodies?
A: The CC will implement policies established by the SC and provide technical assistance to the network members on these issues.

Other

Q: First, multiple groups from our organization are interested in applying for this RFP. We are trying to determine whether you would allow multiple groups from the same organization to apply for this proposal.
A: Yes. PCORI encourages innovative and cost-effective proposals that leverage the expertise of the Offeror. Please see above for applications to both the CDRN/PPRN awards and the CC.

Q: On page 28, the RFP says .. “the Technical Solution” should be no longer than 25 pages.” Please clarify whether this phrase refers to 1) Volume 1: Technical Proposal in its entirety, with the exception of Past Performance and Key Personnel resumes, or 2) the section within the Technical Proposal entitled Technical Solution.
A: The Technical Solution component of the Technical Proposal should not exceed 25 pages.
Q: Regarding the 25-page limit for the technical solution: Are the title page, cover letter, table of contents, literature cited, and any appendices included in the page count? If additional questions arise during proposal preparation, will PCORI accept additional questions past the June 17 deadline?
A: Part 1: No, the 25-page limit applies to the Technical Solution portion of the Technical Proposal. Part 2: If PCORI receives a significant number of additional questions beyond the June 17 deadline and PCORI believes that it is in the best interest of accurate and competitive proposals to release a second set of questions and answers (Q&A), then PCORI reserves the right to do so. However, this extra step was not prescribed in the RFP document, and no Offeror should expect or depend on such a reply. A second Q&A would be posted on the PCORI website and emailed to all Offerors that submitted questions for the original Q&A.

Q: As PCORI is a non-profit, nongovernmental organization, do the OMB Circulars A-21 and A-110 apply to awardees/contractors?
A: The selected contractor must follow the applicable laws, rules, regulations, and circulars that relate to their organization type. For example, educational institutions should be following OMB Circular A-21. PCORI expects that the funding issued through this solicitation will be treated consistently.

Q: Documentation Requirements include documentation to support its legal ability to operate facilities in the United States. There is no indication in the SOW that the successful applicant will operate a facility (other than its own offices). Would you clarify what facilities are planned for operation by the CC?
A: At this time, we do not foresee the CC to operate any facilities other than its own office space.

Q: Is there a Coordinating Center for previously awarded PCORI projects?
A: No.

Q: In the diagram of the Phase One NCRN Governance Structure, what is the significance for only two groups of PPRN and CDRN being connected via three-way to Coordinating Center and the rest only directly connected?
A: The diagram is meant to provide an example of the different types of relationships and levels of interoperability that will be formed over the course of the 18-month period. We do expect that each PPRN awardee will connect with at least one CDRN awardee and that each CDRN will connect with at least one PPRN awardee during Phase I of the program.

Q: Will the overall timeline for all activities for the NCRN be for the full contract period or per contract year?
A: For the full contract.
Q: How many working groups will be permitted per grantee, and what number of participants will be allowed?

A: Working groups are not per awardee but rather will be populated by participants across all the awarded networks. Participation level will be determined by the breadth of the topic and the areas of expertise that awardees hold in each topic area.
Q: Can PCORI provide an estimated number of members for each of the following:

- Steering committee (SC)
- Scientific Advisory Board (SAB)
- Special Experts Group (SEG)
- SC Subcommittee average size
- SC Working group average size

A: Please be aware that these are just estimates:

- SC: 35–40
- SAB: 10–15
- SEG: 10–15
- SC subcommittees (average size): 5–10
- SC working groups (average size): 5–10

Q: The CC will be engaging and providing logistical support to the Special Expert Group and the Scientific Advisory Board. Has a decision been made on how many individuals and organizations will be represented for each of the SEG and SAB groups? Should we plan for per diems and stipends for SEG and SAB participation?

A: Please see above for the composition of the groups. The CC should assume that stipends will be provided to the SEG and SAB. Currently, all stipends for PCORI workgroups, boards, and committees are processed directly by PCORI Finance.

Q: The CDRNs and PPRNs are planned to be supported in two phases. Phase I is estimated to require 18 months from the funding award; following which a recompetition will be held to determine participants in Phase II. The CC is initially funded for 24 months. Will the CC contract likewise be recompeted for support during Phase II of the research networks?

A: Yes, it is likely that the CC contract will be recompeted.

Q: Please provide descriptions of the backgrounds and expertise of reviewers of proposals sent in response to this RFP?

A: This PCORI RFP will result in an internal service contract. Accordingly, PCORI’s Science Team will take the lead on the assembly of a group of staff evaluators. Additional staff from through the PCORI organization may participate. Cost proposals will be evaluated and tested for reasonableness under the direction of PCORI Finance.