2024 OAA RFP

Submitted Inquiries and Responses

September 20, 2024

ALLIANCE FOR AGING, INC. 2024 OLDER AMERICANS ACT REQUEST FOR PROPOSAL

THE FOLLOWING ARE INQUIRIES AND THE RESONSES TO THE SUBMITTTED INQUIRIES FOR THE 2024 OLDER AMERICAN'S ACT REQUEST FOR PROPOSAL:

1. Is the funding amount per region divided by each provider (ex. \$30,550.00 / 6 providers) or is the funding amount the total sum each provider will receive if awarded?

<u>Response:</u> The funding allocation is described in Sections B.1, 2, 3, 4, and 5 of the RFP. The funding allocated for each region, categorized by service, represents the total amount designated for each region based on specific services, regardless of the number of providers that ultimately receive a contract award. Because funding is prioritized first to serve existing clients, the funding will likely not be evenly split among the designated providers for a service or bundle of services within a region.

2. For transportation funding, is it only applicable for agencies transporting displaced clients to the assigned meal sites?

<u>Response:</u> No. As described in Section B.1.c.vii., funding is prioritized first to Sub-Title III-C1 Designated Providers and next to Designated Providers offering other center-based services.

3. Since shopping assistance is not an option in the provided services for IIIB, will it be offered as a supportive service under C1 or C2? If so, what is the funding amount available for shopping assistance?

<u>Response:</u> The services offered through this RFP are listed in Sections B.1.a, B.2.a, B.3.a, B.4.a, and B.5.a.

4. For Adult Day Care services, is the selection of regions determined by the location where the services will be provided or by where the client resides? For instance, our Adult Day Care Centers are in zip codes 33125 and 33186, but we serve all of Miami-Dade County or Regions A-F.

<u>Response</u>: For center-based services such as adult day care, regions are determined by the location of the facility, and providers may service clients in that facility that live outside of the region if the location of the facility is more appropriate for the client or caregiver.

5. Under the OAA grant, are providers permitted to reallocate grant funds within the same title and its related services?

<u>Response</u>: Modified spending within each title and sub-title is only permitted within bundled services. Modified spending outside the bundled services will require approval from the Alliance.

6. How does Respite (Facility) differ from Adult Day Care services, given that the RFP lists Adult Day Care Centers as a possible venue for providing Respite (Facility) services?

<u>Response</u>: Appendix A of the DOEA Programs & Services Handbook provides a definition for Adult Day Care and respite (facility) services. You can find the DOEA Programs & Services Handbook, Appendix A here: https://elderaffairs.org/wp-content/uploads/2023-Appendix-A-Service-Descriptions.pdf

7. Miami-Dade County is divided into six regions with corresponding zip codes. Once the grant is awarded, can the budget be used exclusively within the selected regions, or may it be applied countywide?

<u>Response</u>: Funding must be kept within the region awarded.

8. Is there a guideline or policy that determines service eligibility based on ranking after the screening and assessment process has been completed?

<u>Response</u>: Chapter 3, page 13 of the DOEA Programs & Services Handbook addresses OAA targeting requirements._Older Americans Act, Title III funding provides services to persons 60 years of age or older, regardless of income or assets. The OAA mandates that preference be given to providing services to older individuals with the greatest economic or social needs and individuals at risk of institutional placement, with attention to low- income older individuals, including low-income minority older individuals, older individuals with limited English proficiency and older individuals residing in rural areas. Service providers are required to have approved written procedures for prioritizing individuals to receive services when resources are insufficient to meet the demand for services. This chapter provides some indicators that may be used for identifying older persons with a high probability of service needs.

9. For the reference letter from a funding entity, can it be from a program unrelated to our Adult Day Care Centers, such as Head Start or the Children's Trust?

<u>Response:</u> The Applicant must provide at least 1 letter of reference from a funding entity, excluding the Alliance for Aging. The letter of reference must reflect the size and scope of the program, any form of disciplinary action taken, and a reflection of programmatic surplus (including total dollar amount of surplus) to demonstrate proper use of the funding

allocation. The letter of reference should be from the funding entity that funds services similar to those that are being applied for, however it does not have to be a funding source that provides service to older adults.

10. I'm reaching out for assistance; I received e-mail today from the Health Council of South Florida (HCSF) announcing the 2024 Older American Act (OAA) Request for Proposals (RFP) via the Alliance for Aging for a Six (6) year cycle. I have gone through all the RFP but can't seem to find the deadline to submit to the Alliance for Aging. Can you please guide me as to where to find it.

Response: The RFP Timeline is found in Section D.1.k.

11. The RFP states that there is somewhere on the site that you are posting the responses to the FAQs, but I can't seem to find it. Can you please direct me to the responses?

<u>Response:</u> Inquiries and responses can be found via a link on the Alliance for Aging website home page and the Procurement page under "What's Happening".

12. If we intend to submit proposals for both Dade and Monroe counties, are we required to submit two separate proposals—one specific to each county?

<u>Response:</u> No. The Alliance attempted to make this process easier on applicants by making it so that you would only be required to submit one application, regardless of whether you are applying for multiple counties, regions, or services. Please ensure that you identify which counties, regions, and services that are being applied for are to be indicated on the application.

13. Regarding the meal services, the OAA requires a procurement process to secure a caterer. As a new OAA provider, are we allowed to initiate contracts with the current contracted providers or caterers under our existing DOEA/AAA contracts, or are we required to complete the procurement process prior to submitting our RFP response?

<u>Response:</u> Subcontracted services that have been procured in compliance with the DOEA requirements and are already in place may continue to be used.

14. Can we apply for Recreation Services even though we receive funding for similar services through your LSP funding?

Response: Yes

15. Can we still mention screening and assessment in the application even though we are not proposing any registered services? We use screening and assessment to determine eligibility to get transportation services.

<u>Response</u>: Transportation is not a registered service, and it does not require a 701 assessment. Therefore, an applicant would not bill for screening and assessment just to provide transportation services.

16. What is the minimum number of unduplicated clients required for B services?

Response: There is no minimum number of unduplicated clients required.

17. Appendix V provided in Word has [Type here] in the headers section. What text is intended to be inserted?

<u>Response</u>: The inclusion of the [Type here] language in several locations in the header of this RFP is a scrivener's error and should be disregarded. This is reflective in amendment 1 of the RFP posted on the Alliance website.

18. Are there only two appendixes (Appendix II and Appendix III) that we need to complete and sign to include in the submission package or are there other attachments and/or appendixes? If there are other attachments, please clarify.

Response: Appendix V, Service Provider Application, identifies any required documents or signatures that are required.

19. Is there any information we need to enter in the tables contained in Appendix V Table of Contents, Section II.A. General Requirements, 1. Consumer Projections, Profile and Targeting? The tables are pre-filled with data.

Response: These tables are provided for reference.

20. Please clarify whether, to the extent a proposer intends to propose bundled services on a county-wide basis where services are bundled by region, must the applicant submit a separate proposal for each region -- amounting to six (6) separate applications?

<u>Response</u>: Only one application should be submitted in which counties, regions, and services (or service bundle) that are being applied for are to be indicated on the application.

21. Does a proposer need to submit separate applications for Part A-Program (including targeting, prioritization, attestations, narratives, etc.) and Part-B (unit cost grids and match commitment form), as well as a Unit Cost Methodology for each individual region in which

it proposes services? Or can an applicant submit one (1) Part A-Program and (1) Part B-Contract application for all regions identified in the RFP that the applicant is applying for?

<u>Response:</u> Only one application should be submitted which includes Part A and Part B of the application.

22. Please clarify whether the RFP's pagination is inconsistent with the RFP's Table of Contents? In several sections the pagination does not appear to be in the right order, compared with the RFP's Table of Contents. For example, "Older Americans Act Service Delivery System," does not appear to have been numbered, consequently changing the numbering throughout the applications.

Response: Any page number discrepancies will be corrected by amendment.

23. Please clarify why certain items referenced in the RFP appear to be missing, specifically the Section E.3 under Section E of the applications referenced on page 46 of the RFP?

Response: The inclusion of the sentence on Section E.3 on page 46 that reads "In completing Part B (Contract Module) of each application, applicants should consider the evaluation criteria Section E.3 to ensure that all information is included in Part B (Contract Module) and is adequately presented" was an error and should be disregarded. This sentence will be removed by amendment.

24. Is the application format described in the SPA under Outreach (RFP, page 34) applicable to the rest of the RFP? Are there any format requirements for this RFP such as font size, font type, line spacing, word count, page limits, and margins?

<u>Response:</u> Any prescribed format would be listed in the specific question of the SPA. If there is no reference of limitations in a particular question it means that there are no restrictions in font size or page limits for that question. While there may be no page limit in other questions of the application, an Applicant is encouraged to be succinct in its responses in the application while at the same time fully answering the questions.

25. May the proposer request more than one email address in the "Notice of Intent" to receive the link needed for submission of proposals under the RFP?

Response: No, only one email should be submitted as a point of contact for an applicant.

26. Will the Alliance for Aging be updating the Attestation of Compliance-Employer form in the RFP packet, currently dated July 2023, with the revised Attestation of Compliance-Employer form previously issued to providers by the Alliance for Aging, dated October 2023?

<u>Response:</u> The contract in the RFP is a sample contract. Any forms or requirements will be updated at the time contracts are issued.

27. Will volunteer hours be valued at the national volunteer rate for purposes of the RFP, currently valued at \$31.61, as is customary for government program procurements?

Response: Yes

28. Given that the RFP does not require proposers to provide a Unit Cost Methodology in order to substantiate and support rates proposed in the Unit Cost Grid, how will the Alliance ensure that proposed rates are in conformity with the funding rates identified in the RFP and in conformity with the methodology prescribed by the Florida Department of Elder Affairs?

<u>Response:</u> As per section C.1.g. of the RFP: "Pending the selection of an Applicant to provide services, the selected Applicant must provide a complete and accurate Unit Cost Methodology to the Alliance. The unit rate for the services awarded to the selected Applicant will be the unit rate provided by the Applicant in their Service Provider Application or the unit rate provided by the Uniform Cost Methodology, whichever is lower. Unit Cost Methodology training will be provided by the Alliance prior contracting for services."

29. How will the Alliance for Aging confirm its receipt of any questions timely submitted under the RFP by potential proposers under Section D(1)(c) of the RFP?

<u>Response:</u> We believe the question is referring to Section C.1.c. which states that "The Alliance will post its responses to timely received written inquiries on its website, www.allianceforaging.org, by the deadline specified in the Calendar of Events."

30. Will the Alliance provide potential proposers with a copy of the Evaluator's Bid Scoring Instrument, as well as any other tool to be used by reviewers to evaluate, score and rank proposals submitted under the RFP prior to the deadline for submission of proposals under the RFP?

Response: The Evaluation Process is described in Section E of the RFP.

31. The OAA Title III-C2 Proposed Funding Grid (Table B.2.a) contained within the RFP reflects a proposed funding allocation for Kosher Meals-Bundle of \$1,163,500, which is significantly disproportionate to the documented need for this cultural meal type according to a recent and relevant Jewish population study conducted by The Greater Miami Jewish Federation, in which the population age 60+ who identified as Jewish is 37,000 or 6% of the total 604,000 older adult population in Miami-Dade County ages 60+. Please confirm whether the Alliance will be adjusting the proposed funding allocation for Kosher meals to

be consistent with the actual population needs identified above, so that the allocation is closer to \$350,000 versus the proposed \$1.1 million?

<u>Response:</u> The Alliance will not be adjusting the proposed funding allocation for Kosher meals. It should be noted that a Kosher meals contract provider will not exclusively provide meals to Jewish seniors. Funding was applied to ensure clients are not displaced.

32. Pursuant to publicly available data regarding the demographics of Miami-Dade County, the Black (including Afro-American and Caribbean) population age 60+ years and older amounts to 122,000 or 20% of the total population age 60+ in Miami-Dade County. Please confirm whether the Alliance will be adjusting the funding allocations and requirements of the RFP to place a greater emphasis on meeting the cultural/ethnic nutritional needs and meal type preferences of the Black community?

<u>Response:</u> The Alliance will not be adjusting the proposed funding allocations in this RFP. This RFP was developed using the Elder Needs Index score to ensure Regions were developed to reflect an equality of needs in each region. Funding was applied to those regions based first on current client services to ensure clients are not displaced and then evenly allocated to regions.

One of the objectives of the OAA nutrition program is to target older adults who have the greatest economic or social need with attention to low-income minority and rural clients. Menus should be developed with consideration for the Special needs of the elderly; Religious, ethnic, cultural, and regional dietary practices or preferences of clients, if reasonable and feasible; Variety of food and preparation methods including color, combinations, texture, size, shape, taste, and appearance; Seasonal availability of foods; Availability of equipment for food preparation or meal delivery service; and Budget.

33. Is there a page limit on the entire application? The only reference to page limit, double space and font is addressed is in Outreach section.

<u>Response:</u> Any prescribed format would be listed in the specific question of the SPA. If there is no reference of limitations in a particular question it means that there are no restrictions in font size or page limits for that question. While there may be no page limit in other questions of the application, an Applicant is encouraged to be succinct in its responses in the application while at the same time fully answering the questions.

34. With regards to the bundles, which price will be considered for scoring purposes for each bundle in OAA IIIB and OAA IIIE?

<u>Response</u>: Section F.2 of the RFP states that "The score for unit rate within Part B of the application for Service Bundles will be the average of the rates for all services within that bundle."

35. Is there a checklist that will be provided to applicants, of which items should be submitted/uploaded per folder?

<u>Response:</u> There is no check list. Applicants are encouraged to follow the application to ensure all requirements are submitted.

36. The application has a header that indicates type here what information should provider enter in the header?

Response: Answered in question 17.

37. Document should be uploaded in Word or PDF, or does it not matter?

<u>Response:</u> The WORD Document is provided for the convenience of the applicant. However, it does not matter if the application is submitted in WORD or PDF format.

38. Page 3 of the Application: Of the Non-Registered Services in IIIB, it states: Specialized Medical Equipment, Services and Supplies. Is this a blanket statement (array of needed equipment) or does the Agency have a list of medical equipment it seeks as "specialized"?

<u>Response</u>: The Alliance does not have a list of medical equipment it seeks. The Applicant must have or be able to obtain an array of equipment and supplies that may be needed by the client depending on their needs.

39. We had an Enhanced HCE Program Vendor Agreement during 2023 with an extension through the beginning of 2024 not through RFP; would any score be reduced?

<u>Response:</u> There is no scoring reduction for previous relationship with the Alliance was not created through an RFP procurement process.

40. Page 26 of the RFP under IIIE, the service is listed as Specialized Medical Equipment, Services and Supplies. Is this a blanket statement (array of needed equipment) or does the Agency have a list of medical equipment it seeks as "specialized"?

<u>Response:</u> The Alliance does not have a list of medical equipment it seeks. The Applicant must have or be able to obtain an array of equipment and supplies that may be needed by the client depending on their needs.

41. Page 27 c. ii of Criteria for IIIE Services section: This seems to be a type "O"/same copy and paste of i. Please advise what criteria may be necessary for this section.

<u>Response:</u> There is a change in language to help clarify this section. Please see amendment 1 to this RFP on the Alliance website.

42. Page 27 i. of the Applicants section. We had an Enhanced HCE Program Vendor Agreement during 2023 with an extension through the beginning of 2024 not through RFP; would any score be reduced?

<u>Response</u>: There is no scoring reduction for previous relationship with the Alliance was not created through an RFP procurement process.

43. Why are the maximum unit rates so high this time verses previous RFP's?

<u>Response:</u> This RFP captures the state-wide maximum unit rates.

44. Please define "designated Provider".

<u>Response:</u> A Designated Provider is a Successful Applicant that has been designated for funding.

45. Can an applicant apply for only ONE REGION?

Response: No, an applicant may apply for more than one region.

46. Are separate applications required for each region?

Response: No.5

47. Once awarded funding, can the provider move funds between services under each title?

<u>Response:</u> Awarded funding may be moved between services within each title for bundled services. Movement of funding between stand alone services is allowed within each tile with permission from the Alliance contract manager.

48. Once awarded funding, can a provider move funding from one region to another region?

Response: No. Funding must be kept within its allocated region.

49. Page 4 [of the RFP], award information: an applicant will be deemed a "successful applicant" receives a score of at least 2pts on the application? What part(s) are 2 pts received for?

<u>Response</u>: As indicated in Section B (specifically Sections B.1.b., B.2.b., B.3.b., B.4.b., and B.5.b), a Successful Applicant is an applicant that received a score of 2.0 on Part A of the application.

50. What is the difference between a "successful applicant" and a designated provider?

<u>Response</u>: a Designated Provider is a Successful Applicant that receives funding. Refer to Section B. 1. B. page 8 of the RFP document which states the following: "From the pool of Successful Applicants, the Alliance will select, based upon the established criteria referenced under each title and service, those agencies designated for funding (the "Designated Providers")." The RFP describes the criteria for the Successful Applicants in the respective sections for each Title.

51. Under each title – section: applicants – applicants may have their application score under any service of this title reduced based on historical surpluses... Reduced by how many points? And how many points under any service? Are they reduced by each service? For example, Title IIIB – you apply for 7 services, do you lose points for each of these services? And if so, how many points?

<u>Response:</u> The points being deducted for any previous contract surplus have been removed. Please see amendment 1to this RFP on the Alliance website.

52. Same question above for losing points if the applicant is on a corrective action plan?

<u>Response</u>: There is a change in language to help clarify this section. Please see amendment 1 to this RFP on the Alliance website.

53. Page 12 – ties: resolved by years of experience as a provider with the Alliance? Or as a provider with other funders too?

<u>Response:</u> The years of experience refers to how many years of experience the applicant have in providing services that are being applied for (specify for each specific service), including funding source(s). This is not limited to only experience with the Alliance. The RFP document indicates how the Alliance will award contracts for Screening and Assessment service to all Designated Providers selected to provide registered services under each title.

54. Please clarify if screening and assessment is a service with an allocation? Or SCAS will not have an allocation? And or a unit rate?

<u>Response</u>: Yes, funding has been set aside and allocated for Registered Services within Titles and Subtitles III-B, III-C1, III-C2, IIIE. The RFP document indicates in Section B how the Alliance will award contracts for Screening and Assessment service to all Designated Providers selected to provide registered services under each title. Title IIIE (Section B.5.) will follow the same process described under Title IIIB (Section B.1). A rate should be developed if you intend to use this funding to cover Screening b& Assessment.

55. Should SCAS be shown on a submitted UCM?

<u>Response:</u> Yes. However, a UCM is not required to be submitted with the application but is required prior to contracting. See section C.1.g. of the RFP

56. The allocation for Monroe County for Title IIIB shows on page 7 as \$282,150 for both regions, the charts on page 14 does not add up to this total amount, table B.1.b. totals \$277,150.00 for both regions? Please clarify the funding amounts and which amount(s) do we apply for?

<u>Response:</u> The difference is the amount set aside for Screening & Assessment (see response to question 54)

57. The allocation for Monroe County for Title C1 shows on page 15 as \$138,000.00 for both regions, the charts on page 18 do not add up to this total amount, table B.2.b. totals \$135,000.00 for both regions? Please clarify the funding amounts and which amount(s) do we apply for?

<u>Response:</u> The difference is the amount set aside for Nutrition Screening (see response to question 54)

58. The allocation for Monroe County for Title C2 shows on page 19 as \$242,116.00 for both regions, the charts on page 22 do not add up to this total amount, table B.3.b. totals \$238,000.00 for both regions? Please clarify the funding amounts and which amount(s) do we apply for?

<u>Response:</u> The difference is the amount set aside for Screening & Assessment (see response to question 54)

59. The allocation for Monroe County for Title IIID shows on page 23 as \$45,806 for both regions, the charts on page 25 do not add up to this total amount, table B.4.b. totals \$45,800.00 for both regions? Please clarify the funding amounts and which amount(s) do we apply for?

Response: The \$6.00 difference will be allocated at the time of contracting.

60. The allocation for Monroe County for Title IIIE shows on page 26 as \$287,720 for both regions, the charts on page 25 do not add up to this total amount, table B.4.b. totals \$45,800.00 for both regions? Please clarify the funding amounts and which amount(s) do we apply for?

Response: The Service Funding Allocation for Title III-E Services is Table B.5.b. The difference between the total in that table and the amount on page 26 is set aside for Screening & Assessment.

61. In unit cost grids for all titles, a column is labeled "current unduplicated OAA clients", should we utilize the current 2024 OAA client numbers or 2023 OAA current client numbers. (refer to page 40 of the application for funds section)

Response: Use current 2024 numbers.

62. If you are an agency applying for a new service, what do you utilize for "current unduplicated OAA clients" in the contract module section?

Response: You would indicate "zero" in this box.

63. Why would the maximum rate for CHORE be more than ENHANCED CHORE? (REFERENCE PAGE 40 OF THE APPLICATION FOR FUNDS SECTION)

<u>Response:</u> As mentioned in the response to #43, the highest state rate was utilized as the maximum rate for this RFP.

64. Is a UCM required to be submitted with the contract module of this RFP?

Response: No, However, as per section C.1.g. of the RFP: "Pending the selection of an Applicant to provide services, the selected Applicant must provide a complete and accurate Unit Cost Methodology to the Alliance. The unit rate for the services awarded to the selected Applicant will be the unit rate provided by the Applicant in their Service Provider Application or the unit rate provided by the Uniform Cost Methodology, whichever is lower. Unit Cost Methodology training will be provided by the Alliance prior contracting for services."

65. Page 49 of the Application for Funds, MATCH COMMITMENT FOR, states place an X next to the means for which you have identified your ability to meet the 10% match requirements for titles IIIB, C1, C2 and IIIE, this does not mention title IIID, is a match required? The unit rate grid, has a column for match?

<u>Response:</u> Title IIID does not require match.

66. Is page 49 the only required form for the MATCH COMMITMENT?

Response: Yes.

67. If any agency does NOT submit the application electronically correctly.... Meaning in the proper folders, will the agency be rejected/disqualified? Page 44 states the agency will NOT be notified if incorrect, but notified on the date and time the application is due as being considered responsive. the paragraph shows a through d as items being considered responsive, A THROUGH D DOESN'T STATE THE APPLICATION HAS TO BE ASSEMBLED CORRECTLY? PLEASE CLARIFY

<u>Response</u>: The application should be submitted as per the instructions in Section E of the RFP. If the components of the application are not submitted as per the instructions, required or offered submissions as part of the RFP may be missed and not scored resulting in a potential lower score.

68. Could you please clarify what the services under IIID, are: such as BINGOSIZE, ENHANCED FITNESS, CRONICH DISEASE, SAVY CAREGIVER? THESE SERVICES ARE NOT LISTED INDIVIDUALLY IN THE DOEA MANUAL.

<u>Response:</u> Enhance Fitness and Chronic Disease are both in the Handbook. We have attached the descriptions for Bingosize and Savvy Caregiver at the end of this inquiries and response document.

69. Page 47 states the reviewers will be four professional staff of the Alliance, how is this not a conflict of interest, please explain?

<u>Response:</u> The professional staff of the Alliance were selected based upon their understanding of the nuanced programs and services in consideration under this RFP. Each staff member asked to be a reviewer is required to complete a Conflict-of-Interest questionnaire to ensure that no conflicts exist for any staff member.

70. Can you share the conflict-of-interest questionnaire to be utilized for the AAA staff?

Response: The conflict of interest is attached at the end of this inquiry & response document.

71. This RFP does not appear to contain the reviewer's evaluation instrument? Can this please be shared?

<u>Response:</u> The Evaluation Process is described in Section E of the RFP.

72. Page 47, discusses the point system for scoring, where is the scoring formula in the RFP?

<u>Response:</u> The Scoring Process is described in Section F of the RFP.

73. Is an applicant awarded more points for the lowest unit rate per service?

<u>Response:</u> The Scoring Process and points assigned are described in Section F.2 of the RFP.

74. Page 37 of the application for funds, VA organizational capability package, please clarify number 1 – is an org chart required for each title? Each program? Or one program, which is OAA?

<u>Response:</u> This section refers to an approved organizational chart illustrating the structure and relationship of positions, units, supervision, and functions of the organization as a whole, not by title, for individuals that will be involved with the services being applied for.

75. I run a Non-Profit Organization and would like to inquire about the OAA Grant that is currently on your website. We are a licensed Community Based Service provider for Miami-Dade and Monroe Counties with Home Health Aide staff available to service members all throughout. I'm very interested in applying for this program if you could please let me know the steps to follow in order to do so.

<u>Response:</u> Refer to the "2024 RFP document" and "Appendix V Application for Funds" posted on the Alliance's website: https://allianceforaging.org/whats-happening/procurement

76. What are the approved rates being charged currently by funded providers for Title IIIC1 and Title IIIC2 services?

Response: This information is attached to the end of this Inquiry & Response Document.

Appendix A: Service Descriptions and Standards

Section II: Services Bingocize

PROGRAM FUNDING SOURCE(S): Bingocize®, OAAIIID

PROGRAM AUTHORITY:

<u>Program Funding</u> <u>Specific Authority</u>

Rulemaking Section 430.08, F.S.

OAAIIID Older Americans Act, Title IIID, Part D

OAAIV Older Americans Act, Title IV

DESCRIPTION: Based on research from the Western Kentucky University Center A. for Applied Science in Health and Aging (CASHA), Bingocize® is an evidencebased health promotion program approved through both SNAP-Ed and he National Council on Aging (NCOA). Bingocize® combines exercise and health information with the familiar game of bingo. The unique addition of bingo addresses many of the barriers to older adults' participation because the game is fun, familiar, and done in a group setting. The program has been shown to increase older adults' functional fitness, health knowledge, and social engagement in a variety of settings. The program can be delivered two ways. First, certified leaders can use printed curriculum materials along with the facility's regular bingo game. Second, a certified leader can use a mobile app to deliver the program to participants who also use the mobile app to play Bingocize® on an electronic device. The mobile app allows for remote delivery of the program. Regardless of the delivery, the exercises and health information are the same. participants (Bingocizers®) complete a series of strategically inserted exercises designed to increase or decrease the intensity and volume of exercise. Health education questions focused on either falls prevention or nutrition are also inserted into the game. Participants rest while numbers are called for the bingo game, then complete more strategically inserted exercises or health education questions, rest during number calling, and so on. This pattern is continued until a Bingocizer® wins the game. Small prizes (not included with program) are awarded to winners. Additional games are played until all planned exercises are completed. Leader and participant materials are available in Spanish.

B. DELIVERY STANDARDS/SPECIAL CONDITIONS:

- 1. Bingocize[®] is offered to older adults, aged 60 and older of all ability levels in community settings.
- 2. Participants play twice a week in sessions provided by a certified leader.
- 3. Bingocize[®] is a (10) week-long program of 1-hour online or in person sessions 2 times per week on nonconsecutive days.
- 4. There must be a minimum of 8 and a maximum of 20 participants for one certified leader. If the number of participants exceed 20, two certified

Appendix A: Service Descriptions and Standards

leaders are required. A minimum of 5 participants is acceptable for online sessions during the COVID-19 Pandemic.

5. 80 percent attendance or 16 of 20 sessions attended is considered completion.

C. PROVIDER QUALIFICATIONS:

Trainers complete online training that consists of five self-paced modules. A Certificate of Completion can be printed at the end of the training. The training is good for two years.

D. RECORD KEEPING AND REPORTING REQUIREMENTS:

- 1. The provider shall maintain all appropriate documentation as set forth by the program (i.e., administer and collect the *Bingocize® Participant Pre-Unit Assessment Form* from all participants prior to beginning the first session; track attendance throughout the 10 weeks for all 20 sessions using the *Weekly Attendance Form;* have all participants complete the *Bingocize® Participant Post-Unit Assessment Form* at the end of the 10 weeks, scan the pre and post surveys, as well as the attendance documentation into one pdf document, and email the document to bingocizedata@wku.edu).
- 2. The contractor must verify and maintain documentation of provider qualification for service, i.e., copy of leader certification.
- 3. Unit of Service Group: An episode (online or in-person) equals the full 20-hour program provided over a (10) week period in 1-hour sessions, 2 time a week on nonconsecutive days, regardless of the number of completers.
- 4. CIRTS reporting requirements are below.

CIRTSREPORTINGREQUIREMENTS						
PROGRAM	SERVICE	REPORTING OF SERVICES	OAA CLIENT REQUIREMENTS	MAX UNITS		
OA4 OA3D	Bingocize® (GROUP)	MONTHLY AGGREGATE REPORTING	NO REQUIREMENT	9999		

Website for updated fidelity and training information:

www.bingocize.com

Appendix A: Service Descriptions and Standards

Section II: Services Savvy Caregiver

PROGRAM FUNDING SOURCE(S): Savvy System Project, OAAIIID, OAAIIIE

PROGRAM AUTHORITY:

<u>Program Funding</u> <u>Specific Authority</u>

Rulemaking Section 430.08, F.S.

OAAIIID Older Americans Act, Title IIID, Part D

OAAIIIE Older Americans Act, Title IIID, Part E

A. **DESCRIPTION:** Based on research from the University of Minnesota including curriculum authors from Emory University, Savvy Caregiver is a psychoeducational program focused on providing training to caregivers of individuals living with Alzheimer's disease and/or related dementia disorders. The program focuses on helping caregivers think about their situation objectively and on providing them with the knowledge, skills, and attitudes they need to manage stress and carry out the caregiving role effectively.

B. DELIVERY STANDARDS/SPECIAL CONDITIONS:

- 1. The Savvy Caregiver program is offered to caregivers of older adults, aged 60 and older.
- 2. Participants receive instruction each week from a certified trainer.
- 3. The 12-hour curriculum is taught over a (6) week period in 2-hour sessions online or in person.

C. PROVIDER QUALIFICATIONS:

Trainers of the Savvy Caregiver curriculum are required to successfully complete an 8 to 12-hour online training course and receive Savvy leader certification. The online training program removes the need for agencies to have in-house personnel to provide training, (i.e., the role of a Master Trainer is not needed).

D. RECORD KEEPING AND REPORTING REQUIREMENTS:

- 1. The provider shall maintain all appropriate documentation as set forth by the program (e.g., participant data, attendance rosters with sign-in time and time ending, date, and signature of participant, evaluations, funding source, etc.).
- 2. The contractor must verify and maintain documentation of provider

Appendix A: Service Descriptions and Standards

qualification for service, i.e., copy of leader certification.

- 3. Unit of Service Group: An episode (online or in-person) equals the full 12-hour curriculum taught over a (6) week period in 2-hour sessions, regardless of the number of completers. There must be a minimum of 6 and a maximum of 12 participants in the first session with the same participants continuing through the curriculum. The entire 6 weeks must be completed prior to submitting a request for payment.
- 4. CIRTS reporting requirements are below.

CIRTSREPORTINGREQUIREMENTS							
PROGRAM	SERVICE	REPORTING OF SERVICES	OAA CLIENT REQUIREMENTS	MAX UNITS			
OA3D	SAVVY (GROUP)	MONTHLY AGGREGATE REPORTING	NO REQUIREMENT	9999			
OA3E	SAVVY (GROUP)	MONTHLY AGGREGATE REPORTING	NO REQUIREMENT	9999			

Website for updated fidelity and training information:

emorycaregiving.org

Proposal Evaluator Team Members Statement of Independence and Non-Conflict of Interest

I,, a Proposal Evaluator Team member for Alliance for Aging, Inc.
Older Americans Act Request for Proposal (the "RFP") do hereby certify that, to the best of my knowledge, I do not
have a conflict of interest as a result of any personal, familial, financial or other interest, direct or indirect, in any
bidder submitting a proposal in response to the RFP. I further certify that I am not employed by, nor do I have any
arrangement for future employment with, any bidder or proposed subcontractor referenced in any proposal submitted
in response to the RFP nor have I or will I accept gratuities, favors, or anything of value from any bidder or proposed
subcontractor referenced in any proposal submitted in response to the RFP. I will independently review and score the
Program Module of each proposal and will have no communications (verbal or written) with any other person
regarding the RFP or any proposal submitted in response to the RFP, except that I may direct questions in writing via
e-mail to Stan McNeese (OAARFP2024@allianceforaging.org) at the Alliance and to no one else.
Evaluators Name
Signature
Date

Service Unit Rates

PSA: 11

Program: Older Americans Act All Titles

Start Date: OAA Contract Year 2024

Note: This infomration is directty from a Report ran out of eCIRTS

PSA	Title	Service	High Unit Rate	Low Unit Rate
11	. IIIC1	Congregate Meals	\$11.45	\$5.97
		Congregate Meals Breakfast	\$6.02	\$4.17
		Emergency Congregate Meals	\$9.00	\$5.65
	Nutrition Education	\$1.35	\$1.00	
	Nutrition Screening	\$31.56	\$20.00	
		Nutrition Counseling	\$87.47	\$47.50
	IIIC2	Emergency Home Delivered Meals	\$9.00	\$5.00
		Home Delivered Meals Breakfast	\$6.02	\$3.61
		Home Delivered Meals Frozen	\$9.30	\$4.93
		Home Delivered Meals Hot	\$8.57	\$5.74
		Nutrition Education	\$1.35	\$1.00
		Nutrition Counseling	\$87.57	\$45.00
		Screening & Assessment	\$29.99	\$22.87