

REQUEST FOR APPLICATIONS FOR

Specialized Services for Persons with Disabilities and Nursing Home Transition

ISSUING OFFICE

**Commonwealth of Pennsylvania
Department of Human Services
Bureau of Procurement and Contract Management
Room 528 Health and Human Services Building
625 Forster Street
Harrisburg, PA 17120**

25-RFA-13931

DATE OF ISSUANCE

October 17, 2025

**REQUEST FOR APPLICATIONS FOR
Specialized Services for Persons with Disabilities and Nursing Home Transition**

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CALENDAR OF EVENTS

The Commonwealth will make every effort to adhere to the following schedule:

Activity	Responsibility	Date
Deadline to submit questions via email to RA-PWRFAQUESTIONS@PA.GOV	Potential Applicants	October 27, 2025 12:00 PM EST
Answers to Potential Applicant questions posted to the Department of General Services website at http://www.emarketplace.state.pa.us/Search.aspx no later than this date.	DHS	November 7, 2025
Please monitor this website for all communications regarding this Request for Applications.	Potential Applicants	Ongoing
Application must be received by the Issuing Office at RA-PWRFAQUESTIONS@PA.GOV as provided in Part I, Sections I-10 and I-11.A and Part III, Section III-3.	Applicants	December 5, 2025 12:00 PM EST

PART I

GENERAL INFORMATION

- I-1. Purpose.** This Request for Applications (“RFA”) provides to those interested in submitting applications for the subject procurement (“Applicants”) sufficient information to enable them to prepare and submit applications for the Department of Human Services’ (“Department”) consideration on behalf of the Commonwealth of Pennsylvania (“Commonwealth”) to satisfy a need for Specialized Services for Persons with Disabilities and Nursing Home Transition (“Project”). This RFA contains instructions governing the requested applications, including the requirements for the information and material to be included; a description of the service to be provided; requirements that Applicants must meet to be eligible for consideration; general evaluation criteria; and other requirements specific to this RFA.
- I-2. Issuing Office.** The Department’s Office of Administration, Bureau of Procurement and Contract Management (“Issuing Office”) has issued this RFA on behalf of the Commonwealth. The sole point of contact in the Commonwealth for this RFA shall be Charles Connahan, RA-PWRFAQUESTIONS@PA.GOV, the Issuing Officer for this RFA. Please refer all inquiries to the Issuing Officer.
- I-3. Overview of Project.** The Department’s Office of Long-Term Living (“OLTL”) is charged with the statewide administration of the Nursing Home Transition (“NHT”) Program. The NHT Program was developed to assist and empower individuals who want to move from a nursing facility back to a less restrictive community setting of their choice. Through the NHT Program, participants can receive the guidance and support they need to make informed choices about their long-term services and supports. Additionally, OLTL oversees the delivery of Specialized Services to participants with Other Related Conditions (“ORCs”), who have been identified through the Pre-Admission Screening and Resident Review (“PASRR”) process as needing to receive additional services in a nursing facility. Specialized Services consist of training, service coordination, advocacy, peer counseling and support groups, community integration, and related transportation, which enable participants to acquire, regain, improve, or maximize their skills and abilities, to live a more productive and satisfying life in the least restrictive setting possible.

This Project combines both the provision of Specialized Services to identified nursing facility residents and the provision of NHT services to eligible nursing facility residents who wish to return to a community setting.

The provision of Specialized Services entails providing, on a statewide basis, information to individuals residing in nursing facilities who have been determined to have a condition that meets program criteria as an ORC for which they require Specialized Services, and supportive services to those identified as needing Specialized Services and are not enrolled in managed long-term care, including Community HealthChoices (“CHC”) or Living Independence for the Elderly (“LIFE”). The provision of NHT services entails providing coordination services to nursing facility residents, excluding residents enrolled in managed long-term care, who wish to transition from the facility to a less restrictive community setting. With the implementation of statewide managed long-term care, both Specialized Services and NHT services for individuals who are enrolled in CHC are now provided by the CHC managed care organizations (“MCOs”) or LIFE providers; however, this Project will provide ORC-Specialized Services and NHT services to individuals who are not enrolled in managed long-term care at the time of service and will provide for Peer Counselors for Evaluation of Durable Medical Equipment (“DME”) and explanations of the PASRR determination for all qualifying individuals, regardless of managed care enrollment.

For individuals who are not enrolled in managed long-term care, the selected Applicant shall function as the Local Contact Agency (“LCA”) for the purposes of compliance with federal requirement Minimum Data Set (“MDS”) Section Q, of the Centers for Medicare and Medicaid Services (“CMS”) Resident Assessment Instrument Manual whereby nursing facilities must refer individuals who have requested to speak to someone about transitioning to the community to an identified LCA.

I-4. Objectives.

A. General. The Department is seeking an Applicant able to provide supportive services and perform key program tasks for individuals receiving nursing facility services and to provide the necessary assistance to residents who choose to transition from the nursing facility to a less restrictive setting.

B. Specific. Specific objectives encompassed by this RFA include:

1. The operation of the Specialized Services fee-for-service program for persons with an ORC, as mandated by federal Omnibus Budget Reconciliation Act (“OBRA”) regulations, in accordance with applicable directives, including **Appendix I, Specialized Services Directives**.

2. The provision of Peer Counselors for evaluation of DME needs for certain participants residing in nursing facilities. The DME evaluation includes assessment of needs for wheelchairs, specialty beds, and augmentative communication devices, for qualifying residents of nursing facilities.

3. The provision of intensive service coordination to nursing facility residents who meet the NHT participant definition and who are not enrolled in managed long-term care, and the provision of outreach and education to nursing facilities regarding NHT and Home and Community Based Services (“HCBS”). NHT coordination services must be aimed at overcoming barriers to transition and must be provided in accordance with applicable program and policy directives issued by OLTL.

I-5. Type of Agreement. The Department intends to award one agreement as the result of this RFA. If the Department enters into an agreement, it will be a fee-for service agreement containing the Standard Grant Terms and Conditions as shown in **Appendix F** of this RFA. The Department, in its sole discretion, may undertake negotiations with Applicants whose applications, in the judgment of the Department, show them to be qualified, responsible and capable of performing the Project.

I-6. Rejection of Applications. The Department, in its sole and complete discretion, may reject any application received because of this RFA.

I-7. Incurring Costs. The Commonwealth and the Department are not liable for any costs an Applicant incurs in the preparation and submission of its application, in participating in the RFA process, or in anticipation of agreement award.

I-8. Questions & Answers. If an Applicant has questions regarding this RFA, the Applicant must submit the questions by email (**with the subject line “RFA 25-RFA-13931 Question”**) to the Issuing Officer named in **Part I, Section I-2** of this RFA. If the Applicant has questions, they must be submitted as they arise via email but **no later than** the date stated in the Calendar of Events. The Applicant shall not attempt to contact the Issuing Officer by any other means.

When questions are submitted after the date specified in the Calendar of Events, the Issuing Officer *may* respond to questions of an administrative nature by directing the questioning Applicant to specific provisions in the RFA. If the Department decides to respond to a non-administrative question *after* the date for receipt of questions, the Department will provide the answer to all Applicants through an addendum.

All questions and responses will be posted on the Department of General Services (“DGS”) website and are considered as an addendum to, and part of, this RFA in accordance with RFA **Part I, Section I-9** of this RFA.

I-9. Addenda to the RFA. If the Department deems it necessary to revise any part of this RFA before the application response date, the Department will post an addendum to eMarketplace at <http://www.emarketplace.state.pa.us/Search.aspx>. It is the Applicant’s responsibility to periodically check the website for any new information or addenda to the RFA. The Department shall not be bound by any verbal information, nor shall it be bound by any written information that is not either contained within the RFA or formally issues as an addendum.

I-10. Response Date. To be considered for selection, Applicants must submit electronic copies of their applications to the Issuing Office and the Issuing Office must receive the applications **no later than** the date and time specified in the Calendar of Events. Electronic copies of applications must be submitted to RA-PWRFAQUESTIONS@PA.GOV. Applicants should allow sufficient time for electronic submission and receipt of their applications. The Department will **not** accept hard copy applications or applications via facsimile transmission. **The Department will reject late applications or portions of applications.** “Late” includes, but is not limited to, applications which are received within a minute or less after the due date and time, as well as applications that are received several hours or days after the due date and time.

I-11. Application Requirements.

A. Application Submission: To be considered, Applicants should submit a complete response to this RFA to the Issuing Office, using the format provided in **Part I, Section I-11.B**, providing **one copy of the Technical Submittal and one copy of the Cost Submittal**, via email to RA-PWRFAQUESTIONS@PA.GOV. The subject line of the email must specify “25-RFA-13931 Application.” Email attachments are limited to 10 MB, cumulatively, per email, and files may not be sent in any compressed format. Any part of the application or its attachments over that limit must be sent via separate emails, with each labeled “25-RFA-13931 Application Part X of Y” (total number of emails). The Department will not accept encrypted email for the application submission.

The electronic response must be in Microsoft Office or Microsoft Office-compatible format to include Adobe Acrobat pdf files, except for **Appendix C, Cost Submittal**, which should be submitted as a Microsoft Excel Spreadsheet; and any spreadsheets must be in Microsoft Excel. If an Applicant designates information as confidential or proprietary or trade secret protected in accordance with **Part I, Section I-17**, the Applicant must also include one redacted version of the Technical Submittal. Applicants may not lock or protect any cells or tabs on the Cost Submittal Worksheet. **Applicants shall not lock, encrypt or restrict access to any files.** Applicants shall make no other distribution of its application to any other Applicant or Commonwealth official or Commonwealth consultant. Each application page should be numbered for ease of reference. An official authorized to bind the Applicant to its provisions must sign the application. If the official signs the **Application Cover Sheet (Appendix A** to this RFA) and the Application Cover Sheet is attached to the Applicant’s application, the requirement will be met. For this RFA, the application

must remain valid for 120 days or until an agreement is fully executed. If the Department selects the Applicant's application for award, the contents of the selected Applicant's application will become, except to the extent the contents are changed through Best and Final Offers or negotiations, agreement obligations.

Each Applicant submitting an application specifically waives the ability to withdraw or modify it, except that the Applicant may withdraw its application by written notice and submitting it to RA-PWRFAQUESTIONS@PA.GOV prior to the date and time specified in the Calendar of Events of when applications are due. An Applicant may modify its submitted application prior to the exact hour and date set for application receipt only by submitting a new application or modification that complies with the RFA requirements.

B. Application Format: Applicants should submit their applications in the format, including heading descriptions, outlined below. To be considered, the application should respond to all application requirements. Applicants should provide any other information thought to be relevant, but not applicable to the enumerated categories, as an appendix to the application. All cost data relating to this application should be kept separate from and not included in the Technical Submittal. Applicants should not reiterate technical information in the Cost Submittal. Each application shall consist of the following two separate submittals:

1. Technical Submittal:

a. Applicants should format their responses as outlined below and should consider the email attachment file size limitations included in **Section I-11.A** for file contents. **Do not include cost data in the Technical Submittal.** The Technical Submittal shall include the following sections:

- Table of Contents
- Statement of the Project
- Management Summary
- Qualifications
- Training
- Work Plan
- Requirements
- Reports & Project Control
- Performance Standards

b. Complete, sign and include **Appendix D, Lobbying Certification** and if applicable, the **Disclosure of Lobbying Activities.**

c. Complete and include **Appendix E, Worker Protection and Investment Certification Form.**

2. Cost Submittal, in response to Part IV;

Technical Submittals must adhere to the following format:

- a.** Pages must be 8.5 by 11 inches with right and left margins of one inch.
- b.** Must use Arial or Times New Roman font with a type size of 12.
- c.** Section headings, shown in this **Part I, Section I-11**, should be used.
- d.** Include a page number and identification of the Applicant in the page footer of each page.

- e. Specifically reference materials provided in any appendix by page numbers in the body of the application.
- f. Exceptions for paper and font size are permissible for project schedule or for graphical exhibits and material in appendices.

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

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

I-12. Economy of Preparation. Applicants should prepare applications simply and economically, providing a straightforward, concise description of the Applicant's ability to meet the requirements of the RFA.

I-13. Alternate Applications. The Department has identified the basic approach to meeting its requirements, allowing Applicants to be creative and propose their best solution to meeting these requirements. The Department will not accept alternate applications.

I-14. Discussions for Clarifications and Negotiations. Applicants may be required to make an oral or written clarification of their applications, or both, to the Department to ensure thorough mutual understanding and Applicant responsiveness to the solicitation requirements. The Department will initiate requests for clarifications. Clarifications may occur at any stage of the evaluation and selection process prior to the award of an agreement.

The Department, in its sole discretion, may undertake negotiations with Applicants whose applications, shown them to be qualified, responsible, and capable of performing the Project. Negotiations may occur at any stage of the evaluation and selection process prior to the award of an agreement.

I-15. Oral or Written Presentations. Applicants may be required to make an oral or written presentation of their applications to the Department to demonstrate an Applicant's capabilities and ability to provide the services required in the RFA. The Department will initiate requests for presentations; and for oral presentations, may include a request that key personnel be present. The oral presentation will be held in Harrisburg, Pennsylvania. Presentations may be requested at any stage of the evaluation and selection process prior to the award of the agreement.

I-16. Prime Applicant Responsibilities. The selected Applicant must perform services valued at least at 50% of the total agreement cost. Nevertheless, the Department will require the Applicant assume responsibility for all services offered in its application whether it produces them itself or by sub-agreement. The Department will consider the selected Applicant to be the sole point of contact for all agreement matters.

I-17. Application Contents.

A. Confidential Information. The Commonwealth does not require, confidential proprietary information or trade secrets be included as part of Applicants' submissions. Except as provided, Applicants should not label applications as confidential or proprietary or trade secret protected. Any

Applicant who determines that it must divulge such information as part of its application must submit the signed written statement described in Subsection C below and must provide a redacted version of its application in accordance with **Part I, Section I-11.A**, which removes only the confidential proprietary information and trade secrets, for required public disclosure purposes.

- B. **Commonwealth Use.** All material submitted with the application shall be the property of the Commonwealth. The Commonwealth has the right to use any or all ideas not protected by intellectual property rights that are presented in any application regardless of whether the application becomes part of an agreement. Notwithstanding any Applicant copyright designations contained on applications, the Commonwealth shall have the right to make copies and distribute applications internally and to comply with public record or other disclosure requirements under the provisions of any Commonwealth or United States statute or regulation, or rule or order of any court of competent jurisdiction.
- C. **Public Disclosure.** After the award of a grant, all applications are subject to disclosure in response to a request for public records made under the Pennsylvania Right-to-Know-Law, 65 P.S. § 67.101, et seq. If an application contains confidential proprietary information or trade secrets, the Applicant must provide a signed written statement to this effect with the submission in accordance with 65 P.S. § 67.707(b) for the information to be considered exempt under 65 P.S. § 67.708(b)(11) from public records requests. Refer to **Appendix B** of the RFA for a **Trade Secret Confidential Proprietary Information Notice Form** that may be utilized as the signed written statement.

I-18. Best and Final Offers (“BAFO”).

- A. While not required, the Department may conduct discussions with Applicants for the purpose of obtaining BAFOs. To obtain BAFOs, the Department may do one or more of the following, in any combination and order:
 - 1. Schedule oral presentations;
 - 2. Request revised applications; and
 - 3. Enter into pre-selection negotiations.
- B. The following Applicants will **not** be invited by the Department to submit a BAFO:
 - 1. Those Applicants, which the Department has determined to be not responsible or whose applications the Department has determined to be not responsive.
 - 2. Those Applicants, which the Department has determined from the submitted and gathered information, do not possess the experience or qualifications to ensure good faith performance of the agreement.
 - 3. Those Applicants whose raw score for their Technical Submittal is less than 75% of the total amount of raw technical points allotted to the technical criterion.

The Department may further limit participation in the BAFO process to those remaining responsible Applicants that the Department has, within its discretion, determined to be within the top competitive range of responsive applications.

C. The Evaluation Criteria found in **Part II, Section II-4**, shall also be used to evaluate the BAFOs.

D. Price reductions offered shall have no effect upon the Applicant's Technical Submittal.

E. The Department, in its sole discretion, also may undertake negotiations with Applicants whose applications, in the judgement of the Department, show them to be qualified, responsible, and capable of performing the Project.

I-19. News Releases. Applicants shall not issue news releases, Internet postings, advertisements or any other public communications pertaining to this Project without prior written approval of the Department, and then only in coordination with the Department.

I-20. Restriction of Contact. From the issue date of this RFA until the Department selects an application for award, the Issuing Officer is the sole point of contact concerning this RFA. Any violation of this condition may be cause for the Department to reject the offending Applicant's application. If the Department later discovers that the Applicant has engaged in any violations of this condition, the Department may reject the offending Applicant's application or rescind its agreement. Applicants shall not distribute any part of their applications beyond the Issuing Office. An Applicant who shares information contained in its application with other Commonwealth personnel or consultants or competing Applicant personnel may be disqualified.

I-21. Department Participation. The selected Applicant shall provide all services, supplies, facilities, and other support necessary to complete the identified work, except as otherwise provided in this **Part I, Section I-21**. The Commonwealth will assign a Grant Administrator to manage the administration and monitoring of any agreement resulting from this RFA.

The Department may require the selected Applicant to undertake a Readiness Review to discuss the selected Applicant's transition plan to provide for a smooth transition and mitigate risk to the Commonwealth, the Department, and clients.

I-22. Term of Agreement. The term of the agreement will commence on the Effective Date and will end **three years** after the Effective Date. Subject to the performance of the selected Applicant and other considerations, the Department may extend the agreement on the same terms and conditions for up to two additional one-year periods. The Department will fix the Effective Date after the agreement has been fully executed by the selected Applicant and by the Commonwealth and all approvals required by the Commonwealth have been obtained. The selected Applicant shall not start the performance of any work prior to the Effective Date of the agreement and the Commonwealth shall not be liable to pay the selected Applicant for any service or work performed or expenses incurred before the Effective Date.

I-23. Applicant's Representations and Authorizations. By submitting its application, each Applicant understands, represents, and acknowledges that:

A. All Applicant's information and representations in the application are material and important, and the Department will rely upon its contents in awarding the agreement. The Commonwealth may treat any misstatement, omission or misrepresentation as fraudulent concealment of the true facts relating to the application, punishable pursuant to 18 Pa. C.S. § 4904.

B. The Applicant has arrived at the price(s) and amounts in its application independently and without consultation, communication, or agreement with any other Applicant or potential Applicant.

- C. The Applicant has not disclosed the price(s), the amount of the application, nor the approximate price(s) or amount(s) of its application to any other firm or person who is an Applicant or potential applicant, and the Applicant shall not disclose any of these items on or before the application submission deadline specified in the Calendar of Events.
- D. The Applicant has not attempted, nor will it attempt, to induce any firm or person to refrain from submitting an application, or to submit an application higher than its application, or to submit any intentionally high or noncompetitive application or other form of complementary application.
- E. The Applicant makes its application in good faith and not pursuant to any agreement or discussion with, or inducement from, any firm or person to submit a complementary or other noncompetitive application.
- F. To the best knowledge of the person signing the application for the Applicant, the Applicant, its affiliates, subsidiaries, officers, directors, and employees are not currently under investigation by any governmental agency and have not in the last **four** years been convicted or found liable for any act prohibited by State or Federal law in any jurisdiction, involving conspiracy or collusion with respect to bidding or proposing on any public agreement, except as the Applicant has disclosed in its application.
- G. To the best of the knowledge of the person signing the application for the Applicant and except as the Applicant has otherwise disclosed in its application, the Applicant has no outstanding, delinquent obligations to the Commonwealth including, but not limited to, any state tax liability not being contested on appeal.
- H. The Applicant is not currently under suspension or debarment by the Commonwealth and has not been precluded from participation in any federally funded health care program by any other state or the federal government, and if the Applicant cannot so certify, then it shall submit along with its application a written explanation of why it cannot make such certification.
- I. The Applicant has not made, under separate agreement with the Department, any recommendations to the Department concerning the need for the services or the specifications for the services described in the application.
- J. Each Applicant, by submitting its application, authorizes Commonwealth agencies to release to the Department information concerning the Applicant's Pennsylvania taxes, unemployment compensation and workers' compensation liabilities.
- K. Until the selected Applicant receives a fully executed and approved written agreement from the Issuing Office, no legal and valid agreement exists, in law or in equity, and the Applicant shall not begin to perform.
- L. The Applicant is not currently engaged and will not during the duration of the agreement engage, in a boycott of a person or an entity based in or doing business with a jurisdiction that the Commonwealth is not prohibited by Congressional statute from engaging in trade or commerce.

I-24. Notification of Selection.

A. Negotiations. The Department will notify all Applicants in writing of the Applicant selected for negotiations after the Department has determined, taking into consideration all evaluation factors, the application that is the most advantageous to the Department.

B. Award. Applicants whose applications are not selected will be notified when negotiations have been successfully completed, and the Department has received the final negotiated agreement signed by the selected Applicant.

I-25. Use of Electronic Versions of this RFA. This RFA is being made available by electronic means. If an Applicant electronically accepts the RFA, the Applicant accepts full responsibility to ensure that no changes are made to the RFA. If a conflict arises between a version of the RFA in the Applicant's possession and the Issuing Office's version of the RFA, the Issuing Office's version shall govern.

PART II

CRITERIA FOR SELECTION

II-1. Mandatory Responsiveness Requirements. To be eligible for selection, an application must:

- A. Be timely received from an Applicant (see **Part I, Section I-10**);
- B. Be properly signed by the Applicant (see **Part I, Section I-11.A**);

II-2. Technical Nonconforming Applications. The two Mandatory Responsiveness Requirements set forth in **Section II-1** are the only RFA requirements that the Commonwealth will consider to be *non-waivable*. The Department may, in its sole discretion, (1) waive any other technical or immaterial nonconformities in an Applicant's application, (2) allow the Applicant to cure the nonconformity, or (3) consider the nonconformity in the scoring of the application.

II-3. Evaluation. The Department has selected a committee of qualified personnel to review and evaluate the Technical Submittals of the timely submitted applications that are eligible for selection. The Department will provide written notice of its selection for negotiations the responsible Applicant whose application is determined to be the most advantageous to the Commonwealth after taking into consideration all evaluation factors.

II-4. Evaluation Criteria. The following criteria will be used in evaluating each application:

A. Technical: The Department has established the weight for the Technical criterion as **80%** of the total points. Evaluation will be based upon the following: **Understanding the Project, Applicant Qualifications, Personnel Qualifications, and Soundness of Approach.**

- **Understanding the Project.** This includes the Applicant's understanding of Commonwealth's needs that generated the RFA, the objectives of the RFA, and of the nature and scope of the work involved.
- **Applicant Qualifications.** This includes, but is not limited to, the ability of the Applicant to meet the terms of the RFA, including the time constraints involved with the Project and the quality, relevancy, and recentness of projects completed. This also includes the Applicant's ability to undertake a Project of this size.
- **Personnel Qualifications.** This includes, but is not limited to, the competence and sufficiency of the personnel and staff who would be assigned to the Project by the Applicant.
- **Soundness of Approach.** This includes, but is not limited to, the Applicant's technical approach for completion of all services by this RFA, if it is responsive to all requirements of the RFA and if it meets the Project's objectives.

The final Technical scores are determined by giving the maximum number of technical points available to the application with the highest raw technical score. The remaining applications are rated by applying the formula located at:

https://www.dgs.pa.gov/Materials-Services-Procurement/Procurement-Resources/Pages/RFP_SCORING_FORMULA.aspx

- B. Cost:** The Department has established the weight for the Cost criterion for this RFA as **20%** of the total points. The cost criterion is rated by giving the application with the lowest total cost the maximum number of Cost points available. The remaining applications are rated by applying the formula located at:

https://www.dgs.pa.gov/Materials-Services-Procurement/Procurement-Resources/Pages/RFP_SCORING_FORMULA.aspx

- II-5. Applicant Responsibility.** To be responsible, an Applicant must submit a responsive application and possess the capability to fully perform the agreement requirements in all respects and the integrity and reliability for the good faith performance of the agreement.

For an Applicant to be considered responsible for this RFA and eligible for selection for BAFO and selection for negotiations:

- A.** The total score for the Technical Submittal of the application must be greater than or equal to **75%** of the **available raw technical points**;
- B.** The Applicant must be free of conflicting activities or be able to become conflict free prior to Readiness Review as determined by the Department in its sole discretion (Section III-4.A.2); and

Further, the Department will award an agreement only to an Applicant determined to be responsible in accordance with the most current version of Commonwealth Management Directive 215.9, Contractor Responsibility Program.

II-6. Final Ranking and Award.

- A.** After any BAFO process is conducted, the Issuing Office will combine the evaluation committee's final technical scores and the final cost scores, in accordance with the relative weights assigned to these areas as set forth in this **Part II**.
- B.** The Issuing Office will rank responsible Applicants according to the total overall score assigned to each, in descending order.
- C.** Except as provided in **Section II-6.D** the Department must select for negotiations the Applicant with the highest overall score.
- D.** The Department has the discretion to reject all applications or cancel the RFA, at any time prior to the time an agreement is fully executed, when it is in the best interests of the Commonwealth. The reasons for the rejection or cancellation shall be made part of the RFA file.

PART III

TECHNICAL SUBMITTAL

III-1. Statement of the Project. State in succinct terms your understanding of the Project and the service required by this RFA. The Applicant's response should demonstrate that the Applicant fully understands the scope of services to be provided, the Applicant's responsibilities, and how the Applicant will effectively manage the grant.

Applicant Response

III-2. Management Summary. Include a narrative description of the proposed effort and a list of the items to be delivered and services to be provided. The Applicant should condense and highlight the contents of the Technical Submittal in a manner that allows a broad understanding of the entire Technical Submittal.

Applicant Response

III-3. Qualifications.

A. Company Overview. The Applicant should describe the corporate history and relevant experience of the Applicant. This section must detail information on the ownership of the company (names and percent of ownership), the date the company was established, the date the company began operations, the physical location of the company, and the current size of the company. The Applicant should provide a corporate organizational chart.

The Applicant should describe its corporate identity, legal status and forms, including the name, address, telephone number, and email address for the legal entity that is submitting the application. In addition, the Applicant should provide the name of the principal officers, a description of its major services, and any specific licenses and accreditations held by the Applicant.

Applicants should provide similar organizational background information on any significant subcontractor for services. A "significant subcontractor" is defined as an organization undertaking more than 10% on the total cost basis of the work associated with this RFA.

If an Applicant is proposing to use the services or products of a subsidiary or affiliated firm, the Applicant should describe the business arrangement with that entity and the scope of the services the entity will provide.

If the experience of any proposed subcontractor is being used to meet the qualifications and requirements of this RFA, the Applicant should provide the same information as listed above for the subcontractor. This information must be presented separately within this section, clearly identifying the subcontractor experience and name of the subcontractor.

The Applicant should disclose any agreement or agreement cancellations, or terminations within five years preceding the issuance of this RFA. If an agreement or agreement was canceled or terminated for lack of performance, the Applicant must provide details on the customer's allegations, the Applicant's position relevant to the allegations, and the final resolution of the cancellation or the termination. The Applicant must include each customer's Company or entity name, address, contact name, phone number, and email address.

The Department may disqualify an Applicant based on a failure to disclose such a cancelled or terminated agreement or agreement. If the Department learns about such a failure to disclose after an agreement is awarded, the Department may terminate the agreement.

Applicant Response

- B. Prior Experience.** The Applicant should include experience in providing professional and programmatic assistance in the areas of specialized supportive services and key program tasks for home and community-based programs and services provided in a nursing facility. Experience should be work done by individuals who will be assigned to this Project as well as that of your company. Studies or projects referred to should be identified and the name of the customer shown, including the name, address and telephone number of the responsible official of the customer, company, or agency who may be contacted.

Applicant Response

- C. Personnel.** Include the number of executive and professional personnel, analysts, auditors, researchers, programmers, consultants, etc., who will be engaged in the work. Show where these personnel will be physically located during the time they are engaged in the Project. For “Key Personnel”, defined as the Project Manager, include the employee’s name and, through a resume or similar document, the Project personnel’s education and experience in similar in size and scope projects. Indicate the responsibilities each individual will have in this Project and how long each has been with your company. For non-Key Personnel, defined as any personnel besides the Project Manager, include position descriptions and minimum qualifications.

Submitted responses are not to include personal information that will, or will be likely to, require redaction to release of the application under the Pennsylvania Right-to-Know Law, including but not limited to home addresses and phone numbers, Social Security Numbers, driver’s license numbers or numbers from state identification cards issued in lieu of a driver’s license, and financial account numbers. If the Commonwealth requires any of this information for security validation or other purposes, the information will be requested separately and as necessary.

Include organizational charts outlining the staffing, reporting relationships and staff members in its description. Show the total number of staff proposed and indicate the Full Time Equivalents (“FTE”) to account for any additional staff (non-Key Personnel) that are not assigned on a full-time basis. Provide similar information for any subcontractors that are proposed. The organizational chart must illustrate the lines of authority, designate the positions responsible and accountable for the completion of each component in the RFA, indicate the names and job title and number of personnel that will be assigned to each role, and the number of hours per week each person is projected to work on the Project. The organizational chart must clearly indicate any functions that are subcontracted along with the name of the subcontractors’ entities and the services they will perform.

Key Personnel Diversions or Replacement. Once Key Personnel are approved by the Department, the selected Applicant may not divert or replace personnel without prior approval of the Department’s Grant Administrator. The selected Applicant must provide notice of a proposed diversion or replacement to the Department’s Grant Administrator at least 30 calendar days in advance and provide the name, qualifications, and background check (if required) of the person who will replace the diverted personnel. The Department’s Grant Administrator will notify the selected Applicant within ten business days of the diversion notice whether the proposed diversion is acceptable and if the replacement was approved.

“Divert” or “diversion” is defined as the transfer of personnel by the selected Applicant or its subcontractor to another assignment within the control of either the Applicant or subcontractor. Advance notification and approval does not include changes in Key Personnel due to resignations, death, disability, dismissal for cause or dismissal as a result of the termination of a subcontract or any other causes that are beyond the control of the selected Applicant or its subcontractor. The Department’s Grant Administrator must approve the replacement personnel.

The Department’s Grant Administrator may request that the selected Applicant remove a person from this Project at any time. For vacancies other than those caused by diversions and unless otherwise approved by the Grant Administrator, the selected Applicant will have ten business days to interim fill and 60 calendar days to permanently fill the vacancy with a person acceptable in terms of experience and skills, subject to the Department Grant Administrator’s approval.

Applicant Response

D. Subcontractors. Provide a subcontracting plan for all subcontractors who will be assigned to the Project. The selected Applicant is prohibited from subcontracting or outsourcing any part of this Project without the express written approval of the Commonwealth. Upon award of the agreement, subcontractors included in the application submission are approved. For each position included in your subcontracting plan provide:

1. Name of subcontractor;
2. Address of subcontractor;
3. Primary contact name, email address and phone number;
4. Type of organization;
5. Date of formation;
6. Status of charter and corporate charter number;
7. Unique Entity Identifier Number;
8. SAP/SRM Vendor Number;
9. Number of years worked with the subcontractor;
10. Number of employees by job category to work on this Project;
11. Description of services to be performed;
12. What percentage of time the staff will be dedicated to this Project;
13. Geographical location of staff; and
14. Resumes (if appropriate and available).

If applicable, the Applicant’s subcontractor information should include the employees’ names, education and experience in the services outlined in this RFA. Information provided should also include the responsibilities each individual will have in this Project and how long each has been with subcontractor’s company.

Applicant Response

III-4. Work Plan. Describe in narrative form your technical plan for accomplishing the work with the Project tasks and the major milestones and deliverables provided below as a reference point. Indicate the number of person hours allocated to each task. Modifications of tasks are permitted; however, reasons for changes should be fully explained. Include a Program Evaluation and Review Technique (“PERT”) or similar type display, time related, showing each event. If more than one approach is apparent,

comment on why you chose this approach. The relationship between Key Personnel and the specifics tasks, assignments, and deliverables proposed to accomplish the scope of work should also be described.

The Applicant should describe its management approach, including how it will implement its proposed work plan. Where applicable, the Applicant should provide specific examples of methodologies or approaches, including monitoring approaches, it will use to fulfill the RFA requirements and examples of similar experience and approach on comparable projects. The Applicant should describe the management and monitoring controls it will use to achieve the required quality of services and all performance requirements. The Applicant should also address its approach to internally monitor and evaluate the effectiveness of meeting the agreement requirements.

The Applicant should include in the work plan their planned approach and process for establishing and maintaining communication between all parties and a technical approach that is aligned with all written specifications and requirements contained in the RFA.

Tasks:

A. Transition. As part of their application, the Applicant should prepare and submit a proposed comprehensive transition plan detailing the activities necessary to efficiently transition the grant operation from the incumbent grantee. The Applicant should address in its transition plan the resources required for the transition, including those from the Department, the incumbent grantee, and the Applicant. The selected Applicant will be afforded a maximum of one month for a transition period at the beginning of the grant term before beginning services. Describe your transition plan to meet the following requirements:

1. Transition Plan:

- a. Complete knowledge acquisition from the Department for those activities necessary for the selected Applicant to start up and complete the transition plan to provide the required services.
- b. Establish accurate assessments and strong accountability controls.
- c. Acquire necessary staffing, including Service Coordinators, Community Integration Specialists, Peer Counselors, NHT Coordinators, and other necessary staff;
- d. Develop training materials;
- e. Provide training to staff in conjunction with OLTL staff; and
- f. Establish appropriate infrastructure based on the submitted work plan.

2. Transition Progress. During the transition, the selected Applicant shall provide the Department with transition progress assessments and status updates. The selected Applicant shall coordinate with the Department regarding transition tasks, prioritizing issues, or conflicting activities interfering with maintaining business operations. Applicants should describe how they will meet this requirement.

This may also include changes or modifications necessary to accommodate service requirements included in this RFA.

The selected Applicant will not be permitted to begin performance of the grant services if the selected Applicant does not demonstrate to OLTL acceptable evidence of successful implementation of the transition plan. The selected Applicant shall include in the transition plan how the selected Applicant will comply with the current state and federal regulatory requirements during an onsite visit with the Department staff.

OLTL and the selected Applicant will determine a mutually agreed upon date for the training.

During the transition, the selected Applicant shall participate in regular status meetings with the Department, which may be face-to-face or via conference call. Any outstanding issues that are presented to the selected Applicant must be resolved prior to providing services, unless agreed upon by the Department.

Applicant Response

B. Explain PASRR Determinations and Administer the Specialized Service Plans (“SSP”).

Certain individuals with ORCs who are eligible for nursing facility placement may be entitled to Specialized Services. OLTL will make a determination as to whether an individual needs Specialized Services and will send a determination letter (**Appendix L, Determination Letter Indicating Need of Specialized Services**) with an addendum explaining Specialized Services (**Appendix J, Specialized Services Addendum**) to these individuals. Individuals who are enrolled in managed long-term care will receive any needed Specialized Services through their CHC-MCO or LIFE provider and not from the selected Applicant; however, the selected Applicant shall provide these individuals with an explanation of their PASRR determination, including the description of Specialized Services. The selected Applicant shall provide any needed Specialized Services to individuals who are not enrolled in managed long-term care, in addition to the PASRR Explanation. For individuals not enrolled in managed long-term care, the selected Applicant shall develop and administer SSPs (**Appendix K, Specialized Services Plan**) in accordance with applicable Specialized Services directives, as may be modified by the Department (see **Appendix I, Specialized Services Directives** for current directive). The selected Applicant shall provide for Specialized Services throughout the Commonwealth, including administering existing SSPs and providing Specialized Services currently being administered and provided throughout the Commonwealth.

The selected Applicant shall provide the following services:

- 1. Explain Final Determinations to Nursing Facility Applicants.** (Estimated 480 explanations annually). The selected Applicant shall provide explanations of the PASRR determinations issued by OLTL to all eligible participants, regardless of payer source, based on information contained in the PASRR Identification Form Level 1 Bulletin (**Appendix N, PASRR ID Bulletin**) and the Pennsylvania PASRR Evaluation Form Level 2 Bulletin (**Appendix M, PASRR EV Bulletin**). The selected Applicant shall contact the participant within five business days after receiving the participant file from OLTL to conduct the explanation or schedule the explanation if it cannot be conducted upon the initial contact. If the participant is unable to be contacted, the selected Applicant may contact an authorized representative such as a Power of

Attorney or guardian; however, the participant must be involved in the explanation to the extent possible.

2. **Developing SSPs and Providing Specialized Services to Participants Residing in Nursing Facilities Who Are Not Enrolled in Managed Long-Term Care.** (Estimated 10 monthly and 120 annually.) The selected Applicant shall coordinate SSP development, provide or arrange for the provision of Specialized Services, and facilitate and monitor the provision of Specialized Services for participants in nursing facilities who are not enrolled in managed long-term care in accordance with applicable regulations and directives, including **Appendix I, Specialized Services Directives**.
3. **Offer the Specialized Services identified below (at minimum).** The selected Applicant shall monitor the quality, appropriateness, and timeliness of the Specialized Services provided to non-managed long-term care enrolled nursing facility residents throughout the Commonwealth. The selected Applicant shall be capable of providing the following Specialized Services:
 - a. **Service Coordination and Advocacy.** Service Coordination includes developing and maintaining an SSP; facilitating and monitoring the integration of Specialized Services with the provision of nursing facility and specialized rehabilitative services; and assisting and advocating for nursing facility residents on issues that pertain to residing in nursing facilities. Advocacy is assistance that helps the participant gain acceptance from others, obtain the services needed to function as independently as possible, or both. The selected Applicant shall provide Service Coordination at the frequency needed to develop and maintain the SSP and shall provide advocacy at points of contact with the participant as appropriate or as requested by the participant or authorized representative.
 - b. **Peer Counseling and Support Groups.** Peer Counseling links residents to support groups or to role models or mentors who are persons with physical disabilities and who reside outside of a nursing facility. The selected Applicant shall link the participant to a peer counselor, mentor, or support group as indicated in the SSP.
 - c. **Training.** Training is classroom instruction, individual instruction, or natural situations where the participant acquires, regains, or avoids the loss of skills in key areas. The selected Applicant shall assist the participant with identifying training needs and provide or arrange for the appropriate trainings.
 - d. **Community Integration.** Community integration exposes participants to a variety of community experiences to increase their level of independence. Community integration must have goals associated with each activity. The OLTL Bulletin, Community Integration Directive provided in the Medical Assistance Home and Community Based Waiver Programs, **Appendix H, Community Integration Directive**, provides information and requirements regarding community integration. The selected Applicant shall provide support in the development and documentation of the participant's community integration goals and facilitate activities that will allow or help the participant to reach those goals.
 - e. **Equipment and Assessments.** The equipment and assessments service is only available to participants who are relocating from nursing facilities to community settings and includes the purchase of necessary equipment and related assessments. Alternate funding sources, such as Medical Assistance or other insurance, must be exhausted before the Department will reimburse for this service. The selected Applicant shall identify the need for equipment and assessments and make referrals to OLTL for equipment and assessments that qualify for

- payment under the agreement. If there is a possible alternate funding source identified by the selected Applicant or by OLTL during review of the referral, the selected Applicant shall provide a denial obtained from that source in order to verify that an attempt was made to utilize the alternate funding source.
- f. **Transportation.** The selected Applicant shall arrange for and, when necessary, provide the appropriate type of transportation to enable the participant to participate in or access all Specialized Services identified on their SSP.
4. **Assisting Specialized Services Participants Who Are Not Enrolled in managed long-term care to Obtain Community-Based Housing.** (Estimated 1 monthly and 12 annually) The selected Applicant shall be capable of providing, and shall provide whenever appropriate, the following services to individuals with SSPs that have a goal of returning to live in a community setting:
- a. Identify the need for locating community-based housing, utilizing the information provided on the PASRR and the participant’s preferences as documented in the SSP.
- b. Arrange the relocation and provide Specialized Services to relocating participants as follows:
- i. **Specialized Services for Relocating Participants.** The selected Applicant shall coordinate and monitor intensive Specialized Services, whether provided by the selected Applicant or by a third party, for all relocating participants before the participants move to community-based housing options. The selected Applicant shall provide Specialized Services based on the participant’s choices, needs, and capabilities so that the participant develops skills and abilities to live as independently as possible in an integrated environment. The selected Applicant shall coordinate these Specialized Services with other available relocation assistance, including the NHT program. The selected Applicant shall refer a participant who indicates a desire to return to a community setting to an NHT Coordinator, in accordance with the established NHT referral process as described in **Appendix O, NHT Referral Process Flow Chart.**
- ii. **Community Support Team.** The selected Applicant and the relocating participant together shall identify a Community Support Team (“CST”) to provide for a safe and orderly relocation from the nursing facility to the chosen community-based housing. The CST serves a key role in identifying the participant’s total array of service needs, including housing needs and the appropriate services to meet those needs using the information obtained in the SSP. The type, duration, and arrangement of Specialized Services provided are based on input from the participant and their team members. The selected Applicant shall facilitate the formation of the CST, participate in meetings and planning activities with the CST as needed, and document in the participant’s SSP the type, duration, and arrangement of Specialized Services that the CST recommends.
- iii. **Relocation Logistics.** The selected Applicant shall coordinate with other members of the participant’s CST to assist the participant in finalizing all matters related to the actual move. The selected Applicant shall facilitate timely responses of the nursing facility to all the matters related to the participant’s relocation, including packing and shipping the participant’s personal belongings, providing copies of medical records and other documentation to the participant, transferring the participant’s personal fund balance, requesting that mail be forwarded to the participant’s new address, and providing that all

medication and supplies will be available to the participant upon transition from the facility.

- iv. **Back-Up Plans.** The selected Applicant shall include in each relocating participant's SSP a detailed description of his or her formal and informal back-up systems. The participant has primary responsibility for arranging for people to serve in a back-up capacity to those who would normally perform daily living services for them. The selected Applicant shall encourage the participant to arrange for family, friends, and neighbors to provide back-up services.

The selected Applicant shall provide, coordinate, or both, the necessary training regarding a formal back-up system. Through individual training activities, the selected Applicant shall provide each participant with a clear understanding of and, if necessary, provide written instructions regarding accessing life-saving services.

The selected Applicant shall assist the participant with planning for access to priority services and lifesaving services if the participant is unable to access emergency services in the same manner as an individual without disabilities.

- v. **Financial Arrangements.** The selected Applicant shall verify the relocating participant's income and, if necessary, assist the participant with arranging for receipt of their income in the community. To the extent possible within the selected Applicant's control, the selected Applicant shall coordinate financial arrangements to begin at least 30 calendar days prior to the relocation date so that the participant has adequate income for necessities in the community. The selected Applicant shall involve the participant in the application process to obtain or transfer Social Security benefits, Supplemental Security Income, and other funds and benefits.
- vi. **Arranging for the Provision of Services to Waiver Recipients.** If the relocating participant will be or may be eligible for services through a Medicaid waiver once in the community, the selected Applicant shall assist the participant in applying for waiver services, including obtaining necessary documentation and facilitating the application process with other involved parties, such as the Independent Enrollment Broker and the County Assistance Offices ("CAO"). The selected Applicant shall work with the participant to locate and identify eligible waiver providers within the area to which the participant is relocating. After the participant has identified a provider, the selected Applicant shall assist in finalizing the arrangements for the provision of waiver services, including the furnishing of all documentation necessary to serve the waiver recipient. The selected Applicant shall verify that a participant has the necessary staff available to coordinate services in the community and shall transfer coordination tasks to the waiver coordination agency when that participant is successfully enrolled in the waiver.
- vii. **Referring Participants to Appropriate Services.** In the event a participant is determined ineligible for the waiver programs by the CAO, the selected Applicant shall refer the participant to other programs and agencies that may be able to provide services. The selected Applicant shall verify that a participant has the necessary staff resources available to coordinate services in the community and shall transfer coordination tasks to that staff when the participant is successfully transitioned to the community.

- viii. **Coordinating Specialized Services with NHT Services.** If a participant has expressed a desire to return to a less restrictive community setting and meets the NHT participant definition, the selected Applicant shall coordinate Specialized Services and NHT services to avoid gaps in or duplication of services.

Applicant Response

C. Administer the Peer Counselors for Evaluation of Durable Medical Equipment (“PCEDME”).
(Estimated 167 units monthly and 2000 annually.)

The selected Applicant shall administer the PCEDME in accordance with the requirements outlined in **Appendix P, PCEDME Regulations Packet** as may be updated by the Department. The selected Applicant shall provide Peer Counselors to meet with identified nursing facility residents (currently paraplegic, quadriplegic, and those with a diagnosis of cerebral palsy, spina bifida, amyotrophic lateral sclerosis, or multiple sclerosis), regardless of payer source, to discuss DME needs and to make recommendations to the nursing facility. The nursing facility will then request the equipment, if over \$5,000, through the Department’s DME Program for fee-for-service participants or the managed long-term care service coordinator for participants who are enrolled in managed long-term care. The Department will provide the selected Applicant with a list, including location, of identified nursing facility residents who will need a non-clinical assessment completed. The selected Applicant shall provide the following:

1. Provide training to each Peer Counselor prior to permitting any Peer Counselors to meet with participants. The selected Applicant shall schedule and conduct training sessions for Peer Counselors and shall notify the Department of each training no fewer than 30 calendar days prior to each training. In addition, the selected Applicant shall develop and use procedures to monitor the work performed by Peer Counselors, including compliance with the procedures for the submission of forms and reports.
 - a. The selected Applicant shall develop and obtain the Department’s approval of a training manual for Peer Counselors. The selected Applicant shall provide the approved training manual to each Peer Counselor in conjunction with the training described above. The selected Applicant shall include in the training manual all the following:
 - i. An introduction to the Independent Living Philosophy;
 - ii. An overview of the PCEDME Program;
 - iii. A review of the Peer Counselor’s role and duties;
 - iv. A review of the required forms and tasks, including instructions and procedures for completion and submittal;
 - v. Guidelines on how to successfully communicate with residents and nursing facility staff; and
 - vi. Information on the types of DME available and how they can assist residents;
2. Send a letter to the Nursing Facility Administrator listing the names of the identified residents who the Peer Counselors will visit;
3. Schedule a visit with identified residents during normal visiting hours and inform the Nursing Facility Administrator of the schedule. Notify the Grant Administrator if the nursing facility fails to cooperate;

4. Introduce themselves to the nursing facility staff caring for the resident;
5. Conduct an interview with the resident by listening and using personal experience to decide with the resident if DME is needed and, if it is needed, explain to the resident that a clinical evaluation is needed;
6. Provide the nursing facility with a copy of the completed Peer Counselor DME Recommendation Form on the day of the interview prior to leaving the facility and forward the completed Peer Counselor DME Recommendation Forms to OLTL weekly;
7. Provide the MCO DME process to the nursing facility and give a toll-free number for additional information;
8. Follow up with the nursing facility within seven business days after the date of the interview to verify that the MCO Service Coordinator has been notified by the nursing facility of the resident's need for a clinical evaluation and verify the clinical evaluation has been scheduled and the date of the clinical evaluation. Notify OLTL if the facility is having any issues working with the MCO's Service Coordinator;
9. Follow up with the nursing facility within 15 business days after the clinical evaluation has been performed to determine whether a need for DME has been identified. If there is a need for DME, the selected Applicant shall require the Peer Counselor to work with the nursing facility and MCO or Department, depending on who the resident is enrolled with, to verify the DME company received the information needed to obtain the equipment;
10. After the MCO Service Coordinator has confirmed that DME will be provided to the resident, contact the nursing facility one month after the date of notification of the clinical evaluation to the Service Coordinator and administrator to verify the DME has been provided to the resident by the nursing facility;
11. Perform an on-site visit after delivery of the DME. If the DME has not been delivered, conduct a telephone call to obtain the status of the request;
12. If the DME is acceptable to the resident, no further follow up is needed. If the DME does not meet the resident's needs, the selected Applicant shall require the Peer Counselor to work with the nursing facility and MCO Service Coordinator to adjust equipment or request another clinical evaluation;
13. The selected Applicant shall require that the Peer Counselor to provide information that advises the resident of all Department programs that would allow them to relocate to the community, as well as alternative living arrangements;
14. Participate in monthly meetings with OLTL as needed; and
15. Forward the required monthly report to OLTL by the 15th calendar day of the following month.

Applicant Response

D. Administer the Fee-for-Service NHT Program. (Estimated 8 monthly, and 96 annually)

The selected Applicant shall provide NHT services statewide to eligible individuals. An individual is eligible to participate in the fee-for-service NHT program if they meet the following NHT participant criteria:

1. Have expressed a desire to transition to the community;
2. Are not enrolled in managed long-term care; and
3. Have resided in the nursing facility for at least 30 calendar days; OR have a barrier, other than a need for information or referral, that requires assistance from an NHT Coordinator and that is preventing their discharge from the nursing facility through the normal discharge process.

NHT services may be provided for up to a year for the same participant at which point, if services are needed for a longer duration, the selected Applicant shall secure approval from the Department to continue billing for NHT services.

The selected Applicant shall provide the following NHT services, including but not limited to:

1. Assessing the needs and supports of the NHT participant;
2. Providing information about HCBS to those individuals referred by nursing facilities;
3. Developing and recording the service plan for transition and the coordination of services to allow the NHT participant to live independently in the community;
4. Monitoring transition activities, including the day-of transition, as well as remaining in contact with the participant immediately following the transition to provide any necessary referrals;
5. Providing information to the NHT participant about community resources;
6. Assisting the NHT participant in finding housing;
7. Assisting the NHT participant in establishing a household;
8. Assisting the participant and family members in applying for services for which the participant may be eligible (*i.e.*, food stamps, home modifications, and other services);
9. Coordinating with medical providers to obtain required documentation; and
10. Other activities performed for the participant directly related to support the NHT initiative.

The selected Applicant shall perform the following tasks:

1. Accept and document all referrals received for NHT services. The selected Applicant shall document when the referral was received, the source of the referral, and whether NHT participant criteria was met. The selected Applicant shall accept all referrals that meet NHT participant criteria. If the referral is refused, the selected Applicant shall document the reason for refusal. The selected Applicant shall offer individuals who do not meet the NHT participant definition information and referral services, person-centered counseling services, or both;
2. Provide NHT services of the appropriate type and intensity required to assist NHT participants in overcoming identified barriers to transition from the nursing facility to the community setting of their choice, in accordance with applicable program directives;
3. Provide participants and their families or caregivers the opportunity to be fully informed of all long-term living options, including the full range of HCBS and the guidance and support needed to make informed choices about their long-term living services;

4. Conduct outreach and education to nursing facilities regarding the NHT referral process, HCBS options, and other community resources;
5. Collect and track data relating to trainings and outreach provided, referrals received, referrals refused and reason for refusal, and NHT services provided;
6. Provide for an orderly and coordinated turnover of an active transition, including turnover of care planning information, to the appropriate MCO in the event of an NHT participant's enrollment into CHC or LIFE provider in the event of a transition into LIFE;
7. Conduct and participate in all technical assistance and training activities as directed by the Department, including trainings conducted by OLTL and the development of internal trainings;
8. Maintain participant records in a uniform format and making such records available to OLTL for program and fiscal accountability;
9. Keep records as required by the Department for program management, fiscal accountability, and evaluation of the program's effectiveness;
10. Complete and record required elements in WellSky (formerly SAMS), including any required documentation for the NHT program, to include journal notes;
11. Maintain accounting records showing all costs incurred; and
12. Comply with all program, evaluation, and administrative requirements.

Applicant Response

E. Turnover.

Turnover is comprised of those activities necessary for the Grantee to transition the agreement services to another grantee or Commonwealth resources.

Turnover Scope. Nine months prior to the end of the agreement term, or upon the Department's request, the selected Applicant shall develop and submit a Turnover Plan that details the proposed transition schedule, activities, and resource requirements for the necessary turnover tasks to be implemented.

The selected Applicant shall:

1. Execute the approved Turnover Plan in cooperation with the incoming grantee's Transition Plan;
2. Maintain service delivery staffing levels during the turnover period unless otherwise expressly approved by the DHS Grant Administrator;
3. Not restrict or prevent the selected Applicant's staff from accepting employment or positions with the Department or with any successor grantee. The Department will work with the incumbent and successor Applicants on the timing of any transition of incumbent staff;

4. Notify the DHS Grant Administrator of the reassignment or termination of employment of any of the selected Applicant's staff during turnover period prior to the reassignment or termination of the staff;
5. Provide to the Department, within 15 business days of the request, all documentation and records required by the Department;
6. Turnover the operation and management of all service delivery functions to the Department or a new grantee. The selected Applicant shall plan and manage this turnover in an orderly fashion so that no disruption of service to stakeholders occurs;
7. Work closely with the Department to complete the turnover of responsibilities and the necessary knowledge transfer by the end of the agreement period; and
8. Respond to all the Department requests regarding turnover information within a reasonable amount of time.

Applicant Response

III-5. Requirements.

A. Regulatory Requirements. Federal regulations regarding Preadmissions Screening at 42 C.F.R. §§ 483.100- .138 require an interdisciplinary approach and the development of an individualized plan to meet the Specialized Service needs of residents with an ORC. The selected Applicant shall provide residents determined to need Specialized Services with an individualized SSP that satisfies the regulatory requirements and documents the interdisciplinary nature and coordination of these services with nursing facility and specialized rehabilitative services.

Applicant Response

B. Document Security. The nature of the Project requires the handling of confidential and sensitive information. The selected Applicant shall establish a process to protect the confidentiality of all information received or provided in relation to services provided under the agreement, including assessments, assessment results, records, and other related information. Applicants should describe the process they propose to meet the document security requirements. The selected Applicant shall comply with the following:

1. Confidential and sensitive information may need to be transferred from other agencies or shared with the Commonwealth during the term of the agreement and turned over to a successor at the conclusion of the agreement. The selected Offeror shall follow Commonwealth procedures for information handling and sharing.
2. Comply with applicable federal and state laws, regulations, and rules regarding the security and confidentiality of information pertaining to the program and other related programs.
3. Require all individuals with access to confidential or sensitive information to sign a confidentiality agreement. Implement personnel policies that address disciplinary procedures relevant to violations of the signed confidentiality agreement.
4. Implement and maintain measures to prevent unauthorized access, copying, and distribution of information relating to this Project.

5. Properly dispose of (*i.e.*, shred, surrender) both hard and electronic working copies of such sensitive information, as well as any remaining information upon the completion of the Project.

Applicant Response

- C. Health Insurance Portability and Accountability Act (“HIPAA”).** The selected Applicant shall comply with all federal and state laws related to the use and disclosure of information, including information that constitutes Protected Health information (“PHI”) as defined by HIPAA, as amended. The selected Applicant shall comply with the Business Associate Addendum, **Appendix G** to this RFA, which will be attached to and made part of any resulting agreement.

Applicant Response

- D. Recruitment.** The selected Applicant shall maintain full staffing for the Project. To attract a diverse, qualified pool of personnel, the selected Applicant shall:

1. Use multiple online candidate searching and recruiting tools;
2. Target strategies to increase the pool of qualified staff with disabilities;
3. Plan, market, and carry out an open house for candidates;
4. Implement and maintain a partnership with PA CareerLink®;
5. Search available databases, including the Commonwealth Workforce Development System, for candidates who meet staff qualifications;
6. Reach out to staff who have left the organization but were in good standing;
7. Schedule and conduct targeted job fairs and
8. Work closely with organizations that support disabled military veterans.

Applicant Response

- E. General Requirements.** The selected Applicant shall:

1. Provide the appropriate orientation and training regarding agreement responsibilities, including but not limited to reporting responsibilities, confidentiality requirements, and the provision of services outlined in the Work Plan, to all personnel providing services under this agreement. The selected Applicant shall provide training materials related to activities under this agreement to the DHS Grant Administrator for approval before use. The selected Applicant shall document all training provided to personnel and provide the documentation to the Department in accordance with Part III, Section III-6.B and **Appendix T, Quarterly Personnel Training Report**, of this RFA.
2. Provide all personnel performing activities under this Project with an employee identification card.

Applicant Response

- F. Personnel Clearances.** The selected Applicant shall arrange for, at its expense, criminal background clearances as required by the Older Adults Protective Services Act. Information on these requirements is found at: <https://www.aging.pa.gov/organization/advocacy-and-protection/Documents/MorphoTrust%20Implementation%20Notification.pdf>. All staff entering nursing facilities or having contact with program participants must have the required clearances returned prior to beginning work on the activities included in this agreement.

Applicant Response

G. Emergency Preparedness.

To support continuity of operations during an emergency, including a pandemic, the Commonwealth needs a strategy for maintaining operations for an extended period of time. One part of this strategy is to ensure that essential agreements that provide critical business services to the Commonwealth have planned for such an emergency and put contingencies in place to provide needed goods and services.

1. Describe how you anticipate such a crisis will impact your operations.
2. Describe your emergency response continuity of operations plan. Provide a copy of your plan, or, at a minimum, summarize how your plan addresses the following aspects of preparedness:
 - a. Employee training (describe your organization's training plan, and how frequently your plan will be shared with employees).
 - b. Identified essential business functions and key employees necessary to carry them out.
 - c. Contingency plans for:
 - i. How your organization will handle staffing issues when a portion of key employees are incapacitated due to illness.
 - ii. How employees in your organization will carry out the essential functions if measures prevent from coming to the primary workplace.
 - d. How your organization will communicate with staff and suppliers when primary communications systems are overloaded or otherwise fail, including key contacts, chain of communications (including suppliers), etc.
 - e. How and when your emergency plan will be tested, and if the plan will be tested by a third-party.

Applicant Response

- H. Lobbying Certification and Disclosure of Lobbying Activities.** This Project will be funded, in whole or in part, with federal monies. Public Law 101-121, Section 319, prohibits federal funds from being expended by the recipient or by any lower tier sub-recipients of a federal agreement, grant, loan, or a cooperative agreement to pay any person for influencing, or attempting to influence a federal agency or Congress in connection with the awarding of any federal agreement, the making of any federal grant or loan, or entering into any cooperative agreement. All parties who submit applications in response to this RFA must sign the **Lobbying Certification Form**, attached as **Appendix D**, and if applicable, complete the **Disclosure of Lobbying Activities Form**, also attached as **Appendix D**.

Applicant Response

- I. Worker Protection and Investment.** Pursuant to Executive Order 2021-06, *Worker Protection and Investment* (October 21, 2021), the Commonwealth is responsible for ensuring that every Pennsylvania worker has a safe and healthy work environment, and the protections afforded them through labor laws. To that end, agree mentors and grantees of the Commonwealth must certify that they are in compliance with all applicable Pennsylvania state labor and workforce safety laws. Such certification shall be made through the Worker Protection and Investment Certification Form (BOP-2201) and submitted with the bid, application or quote. This form is attached as **Appendix E, Worker Protection and Investment Certification Form.**

Applicant Response

- III-6. Reports and Project Control.** The selected Applicant shall submit all reports electronically in Microsoft Word or Microsoft Excel.

At a minimum, the selected Applicant shall submit the following reports to the Department:

A. Monthly Reports.

- 1. Specialized Services Program.** The selected Applicant shall submit a report using the Specialized Services Participant tab of the Monthly Participant Report (**Appendix Q, Monthly Participant Report Template**) including each participant, by the 15th calendar day of each month. The Specialized Services Participant Report tab must include the following information for each participant: first and last name, date of birth, social security number, Medicaid ID number, service provider if different from selected Applicant, nursing facility, county, date of facility admission, date Specialized Services began, date Specialized Services ended (if applicable), reason for termination of Specialized Services (if applicable), and the types of Specialized Services received in the reporting month.
- 2. PASRR Explanation Tracking.** The selected Applicant shall maintain and submit a monthly report containing a complete list of individuals for whom referrals were received, the dates the selected Applicant received the referrals, dates that contacts were made or attempted for the purpose of conducting the PASRR Explanation, and the date the PASRR Explanation was completed identified as the “PASRR Explanation Date.” The selected Applicant shall submit the PASRR Explanation Tracking report to the Department by the 15th calendar day of the following month. This will be a tab of the Monthly Participant Report (**Appendix Q, Monthly Participant Report Template**).
- 3. PCEDME.** The selected Applicant shall submit a monthly Peer Counselor DME Monthly Report of completed non-clinical assessments from each facility to the Department by the 15th calendar day of the month following the month in which assessments were completed. This will be a tab of the Monthly Participant Report (**Appendix Q, Monthly Participant Report Template**).
- 4. NHT Referral Report.** The selected Applicant shall submit a monthly report identifying all NHT referrals received during the reporting period and whether the referral resulted in provision of NHT services, provision of information or referral, or the refusal of NHT services. In instances of refusal of services, the selected Applicant shall include in the report the reason for refusal. The selected Applicant shall submit the NHT Referral Report to the Department by the 15th calendar day of the following month. This will be a tab of the Monthly Participant Report (**Appendix Q, Monthly Participant Report Template**).

Applicant Response

- B. Personnel Training (Quarterly).** The selected Applicant shall submit a quarterly report of staff training conducted in the prior quarter using the Quarterly Personnel Training Report (**Appendix T, Quarterly Personnel Training Report**) by the 15th calendar day of the month following the end of the quarter.

Applicant Response

- C. Staff Clearance Report (Monthly).** The selected Applicant shall submit an as-needed monthly report identifying names of any new staff beginning work on the Project in the prior month, the date their required background clearance was received, and the date they began work on the Project. The selected Applicant shall use the **Appendix V, Staff Clearance Report** and submit the report the Department by the 15th calendar day of the month following an applicable reporting month.

Applicant Response

- D. Status Report (Quarterly).** The selected Applicant shall submit a quarterly progress report covering Project activities, problems, and recommendations for the prior quarter by the 15th calendar day of the month following the end of the quarter. The selected Applicant shall key this report to the work plan the Applicant developed in its application, as amended or approved by the Issuing Office. In addition, the selected applicant shall include in the status report:
- 1. SSP.** The selected Applicant shall report statistical data on the number of participants served, the average dollar amount per participant for Specialized Services, alternative living arrangements activities undertaken, trends observed, and any other relevant information that can be used to improve the program. The selected Applicant shall submit this as **Appendix U**.
 - 2. PCEDME.** The selected Applicant shall report statistical results showing the number of participants visited, the number of DME obtained, the types of DME dispensed, trends observed, and any other relevant information that can be used to improve the program. The selected Applicant shall submit this as **Appendix S**.
 - 3. NHT Program.** The selected Applicant shall report statistical results showing the number of unique participants served during the reporting period, the number of facilities provided with outreach and education, and any other relevant information that can be used to improve the program. The selected Applicant shall submit this as **Appendix R**.

Applicant Response

- E. Problem Identification Report (Quarterly).** A quarterly report, identifying problem areas. The selected Applicant shall describe the problem and its impact on the overall Project and on each affected task and list possible courses of action with advantages and disadvantages of each and include recommendations with supporting rationale.

Applicant Response

- F. Final Report.** OLTL will provide the format for the final report. The selected Applicant shall use the format provided by OLTL and submit a draft final report 30 calendar days prior to the expiration

of the agreement. The selected Applicant shall include in the final report the following, but not limited to:

1. Abstract or summary of the result of the study or service in terminology that will be meaningful to management and others generally familiar with the subject areas.
2. Description of data collection and analytical and other techniques used during the study.
3. Summary of findings, conclusions and recommendations developed in each task.
4. All supporting documentation, which may include, but not limited to, flow-charts, forms, and questionnaires.
5. Recommendation for a time-phased work plan for implementing the recommendations.

Applicant Response

G. Ad Hoc Reports as Required or Specified by OLTL. The selected Applicant shall coordinate with the Department to determine whether additional reports will be useful to the Department, determine what information those additional reports should include, and generate any other relevant reports identified by the Department throughout the duration of the agreement. The selected Applicant and the Department shall mutually agree to due dates for ad hoc reports.

Applicant Response

III-7. Key Performance Standards. The Commonwealth has developed a set of minimum Key Performance Standards defined below, which the selected Applicant must meet, or exceed. The first three months are a transition period, and the Department will not impose damages based on a failure to meet performance standards. Where an assessment is defined as an “up to” amount, the dollar value will be set at the discretion of the Department.

The selected Applicant’s performance will be reviewed and assessed as outlined below. The Department’s Grant Administrator will give written notice of each failure to meet a performance standard to the selected Applicant. The Department may impose financial assessments for a selected Applicant’s failure to meet the performance standards. If the Department does not assess liquidated damages in a particular instance, the Department is not precluded from pursuing other or future assessments relating to those performance standards and their associated damages.

Describe your ability to meet or exceed these minimum performance standards.

CATEGORY	CRITERIA	IF NON-COMPLIANT, AMOUNT OWED
Reports submitted timely	Submit 90% of reports identified in RFA Part III, Section III-6 timely, or as approved by the Department.	The Department may assess liquidated damages of up to \$200.00 per untimely report. The Department will track untimely reports throughout each agreement year and deduct the total amount of liquidated damages, if any, from the final invoice of the year.

Reports submitted completely and accurately	Submit 90% of reports identified in RFA Part III, Section III-6 with all required fields accurately completed.	The Department will return inaccurate or incomplete reports and require resubmission, and may assess liquidated damages of up to \$200.00 per any returned report. The Department will track returned reports throughout each agreement year and deduct the total amount of liquidated damages, if any, from the final invoice of the year.
Criminal background clearances	Have required clearances submitted for 100% of staff entering nursing facilities or having contact with participants prior to beginning work on the activities included in this agreement. See RFA Part III-5.F.	If the selected Applicant does not submit 100% of criminal history clearances prior to staff beginning work on the Project, the Department may assess liquidated damages of up to \$200.00 per incident.
Documented contact with or attempt to contact referred individuals to provide the PASRR Explanation within five business days after the receipt of the participant record	Contact or attempt to contact 98% of Specialized Services participants within five business days after receipt of the referral from OLTL. See RFA Part III-4.B.1.	The Department may assess liquidated damages of up to \$200.00 for any invoice where the percentage of participants with documented PASRR Explanation contacts or contact attempts within five days is less than 98%.
Refusal of an NHT referral without a documented, valid reason for the refusal	Provide either documentation of acceptance or valid reason for refusal for 100% of NHT referrals. See RFA Part III-4.D.	If the selected Applicant does not accept 100% of NHT referrals or have a documented, valid reason why a referral was refused, the Department may assess liquidated damages of up to \$50.00 per incident of refusal.

A. For any deficiency, including ones relating to the performance standards, the selected Applicant will prepare and submit a corrective action plan for any observation or finding contained in a notice of deficiency. The selected Applicant must submit the corrective action plan to the Department within ten business days of notification of the deficiency or such longer time as may be agreed to by the Department.

B. The corrective action plan must include, but is not limited to:

1. Brief description of the findings;
2. Specific steps the selected Applicant will take to correct the situation or reasons why it believes corrective action is not necessary;
3. Name(s) and title(s) of responsible staff person(s);
4. Timetable for performance of the corrective action steps;
5. Monitoring that will be performed to implement corrective action;
6. Signature of the selected Applicant's Program Manager or a senior executive.

- C. The selected Applicant must implement the corrective action plan within the timeframe agreed to by the parties for that corrective action plan. Failure to implement a corrective action plan, in the manner agreed to, may result in further action by the Department, including, but not limited to, a finding of default.
- D. In the event the Department determines a deficiency to be a serious non-compliance with the selected Applicant's obligations under the agreement, the Department may find the selected Applicant in default.

Applicant Response

PART IV

COST SUBMITTAL

IV-1. Cost Submittal. The information requested in this **Part IV** shall constitute the Cost Submittal. The Cost Submittal shall be submitted as a separate attachment and shall not be submitted as part of the Technical Submittal. The total proposed cost should be broken down into the components set forth in **Appendix C, Cost Submittal Worksheet**. Applicants should **not** include any assumptions in their cost submittals. If the Applicant includes assumptions in its Cost Submittal, the Department may reject the application. Applicants should direct in writing to the Issuing Officer pursuant to **Part I, Section I-9** any questions about whether a cost or other component is included or applies. All Applicants will then have the benefit of the Department's written answer so that all applications are submitted on the same basis.

The selected Applicant will have the opportunity to receive incentive payments in the case of NHT participants who successfully transition to the community. The incentive payments will be available for in-person follow up visits for individuals who transitioned via the fee-for-service NHT program and remain ineligible for managed long-term care in the community. To qualify, the contact must be made in-person with the participant present and the participant must still be residing in the community at the time of the contact. Information and referral services must be offered at the time of contact if a need is indicated verbally or based on any health or safety issues observed during the contact.

The contact, including any services needed or offered, must be documented in the format indicated by the Department. The following payables may be billed for each applicable contact if all qualifications are met:

- A. 30 cumulative days in the community for a payment of \$250.00
- B. 90 cumulative days in the community for a payment of \$250.00
- C. 180 cumulative days in the community for a payment of \$250.00
- D. 365 cumulative days in the community for a payment of \$1000.00

The Department will reimburse the selected Applicant for work satisfactorily performed after execution of a written agreement and the Effective Date of the agreement, in accordance with agreement requirements.