**APPENDIX VIa**

**Alliance for Aging, Inc.**

State General Revenue Programs

Service Provider Application

2019 ADI RFP

This packet contains the application formats to be used by bidders seeking to be designated by the Alliance as an ADI Agency and to be awarded contracts pursuant to which they would receive funding under the following DOEA State General Revenue funded programs:

**Alzheimer’s Disease Initiative**



Service Provider Application Update

**Table of Contents**

**PAGE**

**I. A. Service Provider Summary Information** 3

## II. A. Program Module - General Requirements 4

1. Alzheimer’s Disease Service System 5
2. Consumer Identification 6
3. Case Management Functions 7
4. List of Services Proposed 9
5. Service Descriptions 10
6. Quality Assurance 11
7. Process for Reporting Client Complaints,

Grievances, and Appeals 13

1. Reporting 14
2. Client Confidentiality 15
3. Screening and Security 16
4. Disaster Preparedness 17
5. Volunteer Plan 18
6. Organizational Chart 19
7. Funding Sources 20
8. Objectives and Outcome Measures 21
9. Bidder’s Checklist App VIc ­­­­­

## II. B. Contract Module – General Requirements 28

1. Unit Cost Methodology 29
   1. Personnel Allocation Worksheet 29
   2. Unit Cost Worksheet 29
   3. Supporting Budget Schedule by Program Activity 29
2. Availability of Documents 30
3. Organizational Capability Package App VIb
4. Bidder’s Checklist App VIc

**I.A. SERVICE PROVIDER SUMMARY INFORMATION PAGE**

PSA: 11 ORIGINAL [ ]

|  |  |
| --- | --- |
| 1. PROVIDER INFORMATION:  Executive Director:  [Name/Address/Phone]  Legal Name of Agency:  Mailing Address:  Telephone Number: | 2. GOVERNING BOARD CHAIR:  [Name/Address/Phone] |
| 3. TYPE OF AGENCY/ORGANIZATION:  GOVENMENT (COUNTY / MUNICIPALITY): \_\_\_  NOT FOR PROFIT: \_\_\_  FOR PROFIT: \_\_\_ | 4. PROPOSED FUNDING PERIOD:  **07/01/2020 – 06/30/2026** |
| 5. FUNDS REQUESTED:  [ X ] ADI | |
| 6. SERVICE AREA: [ ] Selected County: Specify one  [ ] Miami-Dade [ ] Monroe | |
| 7. CERTIFICATION BY AUTHORIZED AGENCY OFFICER:  I hereby certify that the contents of the proposal submitted by the bidder identified above is true, accurate and complete. I acknowledge that any intentional misrepresentations or false statements in the proposal may result in disqualification of the proposal or the termination of any contract between the bidder and the Alliance arising out of this RFP.  Name: Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |

**Alliance for Aging, Inc.**

State General Revenue Programs (ADI)

Service Provider Application (SPA)

**Section II. A.**

###### Program Module – General Requirements

## II.A.1. ALZHEIMER’S DISEASE SERVICE SYSTEM COUNTYWIDE

Alzheimer’s Disease Initiative (ADI) Agency funding is contingent upon the bidder’s demonstrated ability to accept referrals and provide case management and a continuum of services on a county-wide basis for all eligible consumers residing in the specific county.

In order to ensure the provision of a continuum of services addressing the diverse needs for individuals with AD and their caregivers, Case Management and Case Aide must be provided directly by the ADI Agency and by that agency only. All Respite services must be provided either directly by each ADI Agency or through a qualified subcontractor. All other services (referenced in Section A.3 of the RFP) must be coordinated or provided, as needed, either directly by each ADI Agency, through a qualified subcontractor, or coordinated through other community resources. Specialized Adult Day Care must be provided in accordance with Section 429.918, Florida Statutes.

Services must be provided countywide in accordance with Section 1.1.a.2. of the RFP and as stated in the paragraph above.

The responses for the topics below should not exceed two (2) pages double spaced using a font size of at least 11 pt for each topic.

* 1. Describe your agency’s ability to accept referrals and provide services countywide to include:
* Providing Case Management directly by your Agency.
* Providing all Respite services must be provided either directly by each ADI Agency or through a qualified subcontractor.
* Coordinating or providing all other ADI services (referenced in Section A.3 of the RFP) as needed directly, through a qualified subcontractor, or through other community resources.
  1. Describe your agency’s ability to manage a coordinated service system of in-home and center-based AD services to ensure county-wide coverage.

**II.A.2. Consumer Identification**

The ADRC and ADI Agencies are charged with the responsibility to identify and inform individuals with AD or related memory disorders and their caregivers of the range and availability of services. This may be carried out in cooperation with church, civic, social, and medical organizations.

ADI Agency staff should participate in local networks and consortiums where Memory Disorder Clinics, hospitals, home health, social and medical providers are represented, since these may be sources of referrals.

The intake process begins when an individual with AD or related memory disorders and their caregiver makes contact with, or is referred to, the ADRC. ADI Agencies must refer all potential clients in need of service to the ADRC for preliminary screening and intake.

The responses for the topics below should not exceed two (2) pages double spaced using a font size of at least 11 pt for each topic.

1. Describe the anticipated activities your agency will conduct to identify and inform individuals with AD or related memory disorders and their caregivers of the availability of services.
2. Describe your agency’s process for referral to the ADRC including the steps and criteria your agency will use to determine if the referral is appropriate.
3. Describe your agency’s procedures to request referrals of wait listed clients from the ADRC including the process to determine the number and frequency of referral requests (including budgetary considerations).
4. Describe how your agency will process referrals from the ADRC for new client enrollments including each step from the initial receipt of the referral through all required and documented actions for eligibility determination.

II.A.3. Case Management Functions

The case manager is the gatekeeper of AD services provided through the ADI program with the knowledge and responsibility to link clients to the most beneficial and least restrictive services and resources irrespective of funding source or program. Each client will be assigned one, and only one, case manager, even if the client is enrolled in more than one program.

Case Management and case aide must be provided directly by an ADI Agency and by the ADI Agency only. ADI Agency case managers will coordinate AD resources for individuals with AD or related memory disorders and their caregivers.

The responses for the topics below should not exceed two (2) pages double spaced using a font size of at least 11 pt for each topic.

1. Clearly describe how, and the extent to which, your agency has provided a minimum of two years of case management experience servicing individuals with AD or related memory disorders. Note: Per Section B.1.b.1. of the RFP, **bidders who do not meet the two years minimum required experience will not be considered eligible for a contract award under this RFP**.

Functional impairment shall be determined through the 701B assessment developed by the Department of Elder Affairs (DOEA) and administered to each applicant for ADI services. Final determination of eligibility is the responsibility of the ADI Agency. Case managers must prepare a service care plan for each eligible client, utilizing the format prescribed by the DOEA. The service care plan is developed in coordination with the client and caregiver and must address all the consumer’s needs.

1. Describe the average timeline for client assessment, service care plan development, and service initiation. Specifically address your client to case manager ratio. The timeline should meet the requirements of Chapter 2 of the DOEA Handbook.
2. Describe your agency’s process of coordinating all formal and informal resources of all services accessible through DOEA funded and non-DOEA funded programs to meet client need.

The ADI Agency must ensure that all other available funding sources have been exhausted before using ADI funding.

1. Describe how all other available alternative resources for client services will be explored, utilized, and documented prior to using ADI funding.

In accordance with statute as well as rules and guidelines established by DOEA, an ADI Agency must assess co-payments for all non-exempt ADI clients for services rendered based on ability to pay. Co-payment guidelines are included in Appendix B of the DOEA Handbook. In addition, DOEA may also have issued a Notice of Instruction on co-payments.

The ADI Agency is responsible for assessing and collecting assessed co-payments for all services provided under the ADI program. This includes coordinating with other service provider agencies which share ADI clients in common.

1. Describe your agency’s internal procedure for assessing, collecting, and reporting co-payments in a timely manner.

## II.A.4. List of Services Proposed

This page must be completed for all required services. If you propose to provide optional services, these services must also be included on the lists below.

**For Center Based Services**, complete the following table:

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Service** | **Business/**  **Location Name** | **Address** | **Phone** | **Cap- acity** | **License Type (if applicable)** | **License # (if applicable)** | **Direct (D) or Subcontracted (S)** |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |

If subcontracting, the subcontract agreement, signed by both parties, must be available upon request from the Alliance.

**For Non-Centered Based Services,** complete the following table:

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Service** | **Business/**  **Location Name** | **Address** | **Phone** | **License Type (if applicable)** | **License # (if applicable)** | **Direct (D) or Subcontracted (S)** |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |

If subcontracting, the subcontract agreement, signed by both parties, must be available upon request from the Alliance.

**II.A.5 Services Description**

It is important that ADI Agencies provide all services indicated in Section A.3 of the RFP either directly or through a subcontractor. A complete listing of the service descriptions funded under this RFP may be found in Appendix A of the DOEA Handbook.

The responses for the topics below should not exceed two (2) pages double spaced using a font size of at least 11 pt for each topic.

1. Describe how your agency will provide each service listed in section II.A.4.
2. Describe your experience collaborating with a Memory Disorder Clinic in providing services specifically for the AD population including the number of years related to this collaboration.
3. Are any of the Direct Service Day Care Centers listed section II. A.4. above licensed to provide Specialized Alzheimer’s Disease Day Care services in accordance with Section 429.918, F.S.? Indicate Yes or No and you must also include a copy of documentation evidencing the specialty license.

**II.A.6. Quality Assurance**

The ADI Agency will self-monitor and self- evaluate the quality of services by its own staff and sub-contractors, at least annually, subject to further monitoring by the Alliance and/or DOEA.

The responses for the topics below should not exceed two (2) pages double spaced using a font size of at least 11 pt for each topic.

Note: Copies of all Quality Assurance/Quality Initiative procedures must be maintained and available upon request by the Alliance as per **Section II.B.2. (Availability of Documents)**

1. Describe your agency’s procedures to evaluate the quality of services delivered by the ADI Agency staff.
2. Describe your agency’s procedures to evaluate the quality of services delivered by any subcontractor providing ADI services.
3. Explain how the results of your quality assurance process for services delivered by both ADI agency staff and subcontractors has been and will be used to improve services.

The degree of client satisfaction with service quality and staff effectiveness must be evaluated annually by the ADI Agency during the contract period. Survey results must be used to develop continuous quality assurance initiatives to ensure improvement of case management and other service delivery.

1. Describe the procedures your agency uses to evaluate client satisfaction. The description should include sample size, tabulation of the results, analysis and follow up process, and information on how the results are utilized to make improvements to services. Note: Copies of your consumer satisfaction policies must be maintained and available upon request by the Alliance as per **Section II.B.2 (Availability of Documents).**

ADI Agencies must meet the pre-service and in-service training requirements as referenced in Appendix A and Chapter 2 of the DOEA Handbook.

1. Pre-Service and In-Service Staff Training

ADI Agencies shall be responsible for provision of the pre-service and in-service training for all paid and volunteer staff.

1. Describe your plan to provide the required pre-service staff training. Your plan should include the minimum standards/topics as outlined in Appendix A of the DOEA Handbook.

2. Describe your plan to provide the required six (6) hours of in-service training annually to case management staff. Your plan should include the minimum standards/topics as outlined in Chapter 2 of the DOEA Handbook.

3. Describe your plan to collaborate with a Memory Disorder Clinic(s) in the development of staff training to meet staff needs.

**II.A.7. Process for Handling and Reporting Client Complaints, Grievances, and Appeals**

The ADI Agency must develop and maintain procedures to provide for handling client complaints and processing grievances and appeals regarding denial, reduction or termination of services. These procedures must provide for informing all clients of the complaint, grievance and appeal process. Information concerning client complaints, grievances and appeals procedures can be found in Appendix D of the DOEA Handbook.

The responses for the topics below should not exceed two (2) pages double spaced using a font size of at least 11 pt for each topic.

1. Describe your agency’s process for receiving, reporting and remediating client complaints.
2. Describe your agency’s process for handling client grievances including appeals regarding denial, reduction, or termination of services.

Note: Copies of your agency’s Client Complaint, Grievance, and Appeals Procedures and logs must be maintained and available upon request by the Alliance as per Section II.B.2 (Availability of Documents).

**II.A.8. Reporting**

The ADI Agency is required to compile service delivery statistics and other data and report to the Alliance as required by contract, or if otherwise requested.

Monthly reporting requirements for CIRTS require all client and service data for the previous month to be entered into CIRTS by the 9th day of the month. Information is to be reported in the following categories:

* Consumer Demographics
* Consumer Program Enrollment
* Consumer Assessment Information
* Consumer Care Plan Information
* Consumer Services

All services provided by the ADI Agency must be reported on a monthly basis in CIRTS. Additionally, all reports and requests for payment must be submitted within the time frames established by the Alliance.

The responses for the topics below should not exceed two (2) pages double spaced using a font size of at least 11 pt for each topic.

1. Describe the steps your agency will follow in order to provide for accurate and timely entry of all service and consumer specific information in the CIRTS database. Note: Copies of your agency’s CIRTS Policies and Procedures must be maintained and available upon request by the Alliance as per **Section II.B.2 (Availability of Documents).**

b. Describe the method for validating and reconciling service units from service authorization to service delivery in billing the Alliance.

**II.A.9 Client Confidentiality**

Pursuant to Section 430.504, Florida Statutes, information about clients of programs created or funded under the ADI is confidential and exempt from the provisions of Section 119.07(1), Florida Statutes, Florida's Public Records Act.

The ADI Agency must ensure confidentiality of client information by all employees, service providers and volunteers as required by all applicable laws. It is essential that training be established and provided for ADI Agency staff, subcontractors, and volunteers, and that necessary policies and procedures be implemented to promote security of information, including protection from loss, damage, defacement or unauthorized access.

The ADI Agency must ensure the confidentiality of client information by all employees, service providers and volunteers as required by state and federal laws.

The response for the topic below should not exceed two (2) pages double spaced using a font size of at least 11 pt.

1. Describe what security measures are in place to address client confidentiality, including client notification, as it relates to state and federal (including HIPAA) requirements. Note: A copy of your agency’s Privacy Notice issued to clients must be maintained and available upon request by the Alliance as per **Section II.B.2 (Availability of Documents)**.

**II.A.10 Screening & Security**

The ADI Agency is responsible for complying with State of Florida, Office of the Governor, Executive Order Number 11-116 and all applicable requirements to utilize the U.S. Department of Homeland Security’s E-verify system to verify the employment of individuals provider services under a contract procured through this RFP. The ADI Agency is required to maintain documentation to assure new employees hired by the agency within the contract period are eligible for employment.

The responses for the topics below should not exceed two (2) pages double spaced using a font size of at least 11 pt for each topic.

1. Describe the procedures implemented by your agency to ensure that all required employees are properly verified and determined eligible for hire through the U.S. Department of Homeland Security’s E-verify system.

The ADI Agency shall ensure that all applicable background screening requirements of Section 430.0402 and Chapter 435, Florida Statutes, are met. The ADI Agency must also comply with any applicable rules promulgated by DOEA or the Agency for Health Care Administration regarding implementation of Section. 430.0402 and Chapter 435, Florida Statutes.

Further information concerning the procedures for background screening is found at <http://elderaffairs.state.fl.us/doea/backgrotmdscreening.php.>

1. Describe the procedures implemented by your agency to ensure that all staff, volunteers, or subcontractors who meet the definintion of direct service providers are properly screened and determined to have no disqualifying offenses prior to rendering services.

Proper storage, protection, security and preservation of source documentation, and valid backup and retention of electronic data on a regular basis is required.

1. Describe your agency's procedures for the proper storage, protection, security and preservation of source documentation, and valid backup and retention of electronic data.

Note: A copy of your agency’s Staff Level II Background Procedures, E-Verify procedures, and IT and Electronic Back-up Procedures must be maintained and available upon request by the Alliance as per Section II.B.2 (Availability of Documents).

**II.A.11. Disaster Preparedness**

The ADI Agency will maintain a current Disaster Plan to be implemented, at the direction of the Alliance or DOEA, in the event that a disaster is declared by federal, state or local officials. The ADI Agency is required to enter data into CIRTS for all clients which is also used for disaster preparedness.

ADI Agencies must be prepared to use CIRTS reports to routinely provide registry information to the local emergency management team and to identify, locate, and assist with the evacuation and other needs of endangered clients in the event of a disaster.

The response for the topic below should not exceed four (4) pages double spaced using a font size of at least 11 pt.

1. Provide a summary of your agency’s disaster plan which must include the following key elements: (Refer to Chapter 8 of the DOEA Handbook for further information):

* Designation of a Disaster Coordinator and alternate.
* Plans for contacting all at-risk clients, on a priority basis, prior to and immediately following a disaster.
* Plans to receive referrals, conduct outreach, and deliver services, before and after a disaster, to persons who may or may not be current clients.
* Plans for after-hours coverage of network services, as necessary.
* Plans to help at-risk clients register with the Special Needs Registry of the local emergency management agency.

Note: A copy of your agency’s Disaster Preparedness Plan must be maintained and available upon request by the Alliance as per **Section II.B.2 (Availability of Documents)**.

## II.A.12. Volunteer Plan

ADI Agencies must have written procedures to include recruitment, training, supervision, utilization, and retention of volunteers to assist the ADI Agency.

The response for the topic below should not exceed two (2) pages double spaced using a font size of at least 11 pt.

1. Provide a written plan of action on how your agency will recruit, train, utilize, and retain volunteers to assist with your agency’s functions.

**II.A.13. Organizational Chart**

An organizational chart illustrating the structure and relationship of positions, units, supervision and functions must be developed and approved by the governing body of the ADI Agency and submitted by the bidder as part of the proposal response.

The response for the topic below should not exceed two (2) pages double spaced using a font size of at least 11 pt.

1. Describe how your agency organizational structure is sufficient to support the functional requirements of the ADI program including case management functions and CIRTS data entry and maintenance.

Note: A copy of the most recent, board approved, organizational chart illustrating the structure and relationship of all positions related to the ADI program must be submitted as part of the Organizational Capability Package **(Appendix VIb.)**.

**II.A.14. Funding Sources**

1. Provide a list of all current funding sources, including the Alliance, if applicable.

1. As an attachment to the Program Module SPA, provide a letter from each funding source listed above, including the Alliance, if applicable, indicating whether your agency is in good standing.

###### II.A.15. OBJECTIVES AND OUTCOME MEASURES

Outcome Measures

In keeping with the legislatively mandated requirements for performance-based budgeting, DOEA has identified five (5) key goals for which area agencies on aging and provider agencies are required to develop implementation strategies in order to assist DOEA in achieving the statewide outcome and output measures it has identified for the aging network. The identified goals are:

|  |  |
| --- | --- |
| * To Age in Place | * To Age with Purpose |
| * To Age with Security | * To Age in an Elder Friendly Environment |
| * To Age with Dignity |  |

All ADI Agencies are required to describe the strategies and actions they will use to meet and/or exceed the outcome measures as specified by DOEA as delineated in the table below.

Objectives and Outcome Measures

| **Objectives** | **Outcome Measures** | **Standards\*** |
| --- | --- | --- |
| 1: To help clients to have home environments that are as safe as possible. | ***Outcome Measure:*** Percent of clients assessed with high or moderate risk environments who improved their environment score | 79.3% |
| 2: To improve the nutritional status of clients. | ***Outcome Measure:*** Percent of new service recipients with high-risk nutrition scores whose nutritional status improved | 66% |
| 3: To assist clients to maintain their independence and choices in their homes as long as possible. | ***Outcome Measure:*** Percent of new service recipients whose ADL assessment score has been maintained or improved | 63% |
| 4: To assist clients to maintain their independence and choices in their communities as long as possible. | ***Outcome Measure:*** Percent of new service recipients whose IADL assessment score has been maintained or improved | 62.3% |
| 5: To provide caregivers with assistance/respite to help them to be able to continue providing care. | ***Outcome Measure*:** Percent of caregivers will maintain or improve their ability to provide care after one year of service intervention (as determined by the caregiver and the assessor). | 90% |

The responses for each of the outcome measures below should not exceed two (2) pages double spaced using a font size of at least 11 pt.

**OUTCOME MEASURES**

***Use the format below as needed to describe in sufficient detail the implementation strategies, action steps and/or process measures you will follow to meet the goals, objectives and performance measures identified in the Objectives and Outcome Measures Grid above. Use additional pages following the same format, if more space is needed.***

## OBJECTIVE AND OUTCOME MEASURE #1.

***79.3% of clients assessed with high or moderate risk environments who improved their environment score***

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**STRATEGIES/ACTION STEPS**

**\_\_\_**

**OUTPUT**: Describe the services that will be delivered or resources that will be used to meet the outcome measure.

**OBJECTIVE AND OUTCOME MEASURE #2.**

***66% of new service recipients with high-risk nutrition scores whose nutritional status improved.***

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**STRATEGIES/ACTION STEPS**

**OUTPUT**: Describe the services that will be delivered or resources that will be used to meet the outcome measure.

**OBJECTIVE AND OUTCOME MEASURE #3**

***63% of new service recipients whose ADL assessment score has been maintained or improved***

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**STRATEGIES/ACTION STEPS**

**OUTPUT**: Describe the services that will be delivered or resources that will be used to meet the outcome measure.

**OBJECTIVE AND OUTCOME MEASURE #4**:

***62.3% of new service recipients whose IADL assessment score has been maintained or improved***

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**STRATEGIES/ACTION STEPS**

**OUTPUT**: Describe the services that will be delivered or resources that will be used to meet the outcome measure.

**OBJECTIVE AND OUTCOME MEASURE #5**:

***90% of caregivers will maintain or improve their ability to provide care after one year of service intervention (as determined by the caregiver and the assessor).***

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**STRATEGIES/ACTION STEPS**

**OUTPUT**: Describe the services that will be delivered or resources that will be used to meet the outcome measure.

## II.A.16. SPA Program Module Bidder’s Checklist

A Program Module Bidder’s Checklist has been provided for your convenience as a guide to ensure all required documents and responses have been provided (**Appendix VIc**).

**Alliance for Aging, Inc.**

State General Revenue Programs

Service Provider Application

2019 ADI RFP

**Section II. B.**

###### Contract Module – General Requirements

**2002colorlogo **

The Contract Module must be submitted in a separate binder from the Program Module.

Complete and attach the following documents:

INSTRUCTIONS for the contract module are found in **Appendix V**.

#### II. B. 1. Unit Cost Methodology includes the following:

#### Personnel Allocations Worksheet

#### Unit Cost Worksheet

#### Supporting Budget by Program Activity

The link to the Unit Cost Methodology can be found at the following link:

<https://allianceforaging.org/whats-happening/funding-opportunities/procurement>

## II. B. 2. Availability of Documents (Section II.B.2 below)

**II. B. 3. Organizational Capability Package** (**Appendix VIb**)

## II.B. 4. SPA Contract Module Bidder’s Checklist (Appendix VIc)

A Contract Module Bidder’s Checklist has been provided for your convenience as a guide to ensure all required documents and responses have been provided. (**Appendix VIc**).

**II. B. 2. AVAILABILITY OF DOCUMENTS**

The undersigned hereby gives assurance that the following documents are maintained and are accessible for review by the Alliance. Bidder agrees to amend any policies that are not in compliance with applicable regulations as necessary.

1. Current Board Roster
2. Articles of Incorporation and Corporate By-Laws
3. Staffing Plan (i.e. Position Descriptions, Salary Ranges, Organizational Chart with staff names)
4. Personnel Policies and Procedures
5. Accounting Policies and Procedures
6. Procurement Policies and Procedures
7. Operational Policies and Procedures
8. Affirmative Action Plan
9. Targeting Plan and documentation of activities
10. Americans With Disabilities Act Assurances and Policies
11. Staff Development and Training Plan (i.e. schedule, agendas, handouts, sign in sheets)
12. Unusual Incident File
13. Subcontracts and Subcontractor Monitoring Reports
14. All Quality Assurance and Quality Improvement Initiative Procedures
15. Consumer Satisfaction Policies and Procedures
16. Consumer Complaint, Grievance, Appeals Procedures
17. CIRTS Reporting Policies and Procedures
18. Sample of Privacy Notice Issued to Clients (HIPAA)
19. Sample of Notification to Clients Regarding Collection of Social Security Number
20. Copayment Policies and Procedures
21. Civil Rights Compliance Documentation
22. Staff Level II Background Procedures
23. E-Verify Procedures
24. IT and Electronic Back-up Procedures
25. Volunteer Policies and Procedures
26. Applicable Required Licenses and Permits
27. Disaster Preparedness Plan and Continuity of Operations Plan (COOP)
28. Conflict of Interest Policies and Procedures
29. Current Equipment Inventory

aa. Detailed Documentation Supporting Contract Expenditures and Units of Service

ab. Client Files

**CERTIFICATION BY AUTHORIZED INDIVIDUAL:**

I hereby certify that the documents identified above currently exist and are available for review upon request.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature Date Name and Title of Authorized Individual