



COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF PUBLIC WELFARE
Procurement Section
Room 525, Health & Welfare Building
Commonwealth Avenue & Forster Street
Harrisburg, PA 17120

Daniel R. Boyd
Division of Procurement

717-783-3767

June 3, 2008

FLYER

(Revision # 1)

SUBJECT: RFP NO. 40-08 Medical Assistance Fraud and Abuse Prevention and Detection Program Consulting, Analysis, Assessment and Design Services

Dear Prospective Offeror:

Enclosed are the written answers to the questions submitted for the above referenced RFP as well as an amended copy of RFP 40-08.

These answers serve as the official response from the Office of Medical Assistance Programs, Department of Public Welfare (DPW), to the questions raised by prospective bidders concerning this RFP.

NO ADDITIONAL QUESTIONS REGARDING RFP 40-08 WILL BE ACCEPTED OR ANSWERED EITHER VERBALLY OR IN WRITING.

All proposals must be received by June 12, 2008, **at or before 2:00 p.m.**, by the Department of Public Welfare, Procurement Section, Room 525, Health and Welfare Bldg, Commonwealth Avenue and Forster Street, Harrisburg, Pennsylvania 17120.

Daniel R. Boyd

A handwritten signature in cursive script, appearing to read "Daniel R. Boyd".

Attachment(s)

**Questions and Answers for Request for Application (RFA) Number 40-08
Office of Long Term Living (OLTL) Program and Quality Services for
Home and Community Based and Nursing Facility Services**

1. Is there a detail of the key tasks needing to be performed? Please provide more detailed instructions of what OLTL is seeking.
The key tasks are detailed in PART IV WORK STATEMENT of the RFA, which starts on page 25.
2. If an applicant organization has a Project Manager candidate with a disability and a substantial number of years experience in a similar position, would the department consider the person as a qualified candidate even if the candidate does not have a Bachelors degree?
Per PART II APPLICATION REQUIREMENTS II-3.E.2.a.iii of the RFA, which is on page 18, the Project Manager should have a Bachelor's or Master's degree to meet the staffing requirements. All proposed Project Managers will be considered and evaluated; applicants must fully describe the experience that qualifies the candidate without a Bachelor's degree.
3. Is this application to be from agencies or can it be from individuals?
The application may be from agencies or individuals as long as the criteria listed in the RFA, including PART II APPLICATION REQUIREMENTS II-1.4, are sufficiently met and the application demonstrates that the applicant can ensure that all services and deliverables are completed.
4. What is the role of the grantee after the consumer is relocated to an ALA?
The Grantee will ensure that arrangements for the provision of services, including service coordination, are finalized and will transfer coordination tasks to the entity that will be doing coordination for the individual. Please refer to PART IV WORK STATEMENT IV-2.Task 1.c.ii.6, which is on page 28.
5. What is the role of the grantee for consumers not in a nursing facility that request application for OBRA services?
Under the scope of RFA 40-08, the Grantee has no role for consumers who are not in a nursing facility. As a human services provider, the Grantee may have additional roles for consumers who are not in a nursing facility, such as referring them to the appropriate enrolling agency.
6. Would there be a conflict of interest if the grantee is currently a provider of HCBS including waiver service coordination, enrollment, assessments, NHT transition, Fiscal Management Services?
Serving in the above roles does not automatically exclude an application from consideration. However, the applicant must divulge the potential conflicts of interest and assure that the roles will not conflict in its performance under the grant. Please refer to PART II APPLICATION REQUIREMENTS II-3.A, which is on page 28; Attachment No. 2, Department of Public Welfare Addendum to Standard Contract Terms and Conditions, item O; and Attachment No. 4, Standard Contract Terms and Conditions, Item 24, which is on page 8.
7. Could you verify that the cost proposal includes the following components:
 - a. Cost for the explanation of the final determination decision to nursing facility applicants, on a per explanation fee.
This is included as the "OBRA Mandated Services - PASARR Explanation" on Attachment No. 6, Cost Verification. For the cost submittal, the applicant is to estimate 113 units annually. The actual number of explanations performed has

- ranged from 96 to 137 in the past six state fiscal years, per Attachment No. 7, OBRA Mandated Services Statistics.
- b. Cost for SSP and service coordination (including training community integration, etc) as a cost per consumer per month; including Peer Counselor Admin. *This is included as the "OBRA Mandated Services - Service Coordination (600 Consumers Projected) on Attachment No. 6, Cost Verification. For the cost submittal, the applicant is to estimate 7200 units annually (600 consumers served over twelve months). The actual number of consumers served has ranged from 567 to 769 in the past five state fiscal years, per Attachment No. 7, OBRA Mandated Services Statistics.*
 - c. Cost per evaluation of the consumer by the peer counselor based on evaluation submittal. *This is included as the "Peer Counselors for Evaluation of Durable Medical Equipment - Peer Counselor DME Recommendation Form" on Attachment No. 6, Cost Verification. For the cost submittal, the applicant is to estimate 1050 units annually.*
 - d. Check cutting fees for Task III and IV (work statement). *This is included as "Payment Disbursal – State Only Consumers – Payment Disbursal" (Task III) and "Payment Disbursal – Nursing Home Transition – Payment Disbursal" (Task IV) on Attachment No. 6, Cost Verification. For the cost submittal, the applicant is to estimate twelve checks cut annually for Task III and fifty-five checks cut annually for Task IV.*
8. What is the anticipated number of consumers being served statewide for each component in 4, above?
See responses a-d above.
 9. Will any of the cost components be billed through PROMISe?
No. Please refer to Attachment No. 1, Grant Agreement, Rider 1 PAYMENT PROVISIONS, for information on billing and payment.
 10. My question is can I submit the interim nine month statement ended March 31, 2008 for the RFP 40-8. We have just completed this interim statement.
Applicants may submit any documentation that fulfills the items listed in PART II APPLICATION REQUIREMENTS. Please refer to PART II APPLICATION REQUIREMENTS II-1.5, which is on page 13; and PART II APPLICATION REQUIREMENTS II-5, which is on page 20.
 11. I am emailing concerning RFA # 40-08 Program and Quality Services for Home and Community Based Programs and Nursing Facility Services, to highlight what appears to be an error concerning specialized services. Page 10 of CSPPPD Contractor Directive 02-004, Evaluation Report (Part 2) – CSPPPD Specialized Services, includes transportation as an available specialized service ("assistance in being transported to and from the specialized services described in this report, including the community integration activities shown at page 8"). RFA # 40-08 omits transportation from the list of available specialized services, however (see Work Statement, IV-2 Deliverables/Tasks, Task 1: Operate the Specialized Services Plan (SSP), b. Developing SSPs and Providing Specialized Services to Individuals Residing in Nursing Facilities). (The July 2007 draft Specialized Services Plan in the RFA appendix does, in fact, include transportation.) *This omission was an oversight and a new item, PART IV WORK STATEMENT IV-2.Task 1.b.vi. will be added to the RFA (see below for language). Similarly, a new item, OBRA Mandated Services – Transportation, will be added to Attachment No. 6, Cost Verification (see below for language).*
 - vi. **Transportation.** *Transportation is assistance in being transported to and from the specialized services listed on the SSP. The*

Department will reimburse the Grantee at a per mile basis when the Grantee or its affiliate directly provides transportation and on a per cost basis when an entity not affiliated with the Grantee provides transportation. The Department may require prior approval for transportation above \$250 per month.

<i>Deliverable/Service</i>	<i>Unit</i>	<i>Estimated Number of Units Annually</i>	<i>Unit Rate</i>
<i>Transportation (outside vendor)</i>	<i>1 round trip</i>	<i>1500</i>	<i>At cost</i>
<i>Transportation (Grantee or affiliate)</i>	<i>1 mile</i>	<i>5000</i>	

REQUEST FOR APPLICATIONS (RFA)

FOR

**PROGRAM AND QUALITY SERVICES FOR HOME AND COMMUNITY BASED
PROGRAMS AND NURSING FACILITY SERVICES**

RFA # 40-08

Date of Issuance

May 12, 2008

ISSUING OFFICE:

Commonwealth of Pennsylvania
Department of Public Welfare
Division of Procurement
Health and Welfare Building Room 525
Harrisburg, PA 17105-2675

RFA PROJECT OFFICER:

Ms. Pattie Utz
Department of Public Welfare
Office of Long Term Living
Project Management Office
Fax: 717-346-1483
Email: putz@state.pa.us

REQUEST FOR APPLICATIONS
FOR
PROGRAM AND QUALITY SERVICES FOR HOME AND COMMUNITY BASED
PROGRAMS AND NURSING FACILITY SERVICES

RFA # 40-08

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ATTACHMENTS:

1. GRANT AGREEMENT
2. DPW ADDENDUM TO THE STANDARD CONTRACT TERMS AND CONDITIONS
3. GRANT SIGNATURE PAGE
4. STANDARD CONTRACT TERMS AND CONDITIONS
5. HEALTH INSURANCE PORTABILITY AND ACCOUNTABILITY ACT (HIPAA)
COMPLIANCE
6. COST SUBMITTAL
7. OBRA MANDATED SERVICES STATISTICS
8. CSPPPD CONTRACTOR DIRECTIVE NUMBER 02-001, CALCULATION OF 30
MONTHS IN RESIDENCE FOR RESIDENTS WITH OTHER RELATED CONDITIONS
WHO ARE INELIGIBLE FOR NURSING FACILITY SERVICES
9. CSPPPD CONTRACTOR DIRECTIVE NUMBER 01-001, IMPLEMENTING THE
RICHARDSON V. SNIDER SETTLEMENT AGREEMENT
10. CSPPPD CONTRACTOR DIRECTIVE NUMBER 02-004, EVALUATION REPORT
(PART 2) – CSPPPD SPECIALIZED SERVICES

11. CSPPPD CONTRACTOR DIRECTIVE NUMBER 02-006, SPECIALIZED SERVICES PLANS
12. CSPPPD CONTRACTOR DIRECTIVE NUMBER 06-001, INTERFACE PROCEDURES FOR ICF/ORC PROVIDERS AND CSPPPD CONTRACTORS
13. CSPPPD CONTRACTOR DIRECTIVE NUMBER 07-001, REVISED AND ADDITIONAL ELIGIBILITY FORM LETTERS AND RELATED INFORMATION FOR NURSING FACILITY APPLICANTS WITH OTHER RELATED CONDITIONS
14. CSPPPD CONTRACTOR DIRECTIVE NUMBER 03-006, CHANGE IN REQUIREMENT FOR ICF/ORC ADMISSION
15. MA 376, PREADMISSION SCREENING RESIDENT REVIEW (PASRR) IDENTIFICATION FORM
16. SPECIALIZED SERVICES PLAN
17. PEER COUNSELORS FOR EVALUATION OF DURABLE MEDICAL EQUIPMENT (PCEDME) PROJECT FLOW CHART
18. PEER COUNSELORS FOR EVALUATION OF DURABLE MEDICAL EQUIPMENT NURSING FACILITY ADMINISTRATOR LETTER
19. PROCEDURE FOR THE PEER COUNSELOR RECOMMENDATION FORM (INITIAL AND FOLLOW-UP)
20. INITIAL RECOMMENDATION FORM FOR PEER COUNSELORS
21. FOLLOW-UP RECOMMENDATION FORM FOR PEER COUNSELORS
22. MA 97, OUTPATIENT SERVICES AUTHORIZATION REQUEST
23. MA 97LTC, DURABLE MEDICAL EQUIPMENT (DME) REQUEST FOR NURSING FACILITY RESIDENT
24. SPECIALIZED SERVICES CONSUMER REPORTING FORM
25. PROCEDURE: PEER COUNSELOR (PC) MONTHLY REPORTS
26. DME MONTHLY REPORT
27. QUARTERLY PERSONNEL TRAINING REPORT
28. SAMPLE INVOICE FORM

PART I

GENERAL INFORMATION

I-1 Purpose

Through this RFA, the Department of Public Welfare (the Department) seeks to select one vendor to work primarily with the Office of Long Term Living (OLTL) to provide supportive services, offer technical assistance, and perform key program tasks for the home and community based programs and nursing facility services. Specifically, the Department will require the selected vendor to achieve the following objectives:

- i. To operate, in accordance with Community Services Program for Persons with Physical Disabilities (CSPPPD) Contractor Directive 02-006 (see Attachment No. 11), Specialized Services program for Persons with an Other Related Condition (ORC) as mandated by the Omnibus Budget Reconciliation Act (OBRA) of 1987.
- ii. To administer the Peer Counselors for Evaluation of Durable Medical Equipment (PCEDME) for the OLTL. This evaluation of DME is currently for wheelchairs, specialty beds, and augmentative communication devices targeted for residents of nursing facilities.
- iii. To disburse payments to the provider of services for state only consumers.
- iv. To disburse payments for the Nursing Home Transition (NHT) Project.

I-2 Issuing Office

The Issuing Office for this RFA is the Department of Public Welfare's Office of Administration on behalf of the Department's OLTL. The RFA Project Officer is the sole point of contact in the Commonwealth for this RFA. The Issuing Office and the RFA Project Officer are listed on the cover page of this RFA.

I-3 Scope

This RFA contains instructions governing the requested applications, including the requirements for the information and material to be included; a description of the services to be provided; requirements which applicants must meet to be eligible for consideration; general evaluation criteria; and other requirements specific to this RFA.

I-4 Focus Statement

The Department's OLTL operates a variety of home and community based programs that provide support services to assist persons with disabilities to live independently in their homes and communities. The OLTL also administers a variety of programs that offer key independent living services to qualified persons in nursing facilities. Each of these programs developed in response to a specific need or demand. Currently, over 10,000 individuals receive services through the OLTL. The programs share common components, especially an overarching philosophy of Independent Living.

The selected Vendor must:

- Operate the Specialized Services program as mandated by the Omnibus Reconciliation Act (OBRA) of 1987;
- Administer the Peer Counselors for the Evaluation of Durable Medical Equipment (PCEDME) Program;
- Disburse payments for the Nursing Home Transition (NHT) Project and services for state only consumers.

I-5 Type of Grant

If the Department enters into an agreement(s) as a result of this RFA, it will be a grant agreement (see Attachment No. 1) containing all referenced Riders, including those attached to this RFA (see Attachment Nos. 2 and 4). The Department, in its sole discretion, may undertake negotiations with applicants whose proposals, in the judgment of the Department, show them to be qualified, responsible and capable of performing the Project.

I-6 Term of Grant

The term of the grant is two years with three (3) one (1) year renewal periods at the option of the Commonwealth. The start date will be July 1, 2008. The grant shall not be valid or enforceable until fully executed, approved by all necessary Commonwealth officials.

I-7 Incurring Costs

The Commonwealth is not liable for any costs incurred by the applicant in preparation and submission of its application, in participating in the RFA process or for any service or work performed or expenses incurred prior to the effective date of a fully executed grant agreement.

I-8 Question and Answers

Potential applicants must submit in writing any questions and requests for interpretations or clarifications, either administrative or technical, about the RFA by email (with subject line RFA No. 40-08). Questions must be received no later than 10 days after the posting date of the RFA. Questions may be emailed to the point of contact. The email must include the applicant's company name, complete address, phone number, and email address. All written questions will be answered in writing, posted on the DGS website, and conveyed to all applicants who have requested a copy of the RFA.

The Department does not consider oral statements concerning the contents of this RFA as binding. Questions regarding this RFA should be directed to:

Ms. Pattie Utz
 Department of Public Welfare
 Office of Long Term Living
 Project Management Office
 Email: putz@state.pa.us

I-9 Applications and Response Date

To be considered, applications must arrive no later than 2:00 p.m. on **June 12, 2008** at the Issuing Office at the address listed on the cover page to the RFA. Applicants should allow sufficient mail delivery time to ensure timely receipt. It is incumbent upon the applicant to assure that its response is received by the deadline. If due to inclement weather, natural disaster, or any other cause, the Issuing Office is closed on the application response date, the deadline for submission shall be automatically extended until the next Commonwealth business day on which the office is open, unless offerors are otherwise notified by the Commonwealth. The time for submission of applications shall remain the same. Applications received after the deadline will not be considered. The Department will not accept applications via email or facsimile transmission.

Please clearly mark submission: **Response to OLTL Program and Quality Services for Home and Community Based Programs and Nursing Facility Services.**

Applicants should submit a complete response to this RFA, using the format provided in Part II, providing 8 paper copies of the application to the Issuing Office. Applicants must also submit one complete and exact copy of its technical submittal on CD-ROM in Microsoft Office or Microsoft Office compatible format. Each application page should be numbered for ease of reference. An official authorized to bind the applicant to its provisions must sign the application. If the Department selects an application for award, the contents of the application will become, except to the contents are changed through Best and Final Offers or negotiations, obligations of the grant agreement.

Each applicant submitting an application waives the right to withdraw or modify it, except that the applicant may withdraw its application by written notice received at the Issuing Office's address for application delivery prior to the exact hour and date specified for application receipt. An applicant may modify its submitted application prior to the exact hour and date set for application receipt only by submitting a new sealed application or sealed modification which complies with RFA requirements.

APPLICANTS WILL MAKE NO OTHER DISTRIBUTION OF RESPONSES

I-10 Addenda to the RFA

If the Department deems it necessary to revise any part of this RFA before the application response date, the Issuing Office will post an addendum to the RFA on the Department of General Services (DGS) website. All questions and answers are considered an addendum to, and part of, this RFA, and will be posted on the DGS website and conveyed to all applicants who have requested a copy of the RFA. Each applicant shall be responsible for monitoring the DGS website for new or revised RFA information. The Department shall not be bound by any verbal information nor shall it be bound by any written information that is not either contained within the RFA or formally issued as an addendum by the Issuing Office.

I-11 Restriction of Contact

From the issue date of this RFA, until a determination is made regarding the selection of a vendor, all contacts with the Department personnel concerning this RFA, responses, and the evaluation process must be cleared through the RFA Project Officer listed on the cover page of this RFA. Any violation of this condition may be cause for the Department to reject an application. If it is later discovered that any violations have occurred, the Department may reject any application or disqualify the applicant.

It shall be the responsibility of each applicant to review this RFA **in its entirety** to ensure acknowledgement and understanding of the information and requirements as outlined. Any misunderstanding from failure to do so shall not relieve the selected applicant from fulfilling the requirements of the grant agreement. Questions should be directed in accordance with section 1.3 of these instructions.

I-12 Economy of Preparation

Applicants should prepare applications simply and economically, providing a straightforward, concise description of the applicant's ability to meet the requirements of the RFA.

I-13 Use of Electronic Versions of this RFA

This RFA is being made available by electronic means. If an applicant electronically downloads the RFA, the applicant acknowledges and accepts full responsibility to insure that no changes are made to the RFA. In the event of a conflict between a version of the RFA in the applicant's possession and the Issuing Office's version of the RFA, the Issuing Office's version shall govern.

I-14 Alternate Proposals

The Department has identified the basic approach to meeting its requirements, allowing applicants to be creative and propose their best solution to meeting these requirements. Therefore, the Department will not accept alternate approaches.

I-15 Application Confidentiality

Applicants should not label application submissions as confidential or proprietary. The Department will hold all applications in confidence and will not reveal or discuss any applications with competitors for the grant, unless disclosure is required: 1) Under the provisions of any Commonwealth or United States statute or regulation; or 2) By rule or order of any court of competent jurisdiction.

After a grant is executed, however, the successful application is considered a public record under the *Commonwealth Right-to Know Law*, and, therefore, is subject to disclosure. All material submitted with the application becomes the property of the Commonwealth of Pennsylvania and may be returned only at the Department's option. The Department, in its sole discretion, may include any person other than competing applicants on the proposal evaluation committee. The Commonwealth may use any or all ideas presented in any application regardless of whether the application becomes part of a grant agreement.

I-16 Discussions for Clarification

Applicants may be required to make an oral or written clarification of their application to the Commonwealth to ensure thorough mutual understanding and applicant responsiveness to the solicitation requirements. The RFA Project Officer will initiate requests for clarification.

I-17 Rejection of Applications

The Department may, in its sole and complete discretion, reject any and all applications received as a result of this RFA.

I-18 Debriefing Conferences

Applicants whose applications are not selected will be notified of the name of the selected applicant and given the opportunity to be debriefed. The RFA Project Officer will schedule the time and location of the debriefing. The debriefing will not compare the applicant with other applicants, other than the position of the applicant's proposal in relation to all other applicant proposals. An applicant's exercise of the opportunity to be debriefed does not constitute the filing of a protest.

I-19 Best and Final Offers

The Department may conduct discussions with applicants for the purpose of obtaining "best and final offers." To obtain best and final offers from applicants, the Department may do one or more of the following:

- a. Enter into pre-selection negotiations;
- b. Request revised applications.

The Department will limit any discussions to responsible applicants (those that have submitted responsive applications and possess the capability to fully perform the grant requirements in all respects and the integrity and reliability to assure good faith performance) whose applications the Department has determined to be reasonably susceptible of being selected for award. The Criteria for Selection found in Part III shall also be used to evaluate the best and final offers. Price reductions offered shall have no effect upon the applicant's Technical Submittal.

I-20 Notification of Selection

The Department will notify the selected applicant in writing of its selection for negotiation after the Department has determined, taking into consideration all of the evaluation factors, the applications that are the most advantageous to the Department.

I-21 Grantee Responsibilities

The grant will require the selected applicant to assume responsibility for all services offered in its application whether it produces them itself or by subcontract. The Department will consider the selected applicant to be the sole point of contact with regard to Program matters. The Grantee will be responsible to ensure that all Deliverables are completed in a timely manner. Prime

Grantee is also responsible for maintaining records as required by the Grant Agreement, including the Department Addendum to the Standard Terms and Conditions Audit Clauses, herein referenced to this RFA (see Attachment Nos. 1 and 2).

As part of its grant with the Department, the Grantee may enter into subcontract. Any use of subcontractors by the Grantee on the project must be approved in writing by the Project Officer prior to any work being performed. Prior to the awarding, a formal teaming agreement will be required between the Grantee and any subcontractor(s). All subcontractors are subject to the same terms and conditions as the Grantee.

The Grantee must assure that all services performed under a subcontract are appropriate and consistent with this grant. Under no circumstances does the presence of a subcontracting arrangement relieve the Grantee of its responsibilities to the Department.

The Grantee shall require, as a written provision in all subcontracts, that the subcontractor(s) recognize that payments made to them are derived from Federal and State Funds and that the subcontractor(s) shall be held civilly and/or criminally liable to both the Grantee and the Department, in the event of misrepresentation or fraud and abuse.

The Grantee must provide the Department with the following written subcontractor information:

- a. Name of proposed subcontractor(s);
- b. Amount of each proposed subcontract;
- c. Nature of Work to be performed;
- d. Federal Tax Identification number and SAP Vendor #;

I-22 News Releases

Applicants shall not issue news releases, Internet postings, advertisements or any other public communications pertaining to this project until after the grant is executed. News releases and other public communications must be forwarded to the RFA Project Officer for review and approval.

I-23 Applicant's Representations and Authorizations

By submitting its application, each applicant understands, represents, and acknowledges that:

- a. All of the applicant's information and representations in the application are material and important, and the Department may rely upon the contents of the application in making awards.
- b. The applicant has arrived at the price(s) and amounts in its application independently and without consultation, communication, or agreement with any other applicant or potential offeror.
- c. The applicant has not disclosed the price(s), the amount of the application, nor the approximate price(s) or amount(s) of its application to any other firm or person who is an applicant or potential applicant for this RFA, and the applicant shall not disclose any of these items on or before the application submission deadline.
- d. The applicant has not attempted, nor will it attempt, to induce any firm or person to refrain from submitting an application on this contract, or to submit an application higher than this application, or to submit any intentionally high or noncompetitive proposal or other form of complementary application.

- e. The applicant makes its application in good faith and not pursuant to any agreement or discussion with, or inducement from, any firm or person to submit a complementary or other noncompetitive application.
- f. To the best knowledge of the person signing the application for the applicant, the applicant, its affiliates, subsidiaries, officers, directors, and employees are not currently under investigation by any governmental agency and have not in the last *four* years been convicted or found liable for any act prohibited by State or Federal law in any jurisdiction, involving conspiracy or collusion with respect to bidding or proposing on any public contract, except as the applicant has disclosed in its application.
- g. To the best knowledge of the person signing the application for the applicant and except as the applicant has otherwise disclosed in its application, the applicant has no outstanding, delinquent obligations to the Commonwealth including, but not limited to, any state tax liability not being contested on appeal or other obligation of the applicant that is owed to the Commonwealth.
- h. The applicant is not currently under suspension or debarment by the Commonwealth, any other state or the federal government and has not been suspended or precluded from participation in any federally funded health care program, and if the applicant cannot so certify, then it shall submit along with its application a written explanation of why it cannot make such certification.
- i. The applicant has not made, under separate contract with the Department, any recommendations to the Department concerning the need for the services described in its application or the specifications for the services described in the proposal.
- j. Each applicant, by submitting its application, authorizes Commonwealth agencies to release to the Commonwealth information concerning the applicant's Pennsylvania taxes, unemployment compensation and workers' compensation liabilities.
- k. Until the selected applicant receives a fully executed and approved written agreement from the Department, there is no legal and valid agreement, in law or in equity, and the applicant shall not begin to perform.

I-24 Contractor Partnership Program

The Contractor Partnership Program (CPP) was created by the Department to create additional employment opportunities within the Commonwealth. The CPP is designed to leverage the economic resources of the Commonwealth to create jobs for welfare recipients by maximizing the recruitment, hiring and retention of welfare clients by Commonwealth contractors, subcontractors and grantees. The CPP will utilize its partnerships with the local Workforce Investment Agencies (WIAs), County Assistance Offices (CAOs), service delivery providers and other community action agencies to advance this goal.

The CPP will require all individuals interested in contracting with the Department to make a commitment to hire a specified number or percentage of their workforce from the welfare to work population. The Department will monitor all performance commitments to ensure contractors remain in compliance with the terms of their contract. The CPP will offer assistance to the contractors in fulfilling their requirements. The CPP will work cooperatively with contractors to assist in identifying hiring needs that may be met through the employment of welfare clients. In addition, the CPP will coordinate the resources of local service providers to assist in the identification of qualified individuals for employment opportunities.

Through CPP, the Department expects not only to increase the employment rate for welfare recipients, but to continue to contribute to the economic growth of the Commonwealth.

For more information regarding this program please contact:

Lisa M. Watson, Esq.
Director, Contractor Partnership Program
PA Department of Public Welfare
M & M Building
900 North 6th Street, 1st Floor
Harrisburg, PA 17102
Phone: (717) 705-7716/Fax: (717) 787-4106
Email: c-lwatson@state.pa.us

I-25 Resources

The selected Grantee must supply meeting rooms and normal office space for selected Grantee personnel, including equipment, Microsoft Office desktop software, network connectivity, supplies, clerical assistance, and administrative support needed to perform this engagement at its headquarters and any satellite offices.

Workspace must be approved by the Commonwealth and meet all Commonwealth requirements including, but not limited to, hardware, Web Site, telecommunications, and network connectivity via the Department Business Partner Network (in compliance with ITB-NET-008).

Desktop computers shall comply with Commonwealth Desktop standards to include Virus Protection and Security Software.

PART II

APPLICATION REQUIREMENTS

II-1 Content

Applicants must submit their applications in the format, including heading descriptions, outlined below. To be considered, the application must respond to all requirements in this part of the RFA. Applicants may provide other information thought to be relevant, but not applicable to the enumerated categories, as an appendix to the application. All cost data relating to the application must be kept separate from and not included in the Technical Submittal. Each application will consist of the following three separately sealed submittals:

- a. Technical Submittal, which shall be the response to sections 1-7 and 10 listed below;
- b. Cost Submittal, which shall be the response to section 8 listed below;
- c. Contractual Partnership Program Submittal, which shall be the response to section 9 below.

The Department may request additional information which, in the Department's opinion, is necessary to assure that the applicant's competence, number of qualified employees, business organization, and financial resources are adequate to perform according to the RFA.

The Department may make investigations as deemed necessary to determine the ability of the applicant to perform, and the applicant shall furnish to the Department all requested information and data. The Department may reject any application if the evidence submitted by, or investigation of, such applicant fails to satisfy the Department that such applicant is properly qualified to carry out the obligations of the RFA.

The applications must include:

1. **Cover Letter** that includes the applicant's name, contact person, telephone, fax, email information, and a statement of the applicant's intent to provide services to the Department for the purpose stated herein. A representative of the applicant who is authorized to bind the applicant shall sign the cover letter.
2. **Signature Page** as described in II-2 Signature Page of this RFA.
3. **Statement of Standards and Qualifications** that furnishes the information requested under II-3 General Eligibility Standards of this RFA.
4. **Organizational Information** that demonstrates that the applicant has the management structure, organizational depth and the corporate resources, including experience that will be necessary to adequately fulfill the terms of the grant. Information must include:
 - a. A description of the applicant's corporate identity, form and status, including name, address, telephone number, fax number and email address for the legal entity with whom the contract will be written;
 - b. The name and address of the principal officers, a description of the applicant's major services, its legal status as a for-profit or not-for-profit company and any specific licenses and accreditations held by the applicant;
 - c. A presentation of the corporate management philosophy;
 - d. A table of organizational structure;

- e. A description of the applicant's recruitment plans and resources from which it can draw staff. Include its ability to fill positions with qualified staff in a timely manner, to retain staff, and to work in multiple settings. Every effort should be made to hire people with disabilities;
 - f. A description of the applicant's management information systems and statistical report gathering and reporting capabilities;
 - g. Evidence of successful past performance providing similar services to other clients;
 - h. Applicant's Federal Tax Identification Number and SAP Vendor Number;
 - i. A statement regarding whether the business has been sued for non-performance, has paid damages for non-performance or breach of contract, or has been terminated from a contract within the last 5 years. If applicable, explain each incident in one paragraph or less;
 - j. A statement regarding whether the applicant is tax delinquent with Pennsylvania Department of Revenue, Pennsylvania Department of Labor and Industry, or Federal IRS. If so, please identify which department and briefly explain in one paragraph or less; and
 - k. A statement regarding whether the applicant is currently suspended or debarred or has been terminated or excluded from participation in any federally funded health care program by the Commonwealth, or any other State or Federal government. If applicable, please state when and for what reason.
 - l. Similar organizational background information on any significant subcontractor (exclusive of affiliates). A significant subcontractor is defined as an organization undertaking more than 10% (on a total cost basis) of the work associated with this RFA.
5. **Detail of the Financial Conditions** of the applicant that demonstrates its ability to perform the work required in this RFA. For ease in assembling the proposal, the applicant may append its financial documentation rather than including it in the main body of the proposal. The applicant must include:
- a. The identity of a related party who may have submitted a proposal, and how the other party meets the definition of a related party. Compliance with this requirement does not require an Offeror to seek out information that it does not already have available;
 - b. The identity of each entity that owns at least five percent of the applicant. Provide the below required information on the applicant, and for each entity that owns at least five percent of the applicant. If any information requested is not applicable or not available, provide an explanation. Applicants may submit appropriate documentation to support information provided;
 - c. Audited financial statements for the two most recent fiscal years for which statements are available. The statements must include a balance sheet, statement of revenue and expense and a statement of cash flow. Statements must include the auditor's opinion, the notes to the financial statements and management letters submitted by the auditor to the applicant. If audited financial statements are not available, explain why and submit unaudited financial statements;
 - d. Unaudited financial statements for the period between the last month covered by the audited statements and the month before the proposals are submitted;
 - e. Documentation about lines of credit that are available, including maximum credit amount and amount available thirty days prior to the submission of the proposal;

- f. The full name and address of any proposed subcontractor in which the applicant has a five percent or more ownership interest. The applicant will provide a copy of its Financial and Accounting Policies and Procedures;
 - g. The full name and address of any organizations with which the Offeror anticipates subcontracting. The applicant must describe how it will ensure a smooth working relationship with subcontractors;
 - h. A list of any financial interests the subcontractor may have in the applicant or any financial interest the applicant has in proposed subcontractors;
 - i. Information about any pending significant litigation; and
 - j. The applicant must provide copies of all proposed subcontracted arrangements as an appendix to the technical proposal.
6. **Provide Information and Documentation** sufficient to demonstrate the applicant's abilities within the context identified in Part IV Work Statement of this RFA. Also include back-up information such as representative's résumés and customer references to further support information provided.
 7. **Implementation Plan** that meets the requirements listed in II-4 Implementation Plan and Timeline of this RFA.
 8. **Budget and Cost Structure** that meets the requirements listed in II-5 Budget and Cost Structure of this RFA.
 9. **Contractor Partnership Submittal** as detailed in II-6 Contractor Partnership Program of this RFA.
 10. **References and a Description** of the applicant's experience in providing the requested services or similar services. List all contracts and grants held within the last five years relating to the requested services or similar services. Include specific services provided. In addition, the applicant shall supply three references from existing agencies or entities outside the Department for whom the applicant is currently providing similar services. The following information must accompany the references so that the Department may contact them regarding the qualifications of the applicant to provide the required services:
 - a. Name and address of the organization for each reference;
 - b. Name of the contact individual for each reference;
 - c. Organization title of the contact individual for each reference;
 - d. Telephone number of the contact individual for each reference;
 - e. List all pending legal actions against the applicant, subcontracting entities or consultant(s) within the past 5 years. Provide name of contact person who could best discuss details of legal actions.

II-2 Signature Page

Grants are awarded by the Department of Public Welfare and the grant agreement language is included in this RFA (see Attachment Nos. 1 through 5).

The grant agreement signature page provided must be signed, and submitted with the grant application as follows:

Signature pages must be signed by the President or Vice President and Secretary, Assistant Secretary, Treasurer or Assistant Treasurer. If a person other than these officers is executing the grant, that person must be specifically authorized to sign. Applicant must include a copy of corporate bylaws or corporate resolution evidencing the authorization.

Please note THREE ORIGINAL signature pages must be submitted with each application.

The submission of the signed grant agreement with the Application does not guarantee selection of the grantee's program. It does not bind the parties to the grant, unless the Commonwealth awards the grant and all Commonwealth approvals are obtained.

II-3 General Eligibility Standards

A. Conflict Free Requirements

To assure a conflict free environment, the selected Applicant must ensure that:

1. Personnel working on Part IV-2, Deliverables/Tasks, Task 1 cannot be employed by a nursing facility.
2. Personnel working on Part IV-2, Deliverables/Tasks, Task 2 cannot be employed by a nursing facility.

In addition, if the applicant is related to or otherwise affiliated with a nursing facility or with a provider of Home and Community Based Services (HCBS) for a waiver or program administered by the OLTL, the applicant must disclose this relationship and provide a detailed written description of the nature of its relationship with the related provider including, but not limited to, detailed information on the ownership of the company that contains the names and percentage of ownership, ownership structure, etc., as well as any other current contracting or subcontracting relationship(s) that may result in a conflict of interest with the requirements of this solicitation. The selected applicant must also abide by the conflict of interest standards identified in the Standard Contract Terms and Conditions (see Attachment No. 4) and the Department of Public Welfare Addendum to Standard Terms and Conditions (see Attachment No. 2).

If a potential conflict is disclosed, the Applicant must propose a plan as to how it will prevent any conflict or perceived conflict from arising under the proposed grant. Upon reviewing the submitted proposals, the Department may request additional information from Applicants or ask individual Applicants to make changes to the proposed plan for avoiding conflicts.

The Department, in sole and complete discretion, may disqualify any application if it determines that the potential for conflict cannot be adequately addressed.

B. Applicant Qualifications

For purposes of this project, the selected Applicant must meet the following qualifications:

1. The applicant must have a mission statement that demonstrates its commitment to the Independent Living Philosophy. The applicant must identify five examples of how they have carried out its mission statement and promoted the Independent Living Philosophy. The Independent Living Philosophy holds that individuals with disabilities have the right to live with dignity and with appropriate support in their own homes, fully participate in their communities, and control and make decisions about their lives.
2. The applicant must have a minimum of five years experience as a human services provider.
3. The applicant must have a working knowledge of home and community based services.
4. The applicant must demonstrate evidence of successful past performance providing similar services.

5. The applicant must demonstrate experience in leading and managing the creation, staffing, sub-contracts, systems, building/facilities, leasing/rental agreements and the day-to-day business operations for a multi-site business.
6. The applicant must have (or show a work plan for implementation of) a functional website that meets the RFA requirements and is Bobby approved. Bobby is a Web-based tool that analyzes Web pages for their accessibility to people with disabilities. Bobby is offered as a public service in order to further its mission of expanding opportunities for people with disabilities through the innovative uses of computer technology. Bobby's analysis of accessibility is based on the World Wide Web Consortium's (W3C) Web Accessibility Initiative (WAI) and Section 508 guidelines from the Architectural and Transportation Barriers Compliance Board (Access Board) of the U.S. Federal Government.
7. The applicant must have sufficient meeting rooms, office locations, and office equipment to fulfill the terms of the RFA.
8. The applicant must employ (or subcontract) key personnel who meet the General Staffing Requirements detailed in Part II-3.E.
9. The applicant must submit all information required in this RFA.
10. The applicant must have written policies and procedures in place for the following and submit copies of each:
 - a. Performance of the RFA tasks.
 - b. Record retention.
 - c. Obtaining and verifying criminal background checks.
 - d. Confidentiality and HIPAA compliance.
11. The applicant must meet any qualifications stated elsewhere in this RFA.

C. Information Handling

The selected Applicant must abide by the Department's specific regulations and requirements concerning confidentiality of information and Health Insurance Portability and Accountability Act (HIPAA) Business Associate Language provided by the Department (see Attachment No. 5), and the DPW Addendum to the Standard Terms and Conditions (see Attachment No. 2). The selected Applicant must protect the confidentiality of all Commonwealth and the Department's information. The selected Applicant agrees that any breach of this provision may, at the discretion of the Commonwealth and/or the Department, result in immediate termination of the grant.

The nature of this project requires handling of sensitive information. All staff and/or subcontractor(s) assigned to the project by the selected Applicant must comply with applicable state and federal laws, regulations, and rules regarding the confidentiality of information about consumers and recipients of HCBS. The agreement will address confidentiality requirements including the following:

1. All team members must comply with the Health Insurance Portability and Accountability Act (HIPAA).
2. All team members must receive training in confidentiality regulations, including HIPAA Privacy and Security training and Medical Assistance confidentiality requirements.
3. All team members must sign a confidentiality agreement. Personnel policies must address disciplinary procedures relevant to violation of the signed confidentiality agreement.
4. Both confidential and sensitive information are not to be used by the selected Applicant or subcontractor(s) or given to another agency other than for the purpose of carrying out obligations of the grant agreement.

The selected Applicant is responsible for ensuring that adequate measures are in place to prohibit unauthorized access, copying, and distribution of information during work on this project. The selected Applicant is responsible for proper disposal of both hard and electronic working copies of information during work on this project, as well as any remaining information upon the completion of the project.

Sensitive information may need to be transferred from other agencies or shared with the Commonwealth during the course of the grant period, and/or transitioned to another vendor at the conclusion of this grant. The selected Applicant will follow Commonwealth procedures for information handling and sharing. The selected Applicant will ensure that records are properly retained for five years after becoming fully inactive. The selected Applicant is responsible for following record retention procedures and may be required to retain records beyond the conclusion of the project.

D. General Requirements

1. The selected Applicant may subcontract for tasks included within the scope of this RFA but must identify all subcontractors and the tasks each subcontractor will perform. Subcontracts must be submitted to and approved by the Department prior to implementation.
2. The selected Applicant remains responsible for all requirements specified in this RFA, regardless of whether the tasks are performed by the selected Applicant or by individuals or entities with whom the selected Applicant subcontracts.
3. All personnel of the selected Applicant and personnel of subcontractors must comply with applicable Federal and State statutes, regulations, and rules regarding the confidentiality for consumers and recipients of home and community based services and nursing facility services. The selected Applicant will take measures to prudently safeguard and protect unauthorized disclosure of the OLTL information in its possession and will establish internal policies to ensure compliance with Federal and State statutes and regulations regarding confidentiality.
4. The selected Applicant must comply with any existing, new applicable regulations, directives, statutes, etc. issued by the Commonwealth and/or Federal government that take effect during the grant.
5. The selected Applicant must understand and adhere to the Independent Living Philosophy.
6. The selected Applicant must maintain a business site within the Commonwealth of Pennsylvania.
7. The selected Applicant must use appropriately qualified individuals to implement and administer the contract. Every effort should be made to hire people with disabilities.
8. The Applicant must have a toll-free phone number that is operated during normal business hours.
9. The Applicant must have other forms of communication available. At a minimum, this includes email and voicemail for key personnel, fax, and text telephone (TTY).

E. Staffing Requirements

1. General Staffing Requirements:
 - a. The selected Applicant must provide or arrange for, at its own expense, training of all selected Applicant and subcontractor staff, including the Project Manager, on an initial and ongoing annual basis; must document such training in personnel

files; and must have such documentation available for the Department's review. The selected Applicant must meet the Department's goals, objectives and requirements for the Specialized Services Plan and the PCEDME.

- b. The selected Applicant must ensure that their personnel perform all work required to meet the Department's goals, objectives, and requirements. The Department will determine whether the selected Applicant's personnel are performing satisfactorily as specified in the final contract.
 - c. The Department may require the selected Applicant to remove their staff or subcontractor's staff from any further work under the grant if:
 - i. The individual staff member or subcontractor's staff member does not perform at the applicable skill level specified in this RFA, the selected Applicant's offer and the approved work plan.
 - ii. The individual staff member or subcontractor's staff member does not deliver work that conforms to the performance standards stated in this RFA.
2. Staffing Requirements for Key Personnel:
- a. At a minimum, the selected Applicant's key personnel must include the following positions:
 - iii. **Project Manager.** Project Manager will serve as the primary contact person for the Department. The Project Manager must have previous managerial experience. The Project Manager must be available to the Department via telephone or email during the Department's regular business hours. Project Manager's responsibilities include ensuring compliance with administrative policies and procedures; monitoring program operations and performance; and overseeing development of status reports and ad hoc reports, if any, to the Department. The Project Manager qualifications are:
 1. Professional, volunteer, or life experience working with persons with a disability and
 2. Minimum education:
 - a. Master's Degree in social work, social science, health care management, business administration, or a related field and two years of experience administering a project or organization; or
 - b. Bachelor's Degree in social work, social science, health care management, business administration, or a related field and four years of experience administering a project or organization.
 - iv. **Specialized Services Plan Coordinator.** Each Specialized Services Plan Coordinator is required to complete an initial training program and training on an annual basis. In addition, each Specialized Services Plan Coordinator will be required to carry identification when visiting residents in nursing facilities and sign a confidentiality statement. The Specialized Services Plan Coordinator qualifications are:
 1. Bachelor's degree in social work, social science or related field or;
 2. High School diploma and two years of experience working with individuals with disabilities in a home and community based services setting and passes an oral and/or written review or;

3. Person with a disability with a high school diploma who has successfully transitioned to living independently and has one year of experience working with individuals with disabilities in a home and community based setting and who passes an oral and/or written review.
- v. **PCEDME.** Each Peer Counselor must be capable of discussing with targeted nursing facility residents their need for durable medical equipment (DME) such as wheelchairs, specialty beds, and augmentative communication devices. Each Peer Counselor is required to carry identification when visiting residents in nursing facilities and sign a confidentiality statement. The Peer Counselor qualifications are:
1. Must be 18 years of age or older;
 2. Must have a high school diploma or GED;
 3. Must have six months of paid or volunteer advocacy experience in working with people with physical disabilities;
 4. Must not have been identified as a perpetrator in a validated case of abuse, neglect, or exploitation of children or adults;
 5. Must have effective communication skills;
 6. Must have an understanding of durable medical equipment such as wheelchairs, specialty beds, and augmentative communication devices;
 7. Must have an understanding of nursing facility services provided to residents;
 8. Must have an understanding of nursing facility regulations;
 9. Must be a U.S. citizen or a legal alien lawfully approved to work in the United States;
 10. Must have ability to travel throughout designated area for assessments, training and meeting sites; and
 11. Must have ability to meet deadlines.
- b. The Applicant's Project Manager must be employed by the selected Applicant when it submits its application. The Project Manager will be responsible for overseeing any subcontracts entered into by the Applicant.
 - c. The services of the Project Manager shall be required for the duration of the grant unless the individual becomes unavailable to the selected Applicant because of death, disability or termination of the underlying employment relationship.
 - d. If the Project Manager becomes unavailable for the reasons stated above in subparagraph c., the selected Applicant will replace the Project Manager with an individual of similar qualifications. The selected Applicant shall provide the Department's Project Officer with the résumé of a proposed replacement and offer the Department an opportunity to interview that person.
 - e. The selected Applicant shall immediately notify the Department's Project Officer of the discharge of its Project Manager assigned to this grant, and the Project Manager shall be forthwith relieved of any further work under this grant.
 - f. The selected Applicant must submit a copy of the resume and signed confidentiality agreement for all key personnel within the first thirty days of hire but before starting work on the grant tasks. Individual staff members and subcontractor's staff members who will be serving as Peer Counselors for Task 2 must be pre-approved by the Department.

II-4 Implementation Plan and Timeline

The applicant must provide the Department with a work plan and implementation schedule. The work plan must show all tasks necessary to complete the work as described in Part IV Work Statement. The work plan should:

- a. Identify major tasks, the work elements of each task, the resources assigned to the task, the time allotted to each element and the deliverable items the selected applicant will produce.
- b. Identify the key characteristics that will remain operational during the life of the grant.
- c. Identify any tasks for which subcontracting arrangements are being considered.
- d. Identify any special consideration and attention the applicant will provide to support on-going work.
- e. Include tasks for establishing and maintaining communication between all parties and an approach that is completely responsive to all written specifications and requirements contained in this RFA.
- f. Detail the approach to establish, capture, document, evaluate, and report on core performance metrics relative to grant and business operations performance, efficiencies, and effectiveness.
- g. Outline the approach to ensure that services are available to all interested and eligible individuals.

In addition, the work plan:

- h. May include a PERT or GANTT chart display to show project, task, and time relationship.
- i. Will be submitted only once during the course of the grant, but updates to work plans and timelines must be submitted on an as needed basis.
- j. Must include the following, when appropriate:
 - i) **Specialized Services Plan.** A transition plan, if applicable, to smoothly shift tasks from existing providers to new providers in such a way that services are not interrupted and consumer choice is not interfered with.
 - ii) **Peer Counselors for Evaluation of Durable Medical Equipment.** A transition plan, if applicable, to smoothly shift tasks from existing providers to new providers in such a way that services are not interrupted.

II-5 Budget and Cost Structure

The Fee and Cost structure of this grant is based on deliverables and services provided. Applicants must complete the Cost Portion of the application (Attachment No. 6). The budget form must be submitted along with the application, but in a separate sealed envelope.

II-6 Contractor Partnership Program

To receive credit for a response to the Contractor Partnership Program, applicants must include the following information in the Contractor Partnership Submittal of their proposal:

- Organization's name, telephone number and address.
- Address of the Organization's headquarters. If located in Pennsylvania, identify the county.

- The name, title, telephone number, address and email of the project (contact) person for the Contractor Partnership Program.
- Address of all offices located within Pennsylvania. Identify the county where the office is located.
- Name, address and telephone number of subcontractors, if applicable.
- If subcontractors are the primary service delivery providers, list the address of all of their offices located within Pennsylvania including the county where the offices are located.
- Type of services being provided.
- Anticipated number of employees assigned to this project.
- Anticipated number of welfare recipients that will be hired for this project.
- Type of positions needed for this project. (Specify management vs. non-management positions)
- Type of business entity. (i.e. not for profit, government entity, public corporation, university)

In addition to the basic information requested above, each applicant must answer the following questions as they relate to hiring and retaining individuals receiving welfare:

- Describe the recruitment strategies that will be utilized by the applicant to obtain qualified welfare clients.
- How will the applicant ensure the retention of applicants hired through the CPP and maintain its performance goals throughout the existence of the contract?
- What steps will the applicant take to ensure professional development opportunities are available to new hires to advance beyond entry level positions?
- Describe the methods that will be implemented to recruit, hire and retain welfare recipients.

II-7 Proposal Format

Applicants must submit one soft copy on CD-ROM in Microsoft Office compatible format and eight hard copies of their proposals by the due date and time specified, in the format outlined in this RFA, and signed by agency representatives who are authorized to bind the agency to the grant provisions. All cost information and dollar amounts relating to this proposal must be kept separate from, and not included, in the Technical Submittal.

PART III

CRITERIA FOR SELECTION

III-1 Mandatory Responsiveness Requirements

To be eligible for selection, an application must be:

- Received by the due date and time;
- Properly signed by the applicant.

III-2 Technical Nonconforming Proposals

The Department may, in its sole discretion, waive technical or immaterial nonconformities in an applicant's submittal.

III-3 Evaluation

The evaluation committee will use the following criteria in making the selection:

Experience – The Department will look at the Applicant's scope of experience in the areas of home and community based services, the disability community, data collection, analysis and reporting as described in the RFA and all listed attachments. Experience must reflect work done by individuals who will be assigned to this project as well as that of the organization. Jobs referred to in this section should be identified and the name of the applicant shown, including the name, address and telephone number of the responsible official of the applicant, company or agency who may be contacted. Experience in providing contracted services similar to those that are requested in this RFA is mandatory. Responses must provide sufficient documentation to detail applicable experience.

Work Skills – As outlined in Part II of this RFA, the applicant shall provide proof of the work skills of the staff that will be assigned to the project including résumés and shall meet the requirements detailed in this RFA. Résumés should be one page in length and focus on the individual's direct experience and knowledge as well as experience.

Organizational Structure – This category includes criteria, which assure the Department that the applicant can commit sufficient physical, financial, and personnel resources to ensure that the tasks will be accomplished in a professional manner in the time frames specified by the Department. This category determines if the applicant has conveyed an accurate understanding and interpretation of the objectives and requirements of the project. This includes the effort and resources the applicant proposes to use to meet the objectives and requirements of the work statement.

This category also includes a detailed work plan that must be provided by the applicant that will explain when and how the tasks and deliverables will be accomplished. The timeline that is provided in the statement of work must be consistent with the implementation plan that is provided in this RFA.

The Department will determine, based upon information provided in response to this RFA, a list of qualified applicants. Applicants responding to this RFA are therefore encouraged to identify all relevant history and expertise that they possess.

Cost - The evaluation committee will evaluate the applicant's Cost Submittal in relation to the proposed activities. The cost must commensurate with the activity described. If a grant is awarded, the Commonwealth will not pay or be liable for any other additional costs

III-4 Contractor Partnership Program

Contractor Partnership Program: Each proposal will be rated based on the responses to the questions in Part II of this RFA and the commitment to hire from the Welfare-to-Work population.

PART IV

WORK STATEMENT

IV-1 Background

The Omnibus Budget Reconciliation Acts of 1987 and 1990 (OBRA-87 and OBRA-90) amended the Social Security Act by requiring major reforms for nursing facilities participating in the Medicaid program. Among other provisions, these reforms were designed to ensure that a person with an Other Related Condition (ORC), along with other specially identified populations, receives quality care in an appropriate setting. ORCs include physical, sensory, or neurological disabilities that manifested before age 22, are likely to continue indefinitely, and result in substantial functional limitations in three or more of the following areas of major life activity: capacity for independent living, mobility, self-direction, learning, understanding and use of language, and self-care. While OBRA-87 required that states locate and secure alternative living arrangements within the community for inappropriately placed nursing facility residents with other related conditions, it also acknowledged that nursing facilities might be appropriate settings for persons with other related conditions under certain circumstances. OBRA-87 created a national set of minimum standards of care and rights for individuals living in certified nursing facilities. The legislation substantially revised statutes governing the operation of Medicare and Medicaid certified nursing facilities. Among the Act's provisions are requirements to eliminate inappropriate placement of people with mental illness, mental retardation and other related conditions in Medicaid-certified nursing facilities. OBRA-87 also required states to meet the specialized/supportive services needs of persons with other related conditions, whether they resided in nursing facilities or relocated to community-based settings. Approximately six hundred individuals with an ORC currently receive OBRA mandated Specialized Services in the Commonwealth (see Attachment No. 7).

After the OBRA requirements were implemented, Pennsylvania applied for and received the OBRA Waiver to provide home and community based services (HCBS) to persons with an ORC. Consumers who were already receiving OBRA services in the community were either enrolled in the OBRA Waiver or continued to receive their HCBS through state only funds.

The Exceptional Payment Program was expanded in Fiscal Year 1999-2000 to allow additional grants to nursing facilities for the purchase or rental of medically necessary durable medical equipment (DME). At that time, the Peer Counselor for Evaluation of Durable Medical Equipment Program (PCEDME) was created. This program has taken proactive measures to identify persons who may benefit from additional or different DME to attain or maintain their highest practicable physical, mental, and psychosocial well-being. Currently, the program is targeting individuals with paraplegia, quadriplegia, multiple sclerosis, and cerebral palsy.

The peer counselor and resident discuss the resident's needs and together decide if additional or different DME is needed. If the peer counselor determines that the resident does need a new or different DME, the peer counselor completes the Recommendation Form and reviews the form with the Nursing Facility (NF).

The NF is required to follow-up with the peer counselor's recommendations, or to provide acceptable justification to OLTL as to why it disagrees with the peer counselor's recommendation.

IV-2 Deliverables/Tasks

The Grantee will be required to perform key tasks for each task objective listed in I-1 Purpose. Estimated deliverable due dates have been included in this RFA for planning purposes. Final due dates will be determined after the grant is awarded.

Task 1: Operate the Specialized Services Plan (SSP)

According to the Omnibus Budget Reconciliation Act (OBRA) of 1987, the OLTL is to provide specialized services for a specific targeted population relating to Other Related Condition (ORC) who need and want specialized services and is eligible for nursing facility placement. The Grantee will be required to operate the SSP in accordance with applicable CSPPPD Contractor Directives (see Attachments Nos. 8 through 14). The Grantee must provide for specialized services throughout the Commonwealth. This will include administering the existing plans already being provided throughout the Commonwealth through local, state, and federal agencies and other sources, such as family, friends, and private sector contributions. The Grantee will be responsible for the following:

- a. **Explaining Final Determination Decisions to Nursing Facility Applicants.** The Grantee has the responsibility for coordinating Pre-Admission Screening Resident Review (PASRR, see Attachment No. 15) explanations and ensuring that the explanations are conducted appropriately and within the required timeframe of five working days from receipt of the record from OLTL. The Department will reimburse the Grantee per explanation. Explanations performed after five working days will be reimbursed at 85 percent of the established rate.
- b. **Developing SSPs and Providing Specialized Services to Individuals Residing in Nursing Facilities.** The Grantee is responsible for coordinating plan development, and facilitating and monitoring the provision of specialized services. The Grantee has the sole responsibility for monitoring the quality, appropriateness, and timeliness of the Specialized Service Plan throughout the Commonwealth. The Department will reimburse the Grantee for tasks i through iv at one monthly rate for each individual who has an SSP (per member per month). The types of specialized services available are:
 - i. **Service Coordination and Advocacy.** Coordination includes developing and maintaining a specialized services plan of care; facilitating and monitoring the integration of specialized services with the provision of nursing facility and specialized rehabilitative services; and assisting or advocating for residents on issues that pertain to residing in nursing facilities. Advocacy is assistance that helps the individual gain acceptance from others and/or to obtain the services needed to function as independently as possible. Reimbursement for this task is included in the monthly rate described in Task 1.b. Service coordination tasks must be documented by the Grantee and will be part of the monitoring process performed by the OLTL.

- ii. **Peer Counseling and Support Groups.** Peer Counseling links residents to role models or mentors who are persons with physical disabilities who reside outside of the nursing facility or to support groups. The Grantee's role is to link the individual to a peer counselor, mentor, or support group as indicated in the SSP. Reimbursement for this task is included in the monthly rate described in Task 1.b.
 - iii. **Training.** Training is classroom instruction, individual instruction, and/or natural situations where the individual acquires, regains, or prevents the loss of skills in key areas. Reimbursement for this task is included in the monthly rate described in Task 1.b.
 - iv. **Community Integration.** Community integration is exposing individuals to a variety of community experiences to increase their level of independence. Community integration must have goals associated with each activity. Reimbursement for this task is included in the monthly rate described in Task 1.b.
 - v. **Equipment and Assessments.** The equipment and assessments service is only available to individuals who are relocating to community settings and includes the purchase of equipment and related assessments. Alternate funding sources, such as Medical Assistance or other insurance, must be exhausted before the Department will reimburse for this service. The Department will reimburse the Grantee at a per cost basis. The Department may require prior approval for items above \$500.
 - vi. **Transportation.** Transportation is assistance in being transported to and from the specialized services listed on the SSP. The Department will reimburse the Grantee at a per mile basis when the Grantee or its affiliate directly provides transportation and on a per cost basis when an entity not affiliated with the Grantee provides transportation. The Department may require prior approval for transportation above \$250 per month.
- c. **Administering, monitoring, and evaluating work tasks and activities related to the operation of the SSP.** The Grantee will provide oversight of the specialized services provided through the SSP (see Attachment No. 16). Activities in this task are reimbursed through the monthly service coordination fee.
- i. **Identify and/or develop community based alternative living arrangements.**

- 1. The Grantee will identify the need for developing community-based alternative living arrangements for individuals relying upon information provided on the PASRR. Alternative living arrangements, such as, clustered/shared living arrangements, are developed to meet the individual's needs in accordance with the CSPPD Contractor Directive 03-006 (Attachment No. 14)

ii. **Arrange the Relocation and Provide Specialized Services to Relocating Consumers.**

1. **Specialized Services for Relocating Consumers.** All individuals, regardless of their eligibility for waiver services, are provided the specialized services outlined in their SSPs. The Grantee must ensure that the individual receives intensive specialized services before moving to an Alternative Living Arrangement (ALA). The specialized services provided are based on the individual's choices, needs, and capabilities so that the individual develops skills and abilities to live as independently as possible and in an integrated environment.
2. **Community Support Team.** The Grantee and the individual together will identify a Community Support Team to ensure that a safe and orderly relocation occurs from the nursing facility to the ALA. The Community Support Team serves a key role in identifying the individual's total array of service needs, including ALA needs and the appropriate services to meet those needs using the information obtained in the SSP. The type, duration, and arrangement of specialized services provided are based on input from the individual and their team members.
3. **Relocation Logistics.** The Grantee and other members of the consumer's Community Support Team will assist the individual in finalizing all matters related to the actual move. Specifically, the Grantee will ensure that the nursing facility responds in a timely manner to all the matters related to the consumer's relocation. This includes packing and shipping the individual's personal belongings, providing copies of medical records and other documentation to the individual, transferring the individual's personal fund balance, and requesting that mail be forwarded to the consumer's new address, and ensuring that all medication and supplies have been arranged.

The individual, in cooperation with the Grantee, schedules at least one "trial living" visit to their new home. This trial visit is arranged to include all of the necessary supports needed for the individual to live as independently and self-directed as possible (i.e.: attendant care, adaptive equipment, emergency back-up system, tour of the community). Any adjustments to the SSP are completed at this time.

4. **Back-Up Plans.** Each relocating individual's SSP has a detailed description of his/her formal and informal back-up systems. The individual has primary responsibility for arranging for people to serve in a back-up capacity to those who would normally perform daily living services for them. The Grantee will encourage the

consumer to arrange for family, friends, and neighbors to provide back-up services.

The Grantee will ensure that the necessary training regarding a formal back-up system is provided. Individual training activities must ensure that each consumer has a clear understanding of (and if necessary, written instructions regarding) accessing life-saving services.

The Grantee will ensure that the individual will have assistance to access priority services and life saving services until the individual and the Grantee agree, in writing, that such an arrangement is no longer needed to ensure the individual's health and safety in the community. This requirement recognizes that at some point in the individual's life the individual needs to function more independently in emergency situations, (i.e., as a typical citizen would access emergency services).

5. **Financial Arrangements.** The Grantee will ensure that arrangements have been made for the provision of the individual's income at least 30 days prior to the relocation date. The individual will be involved in the application process to obtain or transfer Social Security benefits, Supplemental Security Income, and other funds and benefits.
6. **Arranging for the Provision of Services to Waiver Recipients.** The Grantee and the individual will work together to locate and/or identify eligible Waiver Providers within the area the individual is relocating. After the individual has identified a provider, the Grantee will ensure the arrangements for the provision of services is finalized. This includes the furnishing of all documentation necessary to serve the Waiver recipient. The Grantee will ensure that an individual has the necessary staff available to coordinate services in the community and will transfer coordination tasks to the waiver coordination agency when that individual is successfully enrolled in the waiver.
7. **Referring Individuals to Appropriate Services.** In the event an individual is determined ineligible for the Waiver Programs by the local County Assistance Office (CAO), the Grantee will refer the individual to other programs and agencies that may be able to provide services to them. The Grantee will ensure that an individual has the necessary staff resources available to coordinate services in the community and will transfer coordination tasks to that staff when that individual is successfully transitioned to the community.

Task 2: Administer the Peer Counselors for Evaluation of Durable Medical Equipment (PCEDME)

The Grantee will administer the PCEDME for the OLTL (see Attachment No. 17). Peer Counselors meet with targeted nursing facility residents (currently, paraplegic, quadriplegic and those with a diagnosis of cerebral palsy or multiple sclerosis) to discuss durable medical equipment needs and make recommendations to the nursing facility. The nursing facility then requests the equipment through the Department's Durable Medical Equipment (DME) Program if over \$5000. The Grantee will be provided a list, including location, from the OLTL of targeted nursing facility residents who will need a non-clinical assessment completed. The Grantee will be responsible for the following:

1. Send a letter to the Nursing Facility Administrator listing the names of targeted residents the Peer Counselors will visit (see Attachment No. 18).
2. Schedule a visit with targeted residents during normal visiting hours. Inform the Nursing Facility Administrator of the schedule of visits. Notify the OLTL Project Manager if the nursing facility fails to cooperate.
3. The Peer Counselor will introduce him/herself to the nursing facility staff caring for the resident.
4. The Peer Counselor will conduct an interview with the resident by listening to the resident and using personal experience decide with the resident if there is a need for a clinical assessment.
5. Provide the nursing facility with a copy of the Peer Counselor DME Recommendation Form (see Attachments No. 19 through 21) prior to leaving the facility the day of the interview. Forward the Peer Counselor DME Recommendation Forms to OLTL weekly.
6. Provide the MA 97/MA97LTC and related paperwork to the nursing facility as indicated (see Attachments No. 22 and 23).
7. Follow up with the nursing facility within seven business days to ensure the clinical assessment has been scheduled. Notify OLTL if the attending physician refuses to write the order for the clinical assessment.
8. Follow up with the nursing facility within 15 business days after the clinical assessment has been performed to see if the need for DME has been identified and if the nursing facility has filed the MA 97/MA97LTC and related paperwork.
9. After OLTL has confirmed that DME will be provided to the resident, contact the nursing facility one month after the date of notification to verify the DME has been provided to the resident by the nursing facility.
10. Perform an on-site visit after the DME has been delivered. If the DME has not been delivered, telephone to research the status of the request.
11. If the DME is acceptable to the resident, no further follow up is needed. If the DME does not meet the resident's needs, then work with the nursing facility to adjust equipment or request another clinical assessment.

12. Monitor training on new equipment.
13. Provide information so that the resident is aware of all Department programs that would allow them to relocate to the community, as well as alternative living arrangements. Payment for Task 2:1 through Task 2:13 will be made per interview upon successful completion of the Peer Counselor DME Recommendations form by the Grantee and acceptance of the form by the Department.
14. Participate in monthly meetings with OLTL.

Task 3: Disburse Payments to the Provider of Services for State Only Consumers

The Grantee will disburse payments to the provider of services for state only consumers on a monthly basis. Two consumers currently receive services covered by state-only funding outside of a distinct HCBS program within the OLTL. The consumers receive services from existing agencies who submit monthly reports to the OLTL. Costs for disbursing payments will be reimbursed on a per check basis. The Grantee will:

1. Ensure that internal cash controls are in place. Policies on internal cash controls must be submitted as part of the RFA response.
2. Disburse payments within ten business days of the request by OLTL.
3. Provide the necessary information, forms, and reports needed by the recipient agencies to process the payment appropriately.
4. Issue any needed Internal Revenue Services (IRS) forms at the close of each tax year that payments were made.
5. Ensure that actual expenditures for pass-through items made on the State's behalf will be paid without allocation of any indirect charges or profit.

Task 4: Disburse Payments for the Nursing Home Transition Project

The Grantee will disburse payments for the Nursing Home Transition (NHT) Project at the request of the OLTL. All payments will be made to one of fifteen (15) local collaborative partner agencies. Whenever possible, multiple payments to the same agency should be combined into one check. Costs for disbursing payments will be reimbursed on a per check basis. Payments include:

1. Base Funding Payments – each provider agency receives a predetermined sum at the beginning of the state fiscal year (SFY) that will cover their ongoing administrative and staffing costs of the NHT Project.
2. Restructuring Payments – agencies may receive a predetermined sum at the beginning of the SFY that will cover one-time only costs to incorporate NHT into their ongoing operations.
3. Incentive Funding Payments – providers may earn incentive monies twice during the SFY based on their performance against key NHT goals.
4. Payments for Special Funding Requests – funding is available to cover the cost of transitioning from a nursing facility for individuals who will not qualify for a Medical Assistance Waiver when they return to the community. In SFY 2006-2007, there were 24 Special Funding Requests. To date in SFY 2007-2008, there have been 21 Special Funding Requests.

The Grantee will:

1. Ensure that internal cash controls are in place. Policies on internal cash controls must be submitted as part of the RFA response.
2. Disburse payments within ten business days of the request by OLTL.
3. Provide the necessary information, forms, and reports needed by the recipient agencies to process the payment appropriately.
4. Issue any needed Internal Revenue Services (IRS) forms at the close of each tax year that payments were made.
5. Ensure that actual expenditures for pass-through items made on the State's behalf will be paid without allocation of any indirect charges or profit.

IV-3 Minimum Grantee Background Checks

The Grantee must arrange, at its own expense, for a background check for the Project Manager and each employee, as well as the employees of any of its subcontractors, who will have contact with Medical Assistance (MA) recipients in their homes and nursing facilities. Background checks are to be conducted via the Criminal History Request Online found at the Pennsylvania State Police (PSP) Website, under PSP Services, <http://www.psp.state.pa.us>. For individuals who have not been residents of the Commonwealth for the two years prior to their employment, the Grantee must arrange for a report of federal criminal history record information. The background check must be conducted prior to operation of the Specialized Services Plan and the Peer Counselors Evaluation for DME, upon hire and on an annual basis thereafter. The Grantee or its subcontractor must maintain a copy of this record in the individual's personnel file and have them available for Department inspection.

Before the Commonwealth will permit access, the Grantee must provide written confirmation that the background checks have been conducted. If, at any time, it is discovered that an individual has a criminal record that includes a job related conviction as defined in the Older Adults Protective Services Act or in regulations or policies issued by the Department of Aging or the individual has been terminated or excluded from participation in the Medical Assistance (MA) Program or any other federally funded health care program, the Grantee shall not assign that individual to any Commonwealth service program, shall remove any access privileges already given to the employee and shall not permit that employee access unless the Department consents to the access, in writing, prior to the access. The Department may withhold its consent in its complete discretion. In its discretion, the Department may terminate the contract for cause for the failure of the Grantee to comply with the terms of this paragraph.

IV-4 Reports and Project Control

The Grantee must submit all specified reports electronically in Microsoft® Word™ or Microsoft Excel™ versions that are certified by Microsoft to be compatible with Office XP, Service Pack 3. Payment for each report and deliverable will be made upon successful completion by the Grantee and acceptance by the Department.

This section outlines the minimum reports the Grantee must submit to the Department. In addition, the Grantee must confer with the Department to determine additional reports that would be of use to the Department and generate other relevant reports identified by the Department throughout the duration of the grant. Estimated deliverable due dates have been included in this

RFA for planning purposes. Final due dates will be mutually agreed upon after the grant is awarded.

b. **Reports**

- i) **Specialized Services Plan.** The vendor of the specialized services must submit to the OLTL the Specialized Services Consumer Reporting Form (see Attachment No. 24) for each resident/individual for the upcoming fiscal year by June 1. Additionally, this report is to be submitted monthly.
- ii) **Peer Counselors for Evaluation of Durable Medical Equipment.** The required monthly report, Peer Counselor DME Monthly Report Form (see Attachment Nos. 25 and 26) is due to the OLTL by the 15th day of the following month.
- iii) **Personnel Training.** The Grantee will report on staff training quarterly using the Quarterly Personnel Training Report (Attachment No. 27)

c. **Status Report.** A periodic quarterly progress report covering activities, problems and recommendations. This report should be keyed to the work plan the Offeror developed in its proposal, as amended or approved by OLTL. The status report must address each grant objective. In addition to the above, the status report must include:

- i) **Specialized Services Plan.** Statistical data showing the number of consumers served the average dollar amount per consumer for specialized services, alternative living arrangements activities, trends observed, and other relevant information that can be used to improve the program.
- ii) **Peer Counselors for Evaluation of Durable Medical Equipment.** Statistical results showing the number of consumers visited, the number of DME obtained, trends observed, and other relevant information that can be used to improve the program.

d. **Problem Identification Report.** An “as required” quarterly report, identifying problem areas. The report should describe the problem and its impact on the overall project and on each affected task. It should list possible courses of action with advantages and disadvantages of each, and include Offeror recommendations with supporting rationale.

e. **Deliverables for PCEDME.** Training manual for peer counselors for OLTL prior approval; a schedule of training sessions; a schedule of staff meetings with peer counselors; procedures for monitoring peer counselors; procedures for attending monthly meetings with OLTL; and procedures for the submission of forms and reports to OLTL. The training manual must include:

- i) An introduction to the Independent Living Philosophy;

- ii) An overview of the PCEDME Program;
- iii) A review of the Peer Counselor's role and duties;
- iv) A review of the required forms and tasks, including instructions for completion and submittal;
- v) Guidelines on how to successfully communicate with residents and program participants;
- vi) Information on the types of DME available and how they can assist residents and program participants; and
- vii) Additional information at the Grantee's discretion.

f. **Final Report.**

- i) Abstract or summarize the result of the services in terminology that will be meaningful to management and others generally familiar with the subject areas.
- ii) Describe data collection and analytical and other techniques used during the services.
- iii) Summarize findings, conclusions and recommendations developed in each task.
- iv) Include all supporting documentation; e.g., flow-charts, forms, questionnaires, etc.
- v) Recommend a time-phased work plan for implementing the recommendations.

**PART V
ACRONYMS**

ALA	Alternate Living Arrangement
CAO	County Assistance Office
CSPPPD	Community Services Program for Persons with a Physical Disability
DGS	Department of General Services
HCBS	Home and Community Based Services
HIPAA	Health Insurance Portability and Accountability Act
IRS	Internal Revenue Service
MA	Medical Assistance/Medicaid
NF	Nursing Facility
NHA	Nursing Home Administrator
NHT	Nursing Home Transition
OBRA	Omnibus Reconciliation Act
OLTL	Office of Long Term Living
ORC	Other Related Condition
PASARR	Pre-Admission Screening Resident Review
PCEDME	Peer Counselor for the Evaluation of Durable Medical Equipment
PO	Purchase Order
PSP	Pennsylvania State Police
RFA	Request for Application
RFQ	Request for Quote
SFY	State Fiscal Year
SSP	Specialized Services Plan
The Department	Department of Public Welfare
TTY	Text Telephone