



TEXAS
Health and Human Services

Dr. Courtney N. Phillips, Executive Commissioner

Request for Applications (RFA)

For

**Children with Special Health Care Needs Systems
Development Group**

RFA No. HHS0003157

Date of Release: Wednesday, February 13, 2019

Responses Due: Wednesday, March 27, 2019

**NIGP Class/Item Codes: 948-48
Health Care Services (Not Otherwise Classified)**

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ARTICLE 1. EXECUTIVE SUMMARY, DEFINITIONS, AND AUTHORITY

1.1 EXECUTIVE SUMMARY

The State of Texas, by and through the Texas Health and Human Services Commission (HHSC), on behalf of the Department State of Health Services (DSHS) seeks to implement the Children with Special Health Care Needs Systems Development Group grant program. The CSHCN Systems Development Group is supported by Title V of the Social Security Act, CFDA 93.994 from the Maternal and Child Health Services Block grant, and Texas Systems Development Group for Children with Special Health Care Needs authorized by the Texas Health and Safety Code Chapter 35. Through the Children with Special Health Care Needs Systems Development Group grant program, HHSC will award grants to local Texas communities to provide leadership in assessing, prioritizing, and addressing the health needs of children/youth with special health care needs in Texas, to promote the health of families through advocacy and education and to ensure access to high-quality, community-based, preventive, primary and specialty health care within the specifications contained in this Request for Applications (RFA).

To be considered for award, Respondents must execute **Exhibit A, Affirmations and Solicitation Acceptance**, of this Solicitation and provide all other required information and documentation as set forth in this Solicitation.

1.2 DEFINITIONS

Refer to **Appendix A, HHSC Grantee Uniform Terms and Conditions** for additional definitions. Additionally, as used in this Solicitation, unless the context clearly indicates otherwise, the following terms and conditions have the meanings assigned below:

"Addendum" means a written clarification or revision to this Solicitation issued by the DSHS.

"Apparent Awardee" means an organization that has been selected to receive a grant award through response to this RFA but has not yet executed a grant agreement or contract. May also be referred to as "Apparent Grant Recipient" or "Apparent Grantee."

"Care Coordination" means the process that facilitates the linkage of children/youth and their families with appropriate services and resources in a coordinated effort to achieve good health. Care coordination addresses potential gaps in meeting an individual's interrelated medical, social, developmental, behavioral, educational, and informal support system and financial needs in order to achieve optimal health, wellness or end-of-life outcomes, according to an individual's preferences. The medical home is the optimal setting for care coordination.

“Case Management” means services that will assist individuals in gaining access to needed medical, social, educational, and other services. Supporting documentation of case management activities include documentation of a visit with the case manager and completed intake for enrollment in case management services, needs assessment, individual service plan and updated progress notes. For children/youth and families who have had a case management assessment in the previous fiscal year, supporting documentation includes an annual update to the individual service plan and ongoing progress notes updates.

“Children with Medical Complexity” means children/youth with special health care needs with multiple, significant chronic health problems that affect multiple organ systems; resulting in functional limitations and high health care need or utilization; and, often the need for or use of medical technology.

“Children/Youth with Special Health Care Needs (CYSHCN)” means children/youth who have or are at risk for chronic physical, developmental, behavioral or emotional conditions and who also require health and related services of a type or amount beyond that generally required by children/youth.

“Client” means a member of the target population to be served by the Respondent's organization. For the purposes of this grant, a client is Children/youth with special health care needs up to age 21, their families, and individuals of any age with cystic fibrosis.

“Community-based” means being responsive to identified needs in the community and providing services as near to the child’s/family’s home as possible.

“Cost Reimbursement” means a payment mechanism by which contractors are reimbursed for allowable costs incurred up to the total award amount specified in the contract. Costs must be incurred in carrying out approved activities, and must be based on an approved eight -category line-item (categorical) budget. Amounts expended in support of providing services and goods, if any, in accordance with the contract terms and conditions must be billed on a monthly basis for reimbursement unless otherwise specified in the contract. Reimbursement is based on actual allowable costs incurred that comply with the cost principles applicable to the grant.

“Cultural Sensitivity” means organized to be sensitive to a family’s cultural roots; competent to serve culturally diverse groups; able to honor and respect culturally-related beliefs, traditions, values, interpersonal styles, attitudes, and behaviors.

“Disparity” means the condition of being unequal and refers to the difference in outcomes and conditions that exist among specific groups as compared to other groups due to unequal treatment or services. A health disparity is a particular type of health difference closely linked with social or economic disadvantage. Health disparities adversely affect people who have experienced greater social or economic obstacles to health based on their racial or ethnic group, religion, socioeconomic status, gender, mental health, disability or other characteristics historically linked to discrimination or exclusion.

“Disproportionality” means the overrepresentation of a particular race or cultural group in a program or system compared to their representation in the general population.

“Family-centered” means the recognition of the importance of the family as the focus of planning and service delivery; the promotion of parent and professional collaboration; a response to family needs; the recognition of individual and family strengths; respect for diversity of families and the promotion of family choice.

“Family Supports and Community Resources” means services and items that are above and beyond the scope of usual needs necessitated by a child’s physical, developmental, behavioral or emotional health needs, and directly support the child living in his/her natural home and participating in family life and community activities.

“Health and Human Services Commission” or “HHSC” means the administrative agency established under Chapter 531, Texas Government Code or its designee.

“HUB” means Historically Underutilized Business, as defined by Section 2161.001(2) of the Texas Government Code.

“Inclusive” means settings in which all children/youth, some of whom are children/youth with special health care needs, may participate in activities together with the necessary accommodations and supports. Activities are intended to provide a means of promoting involvement of all children/youth and their families.

“Information & Referral” means providing general information regarding community resources. Information & Referral may not require additional follow-up.

“Key Personnel” means a Respondent organization's Project Contact, Fiscal Contact, and Executive Director and/or any other key stakeholders in the Proposed Project.

“Natural Supports” means supports that occur naturally within an individual’s environment. These are not paid supports or those intentionally developed by a person or system. Some examples of natural supports are one’s family, friends, neighbors, and faith-based community members.

“Person-centered planning” means an event or process to capture this learning about a person to plan and focus supports for that person.

“Person-centered practices” means a set of practices used in supporting people to have positive control over their lives. Practices include, but are not limited to, person-centered thinking and person-centered planning.

“Person-centered thinking” means a set of skills needed to guide thinking to take advantage of everyday learning about what is important to and for a person, as well as prepare for action planning. Person-centered planning is an event or process to capture this learning about a person to plan and focus supports for that person.

“Positive Behavioral Supports” means a set of research-based strategies used to improve quality of life and decrease challenging behaviors that may keep a child from reaching his or her full potential.

"Project" means the work and activities for which grant funding is awarded and information is provided as part of the response to this Solicitation. During the open application period and before selection of grant recipients are made, the Project will be known as the Proposed Project.

“Respite services” means a temporary break that provides short-term relief for families and primary caregivers to restore and strengthen their abilities to provide care for children/youth with special health care needs. Respite services may be provided in “in-home” or “out-of-home” settings.

"Respondent" means the entity responding to this Solicitation. May also be referred to as "Applicant."

“Self-determination” means a concept reflecting the belief that all individuals have the right to direct their own lives.

“Social Determinants” means the circumstances in which people are born, grow up, live, work and age, and the systems put in place to address illness. These circumstances are in turn shaped by a wider set of forces: economics, social policies, and politics.

"Solicitation" means this Request for Applications including any Exhibits and Addenda, if any.

“Specialized child care and extracurricular activity costs” means costs above and beyond the cost for typical child care related to the child’s disability or medical diagnosis. Funds should cover the cost of those services that allow the child to participate in inclusive child care support provided through respite care services and/or extracurricular activities.

"State" means the State of Texas and its instrumentalities, including HHSC, the DSHS and any other state agency, its officers, employees, or authorized agents.

"Successful Respondent" means an organization that receives a grant award as a result of this RFA. May also be referred to as "Grantee," "Awarded Applicant," "Sub recipient" or "Grant Recipient."

“Transition” means a person-directed or family-directed, outcome-oriented process that facilitates coordinated activities and supports for a child or youth with special health care needs; a process that leads to successful movement from pediatric to adult health care and may also assist in moving from school to work, and/or from living with family to living independently.

“UGMS” means the Uniform Grant Management Standards (UGMS) that are the standards included in Texas Administrative Code, Title 1 Administration, Chapter 5, Budget and Planning Office, Subchapter A Federal and intergovernmental Coordination, concerning uniform grant management standards for state agencies.

“Work Plan” means an annually-submitted plan that describes how services will be delivered to the eligible population and includes specifics such as what types of clients will be served, who will be responsible for the work, timelines for completion of activities, and how services will be evaluated when complete. Details from the work plan must be approved by DSHS and incorporated in the contract, by reference.

1.3 AUTHORITY

The DSHS is requesting applications under and governed by Title V of the Social Security Act, CFDA 93.994 from the Maternal and Child Health Services Block grant, and Texas Systems Development Group for Children with Special Health Care Needs authorized by the Texas Health and Safety Code Chapter 35.

ARTICLE 2. SCOPE OF WORK/SPECIFICATIONS

2.1 PROGRAM BACKGROUND

The Children with Special Health Care Needs (CSHCN) Systems Development Group works to strengthen community-based services to improve systems of care for Children and Youth with Special Health Care Needs (CYSHCN) and their families in Texas. Selected Respondents will provide services under one or both of the following program components:

- A. Component A: Case Management (CASE)** which are services to provide through in-depth assessment and planning, in partnership with families, CSHCN Systems Development Group’s case management contractors will provide family-centered, comprehensive case management across systems, ongoing support, and follow-up to families of children/youth with special health care needs in identifying and accessing needed services. Form G3: Case Management Required and Proposed Performance Measures of the RFA details the expectations of funded case management contractors.
- **Eligible Population:** Selected Respondents will serve children/youth with special health care needs up to age 21, their families, and individuals of any age with cystic fibrosis. Funds will be used only for case management where other appropriate funding resources are not available to the child/youth and family. Children/youth eligible for case management directly through other funding sources or Medicaid, Medicaid Waivers such as Community Living Assistance and Support Services (CLASS), Early Childhood Intervention (ECI) or other state programs must be served first with those funding resources. Successful respondents may also be required to provide services to children/youth referred by the DSHS Regional Manager of Specialized Health and Social Services.
 - Respondents may develop applications for projects focusing on using a particular model of case management, such as a parent case management or case management in conjunction with a hospital or medical provider.
 - DSHS expects that the primary population of focus will be those children/youth with special health care needs. However, Respondents may choose to define and target a specific subset of this population, such as children/youth with medical complexity or children/youth with a specific diagnosis.

B. Component B: Family Supports and Community Resources (FSCR) which are services to provide support for a wide range of activities including respite services, community-based crisis prevention and intervention planning and implementation, educational trainings/workshops, recreational and fitness programs, parent to parent networking and support, and other activities that support children/youth with special health care needs and their families living in the community.

- **Eligible Population.** Selected Respondents will serve children/youth with special health care needs up to age 21, their families, and individuals of any age with cystic fibrosis. Funds will not be used for family supports or community resources that duplicate those currently available to a child/youth with special health care needs or his/her family in the community or that are covered by another payment source, such as services covered through public or private health care coverage, Medicaid, Medicaid waivers or other local resources.

2.2 GRANT AWARD AND TERM

The total amount of federal funding available for the CSHCN Systems Development Group is approximately \$11,100,000.00 and it is DSHS's intention to make multiple awards to eligible Respondents.

The grant funding period for this grant will be a 12-month budget period. It is anticipated that the grant funding period for this program will begin **September 1, 2019**, through **August 31, 2020**. Separate awards will be made based on the awarded funding opportunity. DSHS has the option, in its sole discretion, to renew the Contract. If renewed, there is up to four (4) additional one-year period available for Case Management (CASE), and up to four (4) additional one-year periods for Family Supports Community Resources (FSCR).

DSHS is not responsible for payment under this Contract before both parties have signed the Contract or before the start date of the Contract, whichever is later. Reimbursement will only be made for those allowable expenses that occur within the term of the grant. No pre-award spending will be allowed.

Grants awarded as a result of this RFA will be funded on a cost reimbursement basis. Under the cost reimbursement method of funding, grant recipients are required to finance operations with their own working capital with grant payments made by HHSC to reimburse the grant recipients for actual cash disbursements to be supported by adequate documentation.

Funding may vary and is subject to change each renewal.

Contracts awarded under this RFA and any anticipated contract renewals are contingent upon the continued availability of funding. DSHS reserves the right to alter, amend or withdraw this RFA at any time prior to the execution of a contract if funds become unavailable through lack of appropriations, budget cuts, transfer of funds between programs or agencies, amendment of the appropriations act, health and human services agency consolidations, or any other disruption of current appropriations. If a contract has been fully executed and these circumstances arise, the provisions of the Termination Article in the contract Uniform Terms and Conditions will apply.

2.3 ELIGIBLE APPLICANTS

Eligible Respondents must comply with the criteria listed below:

1. Respondent must be a governmental entity, non-profit, clinic, or hospital.
2. If applicable, organizations submitting a request for application must agree that they are in compliance with Title V of the Social Security Act, CFDA 93.994 from the Maternal and Child Health Services Block grant, and Texas Systems Development Group for Children with Special Health Care Needs authorized by the Texas Health and Safety Code Chapter 35.
3. Respondent must be established as an appropriate legal entity as described in the statement above, under state statutes and must have the authority and be in good standing to do business in Texas and to conduct the activities described in the RFA.
4. Respondent must have a Texas business address. A post office box may be used when the application is submitted, but the respondent must conduct business at a physical location in Texas prior to the date that the contract is awarded.
5. Respondent must be in good standing with the U.S. Internal Revenue Service.
6. Respondent is not eligible to apply for funds under this RFA if currently debarred, suspended, or otherwise excluded or ineligible for participation in Federal or State assistance programs.
7. Respondent may not be eligible for contract award if audit reports or financial statements submitted with the application identify concerns regarding the future viability of the contractor, material non-compliance or material weaknesses that are not satisfactorily addressed, as determined by DSHS.
8. In compliance with Comptroller of Public Accounts and Statewide Procurement Division rules, a name search will be conducted using the websites listed in this section prior to the development of a contract.

A respondent is not considered eligible to contract with DSHS, regardless of the funding source, if a name match is found on any of the following lists:

- a) The General Services Administration's (GSA) System for Award Management (SAM) for parties excluded from receiving federal contracts, certain subcontracts and from certain types of federal financial and non-financial assistance and benefits. <https://www.sam.gov/SAM/>
- b) The Office of Inspector General (OIG) List of Excluded Individuals/Entities Search– State–<https://oig.hhsc.state.tx.us/Exclusions/search.aspx>; and
- c) Texas Comptroller of Public Accounts (CPA) Debarment List located at <https://comptroller.texas.gov/purchasing/programs/vendor-performance->

[tracking/debarred-vendors.php](#) . If this web link does not open, copy and paste to your internet browser window.

9. Respondents **must be** listed on the following list if they are Professional Corporations, Professional Associations, Texas Corporations, and/or Texas Limited Partnership Companies. Secretary of State (SOS) at <https://direct.sos.state.tx.us/acct/acct-login.asp>.
10. Contractor must have access to or maintain a computer, e-mail, and the internet throughout the contract period.

Respondent is not considered eligible to apply unless the Respondent meets the eligibility conditions to the stated criteria listed above at the time the application is submitted. Respondent must continue to meet these conditions throughout the selection and funding process. DSHS expressly reserves the right to review and analyze the documentation submitted and to request additional documentation, and determine the Respondent's eligibility to compete for the contract award.

2.4 PROGRAM REQUIREMENTS

This RFA contains the requirements that all Respondents must meet to be considered for contracts under this RFA. All selected Respondents must comply with the following requirements.

1. Respondent shall submit an annual work plan. The work plan shall:
 - A) Demonstrate and document progress in all components and must be approved by DSHS.
 - i. If progress on activities is delayed, an explanation must be provided in the appropriate reports to DSHS.
 - ii. If there is a significant delay in submitting the required documentation, DSHS may adjust the amount of the allocation at any point in the fiscal year.
2. Respondent shall attend and participate in all CSHCN Systems Development Group's Contractor conference calls including regularly scheduled quarterly teleconferences, which includes updates and technical assistance. If primary contact cannot participate in a call, DSHS shall be notified with the name of who will attend the conference call in their place.
3. Respondent shall meet quarterly in-person or via conference call with the DSHS Regional Manager of Specialized Health and Social Services or his/her designee to exchange information on project activities; and,
4. Respondent shall follow the principles and best practices imparted in the CSHCN SDG trainings at all times, as directed by CSHCN Systems Development Group.
5. Provide services in compliance with all applicable federal and state laws, rules, regulations, standards and guidelines including, but not limited to, the following:
 - i. RFA and the Respondent's response;
 - ii. DSHS On-Site Monitoring Visits.
6. Respondent shall accept technical assistance with DSHS staff to apply policy, coordinate services, and assure quality.

7. Selected Respondents shall submit in writing quarterly progress reports to the CSHCN Systems Development Group within thirty (30) days of the end of each quarter. Quarterly reports will document:
 1. Progress toward achieving program-specific performance measures;
 2. Work Plan; and
 3. Data as required by the CSHCN Services Program.
8. In the event of staff vacancies, Respondent shall notify DSHS program in writing within ten (10) business days of the position(s) becoming vacant.
9. Respondent shall notify DSHS within ten (10) business days in writing of any change affecting Contractor's identity, ownership or control, name, governing board, vendors, medical or program director, or address.
10. DSHS shall serve as the payor of last resort, Children/youth eligible through Medicaid must be served with those resources first.
11. No one shall be denied services on the basis of inability to pay.
12. Respondent shall establish, maintain and keep current program and personnel policies, procedures and staff development/training for employees and volunteers.
 - i. Policy and procedures additional requirements include, but are not limited to:
 - a. Policies regarding selection and dismissal of staff, volunteers, and others delivering or coordinating services under the provider's direction;
 - b. Procedures for verifying staff/volunteer qualifications;
 - c. Policies which forbid abuse, neglect, or exploitation of children/youth; and
 - d. Policies that inform all personnel of the legal requirement to report witnessed or suspected abuse, neglect, or exploitation.
 - ii. Program and personnel policies and procedures will be well organized and easily accessible to DSHS staff upon request.
13. Personnel Requirements
 - a. Program Director shall have the following qualifications:
 - i. A master's degree in social work, nursing, education or related field and two years of experience in case management services within community programs serving the maternal, child and adolescent population; or
 - ii. A bachelor's degree in social work, nursing, education or related field and four years of experience in case management services within community programs serving the maternal, child and adolescent population.
 - b. Case Manager shall have the following qualifications:
 - i. Social Worker or Registered Nurse with a master's/or bachelor's degree in Social Work or Nursing with licensure appropriate for their practice and one year of experience providing case management services within community programs serving the maternal, child, and adolescent population; or

- ii. Family member of a child/youth with special health care needs with successful and extensive experience serving as their child/youth’s case manager and documented appropriate education or training related to case management. Qualifications must be specific to the job description and maybe reviewed. DSHS will have final authority whether someone under this Subsection is qualified as a case manager; or
- iii. Other qualified individuals with extensive and documented successful experience working in community programs serving children/youth with special health care needs. Qualifications must be specific to the job description and will be reviewed. DSHS will have final authority whether someone under this Subsection is qualified as a case manager.

ARTICLE 3. ADMINISTRATIVE INFORMATION

3.1 SCHEDULE OF EVENTS

EVENT	DATE/TIME
Solicitation Release Date	Wednesday, February 13, 2019
Deadline for Submitting Questions	Monday, February 25, 2019
Deadline for submission of Solicitation Responses [NOTE: Responses must be RECEIVED by HHSC by the deadline.]	Wednesday, March 27, 2019 @ 2:00 pm CST
Anticipated Notice of Award	Friday, July 26, 2019
Anticipated Contract Start Date	Sunday, September 1, 2019

Note: These dates are a tentative schedule of events. DSHS reserves the right to modify these dates at any time upon notice posted to the HHS Grants website. Any dates listed after the Solicitation Response deadline will occur at the discretion of the DSHS and may occur earlier or later than scheduled without notification on the HHS Grants website.

3.2 CHANGES, AMENDMENT OR MODIFICATION TO SOLICITATION

DSHS reserves the right to change, amend or modify any provision of this Solicitation, or to withdraw this Solicitation, at any time prior to award, if it is in the best interest of DSHS and will post such on the HHS Grants website. It is the responsibility of Respondent to periodically check the HHS Grants website to ensure full compliance with the requirements of this Solicitation.

3.3 IRREGULARITIES

Any irregularities or lack of clarity in this Solicitation should be brought to the attention of the Point of Contact listed in **Section 3.4.1** as soon as possible so corrective addenda may be furnished to prospective Respondents.

3.4 INQUIRIES

3.4.1 Point of Contact

All requests, questions or other communication about this Solicitation shall be made in writing to the person listed below. All communications between Respondents and other DSHS staff members concerning the Solicitation are strictly prohibited, unless noted elsewhere in this RFA. **Failure to comply with these requirements may result in disqualification of Respondent's Solicitation Response.**

Name: Colette Norman, CTCD, CTCM
Title: Purchaser
Address: 1100 W. 49th Street, Mail Code 2020
Phone: 512/406-2567
Email: lisa.freeman@hhsc.state.tx.us (on behalf of Colette Norman)

3.4.2 Prohibited Communications

All communications between Respondents and other DSHS staff members concerning the Solicitation are strictly prohibited. On issuance of this Solicitation, except for the written inquiries described in **Section 3.4.1** above, DSHS, its representative(s), or partners will not answer any questions or otherwise discuss the contents of this Solicitation with any potential Respondent or their representative(s). This restriction does not preclude discussions between affected parties for the purposes of conducting business unrelated to this Solicitation. **Failure to comply with these requirements may result in disqualification of Respondent's Solicitation Response.**

3.4.3 Questions

DSHS will allow written questions and requests for clarification of this Solicitation. Questions must be submitted in writing and sent by U.S. First class mail or email to the Point of Contact listed in **Section 3.4** above. Respondents' names will be removed from questions in any responses released. Questions shall be submitted in the following format. Submissions that deviate from this format may not be accepted:

- A. Identifying Solicitation number
- B. Section Number
- C. Paragraph Number

- D. Page Number
- E. Text of passage being questioned
- F. Question

Note: Questions or other written requests for clarification must be received by the Point of Contact by the deadline set forth in Section 3.4 above. Please provide entity name, address, phone number, e-mail address, and name of contact person when submitting questions.

3.4.4 Clarification request made by Respondent

Respondents must notify the Point of Contact of any ambiguity, conflict, discrepancy, exclusionary specifications, omission or other error in the Solicitation in the manner and by the deadline for submitting questions.

3.4.5 Responses

Responses to questions or other written requests for clarification will be posted on the HHS Grants website. The DSHS reserves the right to amend answers prior to the deadline for submission of Solicitation Responses. Amended answers will be posted on the HHS Grants website. It is Respondent's responsibility to check the HHS Grants website.

3.5 SOLICITATION RESPONSE COMPOSITION

3.5.1 All Applications must be:

1. Clearly legible;
2. Sequentially page-numbered and include the respondents name at the top of each page;
3. Organized in the sequence outlined in **Article 9** - Submission Checklist;
4. In Arial or Times New Roman font, size 12 or larger for normal text, no less than size 10 for tables, graphs, and appendices;
5. Blank forms provided in the Attachments must be used (electronic reproduction of the forms is acceptable; however, all forms must be identical to the original form(s) provided); do not change the font used on forms provided;
6. Correctly identified with the RFA number and submittal deadline;
7. Responsive to all RFA requirements; and
8. Signed by an authorized official in each place a signature is needed (copies must be signed but need not bear an original signature).

3.5.2 Solicitation Submission

1. Administrative Information, including all forms;
2. Narrative Application, including all forms;
3. Expenditure Application; and
4. Applicable Exhibits and Required Forms.

Paper documents (i.e. the original and all hard copies) must be separated by parts. Electronic submissions must be separated by electronic medium used for submission (i.e. flash drive).

The entire Solicitation Response – all separated paper documents and electronic copies – must then be submitted in one package to HHSC at the address listed in **Section 3.6.3**. The number of copies and directions for submitting an “Original” and “Copies” are outlined in **Article 9**.

3.6 SOLICITATION RESPONSE SUBMISSION AND DELIVERY

3.6.1 Deadline

Solicitation Responses must be received at the address in **Section 3.6.3** time-stamped by HHSC no later than the date and time specified in **Section 3.1**.

3.6.2 Labeling

Solicitation Responses shall be placed in a sealed box and clearly labeled as follows:

SOLICITATION NO:	HHS0003157
SOLICITATION DUE DATE & TIME:	Wednesday, March 27, 2019 @ 2:00pm CST
RESPONDENT’S NAME:	
PURCHASER’S NAME:	Colette Norman

DSHS will not be held responsible for any Solicitation Response that is mishandled prior to receipt by the Health and Human Services Commission Procurement and Contracting Services. It is Respondent's responsibility to mark appropriately and deliver the Solicitation Response to HHSC by the specified date and time.

3.6.3 Delivery

Respondent must deliver Solicitation Responses by one of the methods below to the address noted. Solicitation Responses submitted by any other method (e.g. facsimile, telephone, email) will NOT be considered.

To be delivered by U.S. Postal Service, overnight or express mail, or hand delivery to:

HHSC Procurement and Contracting Services (PCS)

Attn: **Bid Room Coordinator**
1100 W. 49th Street, MC 2020
Service Building (Building S)
Austin, Texas 78756

Note: All Solicitation Responses become the property of HHSC after submission and will not be returned to Respondent.

3.6.4 Alterations, Modifications, and Withdrawals

Prior to the Solicitation submission deadline, a Respondent may: (1) withdraw its Solicitation Response by submitting a written request to the Point of Contact identified in **Section 3.4.1**; or (2) modify its Solicitation Response by submitting a written amendment to the Point of Contact identified in **Section 3.4.1**. DSHS may request Solicitation Response Modifications at any time.

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ARTICLE 4. SOLICITATION RESPONSE, EVALUATION AND AWARD PROCESS

4.1 GENERALLY

A three-step selection process will be used:

- 1 Eligibility screening;
- 2 Evaluation based upon specific selection criteria;
- 3 Final Selection based upon State priorities.

4.2 ELIGIBILITY SCREENING

Applications will be reviewed for minimum qualifications and completeness. All complete applications meeting the minimum eligibility requirements will move to the Evaluation stage.

4.3 EVALUATION

Applications will be evaluated and scored in accordance with this Request for Application using **Exhibit B, Evaluation Score Sheet**.

4.3.1 Specific Selection Criteria

Each funding opportunity will be evaluated separately and responses to this RFA shall be evaluated based upon:

- A) Narrative Information (Forms E, F, I, J) - 15%
- B) Case Management Work Plan & Performance Evaluation (Forms G1, G2, G3) - 35%
- C) FSCR Work Plan and Evaluation (Forms H1, H2, H3) – 35%
- D) Expenditure Information & Contact Information (Form K) - 15%

4.4 FINAL SELECTION

DSHS intends on making multiple awards under each funding opportunity. After initial screening for eligibility, response completeness, and initial scoring of the elements listed above in **Section 4.3.1**, a selection committee will look at all eligible applicants to determine which applications should be awarded in order to most effectively accomplish state priorities.

4.5 NEGOTIATION AND AWARD

The specific dollar amount awarded to each successful Applicant will depend upon the merit and scope of the Response, the recommendation of the Selection Committee, and the requirements of Title V of the Social Security Act. Final funding decisions are at the sole discretion of the HHSC. Not all Applicants who are deemed eligible to receive funds are assured of receiving an award.

The negotiation phase will involve direct contact between the successful Applicant and HHSC and DSHS representatives via phone and/or email. During negotiations, successful Applicants may expect:

- a) An in-depth discussion of the submitted application and budget; and
- b) Requests from HHSC for clarification or additional detail regarding submitted Application.

The final funding amount and the provisions of the contract will be determined at the sole discretion of DSHS staff.

Any exceptions to the requirements, terms, conditions, or certifications in the RFA or attachments, addendums, or revisions to the RFA or Uniform Terms and Conditions, sought by the Respondent must be specifically detailed in writing by the Respondent on Appendix D: Exceptions in this application and submitted to HHSC for consideration. HHSC will accept or reject each proposed exception. HHSC will not consider exceptions submitted separately from the Applicant's application or at a later date.

HHSC will post to the HHS Grants website and may publicly announce a list of Respondents whose responses are selected for final award. This posting does not constitute HHSC's agreement with all the terms of any Applicant's application and does not bind HHSC to enter into a contract with any Applicant whose award is posted.

4.6 QUESTIONS OR REQUESTS FOR CLARIFICATION

HHSC reserves the right to ask questions or request clarification from any Respondent at any time during the solicitation process.

ARTICLE 5. NARRATIVE APPLICATION

5.1 NARRATIVE APPLICATION

5.1.1 Executive Summary

Provide a high-level overview of the Respondent's approach to meeting the RFA's requirements on Form E. The summary must demonstrate an understanding of the goals and objectives of the grant.

ARTICLE 6. REQUIRED RESPONDENT INFORMATION

6.1 ADMINISTRATIVE ENTITY INFORMATION

Respondent must provide satisfactory evidence of its ability to manage and coordinate the types of activities described in this Solicitation. As a part of the Solicitation Response requested in **Article 3**, Respondent must provide all requested information in this RFA. Respondent must complete the applicable Forms A-J along with the required Exhibits to be considered.

6.2 LITIGATION AND CONTRACT HISTORY

Respondent must include in its Solicitation Response a complete disclosure of any alleged or significant contractual failures.

In addition, Respondent must disclose any civil or criminal litigation or investigation pending over the last five (5) years that involves Respondent or in which Respondent has been judged guilty or liable. Failure to comply with the terms of this provision may disqualify Respondent.

Solicitation Response may be rejected based upon Respondent's prior history with the State of Texas or with any other party that demonstrates, without limitation, unsatisfactory performance, adversarial or contentious demeanor, or significant failure(s) to meet contractual obligations.

6.3 CONFLICTS

Respondent must certify, as part of attached **Appendix B**, that it does not have any personal or business interests that present a conflict of interest with respect to the RFA and any resulting contract. Additionally, if applicable, the Respondent must disclose all potential conflicts of interest. The Respondent must describe the measures it will take to ensure that there will be no actual conflict of interest and that its fairness, independence and objectivity will be maintained. DSHS will determine to what extent, if any, a potential conflict of interest can be mitigated and managed during the term of the contract. Failure to identify actual and potential conflicts of interest may result in disqualification of a Solicitation Response or termination of a contract.

Please include any activities of affiliated or parent organizations and individuals who may be assigned to this Contract, if any.

6.4 GRANT APPLICATION DISCLOSURE

In an effort to maximize state resources and reduce duplication of effort, HHSC, at its discretion, may require the Respondent to disclose information regarding the application for or award of state, federal, and/or local grant funding by the Respondent or Community Collaborative member organization within the past two years.

6.5 AFFIRMATIONS AND CERTIFICATIONS

Respondent must complete and return the following listed exhibits. Exhibits are listed following **Article 9**.

- A. Exhibit A, Affirmations and Solicitation Acceptance

6.6 HUB

If a successful Respondent chooses to contract for goods and services using the funding awarded through this grant, HHSC encourages the Respondent to use HUBs to provide those goods and services where possible.

ARTICLE 7. EXPENDITURE APPLICATION

7.1 EXPENDITURE APPLICATION

Attached **Form K – Budget Templates** of this RFA includes the template for submitting the Expenditure Application. The Budget Section is required and is posted with this RFA as a separate package on the HHS Grants website. A separate budget must be submitted for each funding opportunity.

Respondents must base their Expenditure Application on the Scope of Work described in **Article 2**. This section should include any business, economic, legal, programmatic, or practical assumptions that underlie the Expenditure Application. HHSC reserves the right to accept or reject any assumptions. All assumptions not expressly identified and incorporated into the contract resulting from this RFA are deemed rejected by HHSC.

Respondents must demonstrate that project costs outlined in the Expenditure Application are reasonable, allowable, allocable, and developed in accordance with applicable state and federal grant requirements.

Respondent must utilize the HHSC template provided, and identify costs to be requested from HHSC and costs to be matched. Costs must be broken out to a degree that is sufficient to determine if costs are reasonable, allowable, and necessary for the successful performance of the project.

Costs will be reviewed for compliance with UGMS.

Costs included in the Expenditure Application will be entered into budget tables and supported by narrative descriptions describing the need for the requested cost and a calculation demonstrating how the cost was arrived at.

ARTICLE 8. GENERAL TERMS AND CONDITIONS

8.1 GENERAL CONDITIONS

8.1.1 Costs Incurred

Respondents understand that issuance of this Solicitation in no way constitutes a commitment by any DSHS to award a contract or to pay any costs incurred by a Respondent in the preparation of a response to this Solicitation. DSHS is not liable for any costs incurred by a Respondent prior to issuance of or entering into a formal agreement, contract, or purchase order. Costs of developing Solicitation Responses, preparing for or participating in oral presentations and site visits, or any other similar expenses incurred by a Respondent are entirely the responsibility of the Respondent, and will not be reimbursed in any manner by the State of Texas.

8.1.2 Contract Responsibility

DSHS will look solely to Respondent for the performance of all contractual obligations that may result from an award based on this Solicitation. Respondent shall not be relieved of its obligations for any nonperformance by its contractors.

8.1.3 Public Information Act

Solicitation Responses are subject to the Texas Public Information Act (PIA), Texas Government Code Chapter 552, and may be disclosed to the public upon request. Subject to the PIA, certain information may be protected from public release. Respondents who wish to protect portions of the Solicitation Response from public disclosure should familiarize themselves with this law. Information pertaining to the Solicitation will be withheld or released only in accordance with the PIA.

8.1.4 News Releases

Prior to final award a Respondent may not issue a press release or provide any information for public consumption regarding its participation in the grant. Requests should be directed to the HHSC Point of Contact Identified in **Article 3**.

8.1.5 Additional Information

By submitting an application, the Respondent grants HHSC the right to obtain information from any lawful source regarding the respondent's and its directors', officers', and employees': (1) past business history, practices, and conduct; (2) ability to supply the goods and services; and (3) ability to comply with contract requirements. By submitting an application, a respondent generally releases from liability and waives all claims against any party providing HHSC information about the respondent. HHSC may take such information into consideration in evaluating applications.

ARTICLE 9. SUBMISSION CHECKLIST

This checklist is provided for Respondent's convenience only and identifies documents that must be submitted with this Solicitation in order to be considered responsive. Any Solicitation Response received without these requisite documents may be deemed nonresponsive and may not be considered for contract award.

9.1 ORIGINAL SOLICITATION RESPONSE PACKAGE

The Solicitation Package must include the “Original” Solicitation Response in **hard-copy** consisting of the four parts described in detail below, each under separate cover but packaged together and clearly labeled “Original” on each.

1. Administrative Information

- a. Form A: Face Page _____
- b. Form B: Table of Contents and Checklist _____
- c. Form C: Contact Person Information _____
- d. Form D: Administrative Information _____
 - D-1 Governmental Entity (if applicable) _____
 - D-2 Nonprofit or for Profit Entity (if applicable) _____

2. Narrative Application

- a. Form E: Executive Summary _____
- b. Form F: Respondent Background _____
- c. Form G1: Case Management Work Plan _____
- d. Form G2: Case Management Program Evaluation _____
- e. Form G3: Case Management Required and Proposed Performance Measures _____
- f. Form H1: FSCR Work Plan _____
- g. Form H2: FSCR Program Evaluation _____
- h. Form H3: FSCR Agency Specific Performance Measures _____
- i. Form H4: FSCR Management Guidelines _____
- j. Form I: Financial Management _____
- k. Form J: Assessment and Project Development _____

3. Expenditure Information

- a. Form K: Budget Templates _____

4. Applicable Appendix and Exhibit

- a. Exhibit A: Affirmation and Solicitation _____
- b. Appendix A: HHSC Uniform Terms & Conditions _____
- c. Appendix B: HHSC Special Conditions _____
- d. Appendix C: DSHS Assurances _____
- e. Appendix D: Exceptions _____

- f. Appendix E: Data Use Agreement _____
- g. Appendix F: Data Use Agreement – Security and Privacy Inquiry _____
- h. Appendix G: Fiscal Federal Funding Accountability and Transparency Act (FFATA) Certification _____













9.2 COPIES OF SOLICITATION RESPONSE PACKAGE






The original application, one (1) additional copy, and one (1) electronic version must be submitted **on or before the due date to the point of contact at the address specified in Section 3.4.1 of this RFA. HHSC will not accept applications by fax or email.**

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ARTICLE 10. PROGRAM SPECIFIC APPENDICES

Forms	Description
Form A – Face Page	 Form A - Face Page.docx
Form B – Application table of contents and checklist	 Form B - Application table of
Form C – Contact Person Information	 Form C - Contact Person Information.
Form D – Administrative Information	 Form D - Administrative Infor
Form D1 – Governmental Entity	 Form D1 Governmental Entity
Form D2 – Non-Profit or For-Profit Entity	 Form D2 Non-Profit or For-Profit Entity.c
Form E – Executive Summary	 Form E - Executive Summary.docx
Form F – Respondent Background	 Form F - Respondent Backgr
Form G1 – Case Management Work Plan	 Form G1 - CASE Management Work
Form G2 – Case Management Program Evaluation	 Form G2 - CASE Management Progr
Form G3 – Case Management Required and Proposed Performance Measures	 FORM G3 - Case Management Requi

Form H1 – FSCR Work Plan	 Form H1 - FSCR Work Plan.docx
Form H2 – FSCR Program Evaluation	 Form H2 - FSCR Program Evaluation.
Form H3 – FSCR Agency Specific Performance Measures table	 Form H3 - FSCR Agency Specific Perf
Form H4 – FSCR Performance Measures Guidelines	 Form H4 - Family Support Community
Form I – Financial Management	 Form I - Financial Management.docx
Form J – Assessment and Project Development	 Form J - Assessment and Project Develop
Form K - Budget Templates	 Form K - Budget Templates.xls
Exhibit A– Affirmations and Solicitations	 Exhibit A - Affirmations and So
Exhibit B - Evaluation Scoring Sheet	 Exhibit B- Evaluation Tool.pdf
Appendix A – HHSC Uniform Terms & Conditions	 Appendix A - HHSC Uniform Terms & Co
Appendix B – HHSC Special Conditions Version 1.1-Grantee	 Appendix B - HHSC Special Conditions \
Appendix C – DSHS Assurances	 Appendix C - DSHS Assurances.pdf

Appendix D- Exceptions	 Appendix D_Exceptions Form_
Appendix E - Data Use Agreement	 Appendix E - Data Use Agreement - Ve
Appendix F - Data Use Agreement – Security and Privacy Inquiry	 Appendix F - Data Use Agreement - Se
Appendix G – Fiscal Federal Funding Accountability and Transparency Act (FFATA) Certification	 Appendix G- FFATA.pdf
Appendix H - Insurance	 Appendix H- Insurance.pdf

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