State of Alaska
Department of Health and Social Services
Division of Senior and Disabilities Services

Request for Proposals
Senior In-Home Services - Region 7
For FY2023

Grants and Contracts

NOTICE: Proposals will ONLY be accepted through GEMS. Applicants are responsible for reviewing the GEMS homepage at https://gems.dhss.alaska.gov/ for details regarding agency registration and availability of technical assistance. Log into GEMS through myAlaska, https://my.alaska.gov/Welcome.aspx to begin the application process. Once you are logged into GEMS, guidance and instruction are available in the Documents tab and from the film strip icon. Applicants are responsible for monitoring GEMS or the State Online Public Notices site for any changes or amendments that may be issued regarding this solicitation.

Relay Alaska provides assisted communication services at 711 or 1-800-770-8973 from a TTY phone, and at 1-800-770-8255 from a voice phone.

CONTACT PERSON: Anna Ramirez, Grants Administrator
PHONE: (907)465-5079
E-MAIL: anna.ramirez@alaska.gov

PROPOSAL DUE DATE: November 2, 2022, 3:59 PM
DEADLINE FOR WRITTEN INQUIRIES: October 24, 2022, 3:59 PM
PROJECT PERIOD BEGINS: December 1, 2022

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Amendments

Amendment 1 Extend Proposal Due Date **Posted: 10/31/2022**

Explanation

This amendment serves to extend the proposal due date to November 1, 2022. All other terms and conditions remain the same.

Additional Information

This amendment serves to extend the proposal due date to November 1, 2022.

Amendment 2 Extend proposal due date - 2 **Posted: 11/1/2022**

Explanation

Extending the due date from 11/01/22 at 3:59pm to 11/02/22 at 3:59pm. All other terms and conditions remain the same.

Additional Information

This amendment serves to extend the proposal due date to November 2, 2022.

Amendment 3 Answers to written questions regarding the RFP **Posted: 11/2/2022**

Explanation

This amendment is to post written questions received regarding the RFP.

Additional Information

Amendment 1 Senior In-Home RFP

Summary of Pre-Proposal Teleconference

held on October 14, 2022 @ 10:00 a.m.

and Responses to Written Questions

Q1. Are we eligible to apply for the solicitation?

A1. Please refer to Section 3.01 Eligibility to determine if your agency is eligible.

Q2. Elders in our community are age 55 and above. Would they qualify under this program?

A2. Please refer to Section 1.05 Introduction and Program Description and Section 1.05 Target Population to determine whether an individual meets the criteria to receive services under this program.

Q3. If we apply for this program, does that mean services need to be provided in ALL of Region 7 and not just our organization's (Kodiak Area Native Association) service area of Kodiak Island?

A3. No. Please refer to Section 1.01 Instruction and Program Description, Section 1.03 Program Services/Activities and Section 1.05 Service Areas and Communities for the areas currently being solicited under this program.

Q4. Regarding this proposed RFP, is it restricted to local government & non-profit applicants? Can a private provider submit a proposal as well?

A4. Please refer to Section 3.01 Eligibility to determine if your agency is eligible.

Section 1 Grant Program Information

1.01 Introduction and Program Description

The Department of Health (DOH), Division of Senior and Disabilities Services (DSDS or SDS), is requesting proposals from eligible applicants to provide Senior In-Home (SIH) services in **Region 7: Bristol Bay, Dillingham, Lake and Peninsula Borough, and currently unserved areas of Kodiak Island** for the State of Alaska for the remainder of FY2023. Program Services are authorized under 7 AAC 78 Grant Programs. Additional governing statutes are AS 47.05.010 (17) Duties of the Department; AS 47.65 Service Programs for Older Alaskans and Other Adults. State of Alaska statutes and regulations are accessible at Department of Law Document Library or through the contact person identified on the cover page of this Request for Proposals (RFP).

The State of Alaska, DOH, SDS provides funding for Case Management and In-Home services to low-income seniors who experience Alzheimer's Disease or a Related Dementia (ADRD), frailty due to aging, or other cognitive or physically disabling conditions in order to help them remain in their homes and living independently for as long as possible, forestalling or preventing more costly institutional care.

The SIH services grant program offers older individuals, 60 years of age or older who are low income and need assistance with activities of daily living (ADLs) or instrumental activities of daily living (IADLs), a menu of services to best meet their needs. Services include Case Management, Chore, Respite, Extended Respite and Supplemental Services (as further described in Section 1.03 Program Services/Activities). Senior In-Home grantees utilize funds that are matched with individual resources to maximize services statewide.

1.02 Program Goals and Anticipated Outcomes

The proposed project must demonstrate a thorough understanding and support of the grant program goals and outcomes anticipated by the Department.

The anticipated outcomes for this grant program are:

- ensure program participants remain living in their place of choice,
- increase the number of individuals with Alzheimer's Disease and Related Dementias (ADRD) and other disabling conditions served through Senior In-Home services, and
- increase or maintain client satisfaction with services.

The proposed project and required Logic Model (refer to Section 1.04 for additional information) must demonstrate a thorough understanding and support of the grant program's goal and outcomes anticipated by the Department. Proposed projects must meet or exceed anticipated minimums described in this RFP.

1.03 Program Services/Activities

Services provided under the grant must meet the above stated goal and result in measurable outcomes. Proposals must include the following:

- Description of the activities for each service that the applicant will provide under this program, and the description must support the goals and outcomes as described above.
- Plan for Services using the attached FY2023 Senior In-Home (SIH) Planned Services and Expenditures form.
- Timeline showing the proposed initiation and implementation of services and activities.

The applicant must either provide confirmation they will use the attached SIH Case Management Assessment/Plan of Care form to assess each individuals' need for assistance or must submit a draft of the Assessment form they propose to use to be approved by the SIH Grant Program Manager for use.

The Senior In-Home Services grant program includes the following menu of services and activities. Applicants must clearly identify in their proposal which of these services they will provide to the target population in **Region 7: Bristol Bay, Dillingham, Lake and Peninsula Borough, and currently unserved areas of Kodiak Island**.

Case Management

Case Management services provide assistance to persons in gaining access to needed medical, social, educational, other programs and services. Case Management ensures coordination of services, and adequate follow-up and monitoring. Through comprehensive assessment of the physical, emotional, cognitive, and social needs, Case Managers develop a network of services, both formal and informal, unique to the specific individual. Case Managers complete Plans of Care acceptable to the client and family and assist the client in obtaining the specified services. While receiving services, Case Managers provide ongoing monitoring of the client's situation to assure that the Plan of Care meets the individuals changing needs in order to remain in their home and community of choice for as long as possible. Case Management services may be short-term or long-term.

The list of items below involved Case Management activities under this grant program:

- Assessing an individual's needs require the provision of services by formal service providers, family caregivers, and other formal supports using SIH Case Management Assessment/Plan of Care form, home safety and falls prevention;
- Developing a plan of care that identifies a course of action to respond to the assessed needs of the eligible individual using the standardized SDS Plan of Care form or one approved for use by the SIH Program Manager;
- Client monitoring that includes the scope and frequency of contact to ensure the plan of care is implemented and adequately addresses the recipient’s needs (For clients receiving ongoing, longer-term case management, at least one contact by phone or face to face per month is expected); and
- Annual review and update of the assessment and plan of care.

Chore

Chore services assist the client in keeping a safe and clean environment to live independently in their own home. Chore services may be provided to assist individuals with activities such as meal preparation, grocery shopping, managing money, using the telephone, laundry, performing light housekeeping, performing heavier housekeeping, yard work, chopping wood, hauling water, sidewalk maintenance or other chore-type tasks as approved by the SDS Program Manager.

Allocation of Chore services

- Chore services are available up to a maximum of 25 hours per month per client or household; and
- Chore services may not be provided in a household when an able-bodied adult resides in the home.

Respite and Extended Respite Care

Respite and Extended Respite Care services provide support, relief to families and other caregivers. Additionally, Respite is intended to promote the optimum level of independence and functioning to assist the client to remain living at home. Respite Care services provide substitute care for adults with declining physical and cognitive

functions to allow intermittent or temporary relief or rest to a primary caregiver who is most often a family member. Services may be provided on either a planned or emergency basis in a variety of settings such as in the family or caregiver's home, the Respite worker's home, a licensed assisted living home, residential care facility, hospital or nursing facility. Extended Respite is the provision of 24-hour care usually out of the home in a licensed facility.

Allocation of Respite services

- Respite services are available up to a maximum of 40 hours per month;
- Extended Respite services are available up to a maximum of one week per year of 24-hour care;
- Extended Respite hours may not be utilized in the same manner as regular Respite hours;
- The intent of Extended Respite is to provide the caregiver with 24-hour relief; and
- Individuals living in the same home as the recipient may not be employed to provide Respite.

Service Coordination

Service Coordination services involve using the SIH Case Management Assessment/Plan of Care form, or one developed by the service provider and approved by SDS, to coordinate Chore and Respite services which includes evaluating the individual's daily living activities and instrumental activities of daily living, developing a service plan, monthly monitoring to ensure that the service plan is executed and meets the individuals needs, and an annual review to evaluate whether any adjustments to the existing service plan needs to be made.

Supplemental Services

Supplemental Services assist the "low-income" senior in attaining or maintaining a safe and healthy environment to avoid a crisis that would jeopardize their ability to remain independently in their own home.

For the purposes of this RFP, "low income" refers to an individual 60 years of age or older whose income is at or below the Medicaid long term care eligibility for seniors. This limit is currently $2,349 per month per individual and each additional individual residing in the home is allowed up to $1,072 per month. Other resources for funding should always be explored before application is made for this service. Supplemental services are not meant to take the place of ADRD mini-grants, but rather provide a similar mechanism for individuals who do not have ADRD. Individuals who have ADRD must first apply for an ADRD mini-grant. Individuals who receive an ADRD mini-grant may not be eligible for Supplemental Services depending upon circumstances, but will be considered on a case-by-case basis. This service can be provided as a stand-alone service (it does not need to accompany the other services described in this RFP) and is available to any senior who is eligible under this grant program and who resides within the grantee’s service area.

Eligible items and services may include, but are not limited to the following: assistive devices, home safety interventions, personal emergency response alarm systems, minor home modifications; access to medical, dental and vision care; or special health care needs such as personal care assistance for for up to two weeks after a hospital discharge (must be approved by the SDS Program Manager and may be approved for up to a maximum of one month depending upon circumstances). Assistance with items or services to avert a crisis that are not covered by another funding source may be allowable (e.g., medical transportation and winter clothing).

Allocation of Supplemental Services

- Approved on a case-by-case basis by the SDS Program Manager on the prescribed form;
- Limited to $500 annually per client or household depending upon the request, and
- Provider agencies will purchase services or goods for the client, a voucher system will not be allowed.

Service Principles, Case Notes, Service Standards, and Policies and Procedures for Services

By making application, applicants agree to comply with all of the following additional program requirements:

1. SDS Service Principles adopted by Senior and Disabilities Services can be found at the following link: DSDS Service Principles;
2. Case Notes are required for all recipients receiving services. The Case Notes must follow standard Human Services Practice and be sufficient for liability protection and historical tracking;
3. Current Standards of Practice for Services found within "Conditions of Participation" (COP) located in Standard Practice for Services; and
4. Grantees will be required to submit a copy of their Policy and Procedure Manual for Services upon grant award.

1.04 Program Evaluation Requirements and Reporting

Results Based Budgeting Framework

Results based budgeting provides a framework in which allocated resources support, and are justified by, a set of outputs and expected results. Within this framework, actual performance and achieved outcomes are measured by objective performance measures.

Projects are required to align with program objectives expressing Department priorities and core services. Projects will use performance measures to evaluate progress toward meaningful outcomes, and to initiate data collection and reporting consistent with Department priorities.

The Department Priorities, Core Services, Objectives, and Performance Measures of Effectiveness and Efficiency for this program are:

Department Priorities

- 1 Health & Wellness Across the Life Span

Department Core Services

- 1.2 Provide Quality of Life in a Safe Living Environment for Alaskan

Department Objective

- 1.2.3 Increase the number of Older Alaskans who live safely in their communities

Effectiveness Measure:

- Number of individuals who receive services

Efficiency Measure:

- Grant expenditure per individual

The additional Effectiveness Performance Measures for this program are:

1. Number of individuals with ADRD served,
2. Number of individuals with 2 or more ADLs,

3. Number of individuals surveyed for satisfaction, and
4. Out of those surveyed 80% or better rated services good to excellent.

SIH Logic Model

As an attachment to the proposal, the applicant must complete and submit the predesigned logic model that includes goals, outcomes, resources, activities and outputs compliant with the grant project and program intent. The applicant must indicate the resources and activities applicable to their proposed project. Utilizing this framework, SDS Program Managers and grantees will use predetermined performance measures to evaluate progress in order to meet meaningful outcomes and initiate data collection and reporting consistent with Department priorities.

In addition to the Effectiveness and Efficiency Performance Measures required by the Department, the Senior In-Home grantees will be responsible for reporting to the Division of Senior and Disabilities Services the additional performance measures specific to the grant program as listed on the Performance Measure Framework, including final fiscal year data to be submitted in the final 4th quarter reports.

Grant Reporting

Required reporting will include:

1. Cumulative Fiscal Report (overall grant and match expenditures are reported quarterly by budget line item);
2. Program Reports in the format/time frame prescribed by the grantor
    - CFR2 (quarterly expenditures by funding source and service on the Expenditures by Services Category);
    - Biannual Narrative Progress Report;
    - Annual Performance Measure Framework (includes data from Annual Consumer Survey),
    - Monthly Data entry of service delivery and consumer characteristics into the WellSky Aging and Disability database (formerly SAMS).

Changes to Approved Grant Project

As per 7AAC 78.260, any changes to the service plan must be submitted in writing to the SDS Program Manager for approval prior to implementation of the change. The SDS Program Manager must be notified immediately whenever it becomes known to the grantee that a key staff position will become vacant. The grantee must submit a copy of the resume for the new hires for positions supported in whole or in part by the grant funds, matching funds, or with grant income earned through this program.

1.05 Target Population and Service Area

Applicants must clearly describe the population targeted by the project. Proposals will be evaluated for compatibility with the program's intended target population identified in this solicitation. Applicants must clearly describe their ability to provide services in the service area being solicited in this RFP. In addition, applicants must complete and submit the attached Outreach Plan form in order to outline how they plan to advertise the grant services being provided in the selected area.

Target Population:

1. Person of any age with Alzheimer's Disease or Related Dementias (ADRD),

2. Individuals 60 years of age or older who experience physical or cognitive impairments, or
3. Adults 18 years of age or older with similar disabilities and service needs to older Alaskans when the provision of care to such persons does not diminish services to primary groups of people being served.

Note: All persons under the age of 60 must be approved by the SDS Program Manager prior to being served on the prescribed form.

Meeting eligibility will be determined by the grantee with consultation provided by the SDS Program Manager as needed. Individuals who potentially meet income and level of care eligibility to receive services under the Home Community Based (HCB) Medicaid Waiver program must provide documentation of denial in order to be eligible for In-Home services under this grant. Services are prioritized within the eligibility requirements listed below, taking into consideration the individual's increased need for assistance with Activities of Daily Living (ADL) to remain living independently. In addition, these services are not intended for individuals entering the program requiring serious immediate specialized medical care.

Eligibility for Case Management, Respite, and Supplemental Services:

1. Individuals of any age who have ADRD, or
2. Individuals 60 years of age or older who experience physical or cognitive impairments, personal conditions or other characteristics which require the provision of services by formal service providers or family caregivers, and
3. Have a need that cannot be met through another program or informal support.

Eligibility for Chore services:

1. Individuals of any age who have ADRD, or
2. Individuals 60 years of age or older who experience physical or cognitive impairments, personal conditions or other characteristics which require the provision of services by formal service providers or family caregivers,
3. Have a need that cannot be met through another program or informal support, and
4. Require assistance with at least one ADL, or one of the following Instrumental Activities of Daily Living (IADL): meal preparation, shopping, light housework, or laundry.

Note: Chore is only available in cases when no willing, able-bodied person lives in the household.

Eligibility for Individuals under 60 Years of Age:

1. Individuals under the age of 60 years old must meet the same requirements as individuals 60 years of age or older;
2. The services they receive must not diminish services of the target population and priority of service; and
3. Require approval by the SDS Program Manager, on the prescribed forms, before services may begin. This is a statewide program with an emphasis toward providing services in underserved communities through local providers.

Applicants must indicate the number of individuals to be served on Planned Services form. It is expected that services delivered by the successful applicants will be performed within the service area(s) awarded.

Service Areas and Communities:

The service areas and communities requested for the services being solicited are **Region 7: Bristol Bay, Dillingham, Lake and Peninsula Borough, and currently unserved areas of Kodiak Island**.

1.06 Program Funding

Funds available for Region 7 are anticipated to total **$63,236** in State funds for the remainder of FY23.

Awards in continuing grant years are dependent upon the conditions stated in Section 3.05 of this RFP. Applicants must not request a funding amount that exceeds the available funds for the region being proposed. The methodology for allocation of funds is based on the regional funding formula in the Alaska State Plan for Senior Services using 2017 data.

Match Requirement: The budget must include matching funds equal to 10.00% of the proposed DOH funds. Calculate your required match using the following formula:

Total Requested Grant Award x Required Match Percentage = Required Match

State grant funds may not be used to match State funds awarded through this grant program.

Eligible sources of matching funds include:

- Local Cash - sources, including local tax receipts, municipal revenue sharing, cash donations;
- Local In-Kind - donated items of value for which the applicant incurs no cost, including volunteer labor and donations of supplies, equipment, space;
- Other Sources - government and non-government grant awards, third-party receipts, direct receipts such as gaming or sales of goods;
- Grant Income - earnings anticipated as a result of this project proposal receiving award, and Medicaid reimbursements if award of this grant is required for the applicant to bill Medicaid for awarded services;
- Medicaid - is not Grant Income, as well as other third-party receipts.

Proposed Budget: The applicant must submit a budget proposal for the first fiscal year of the project. The proposed budget detail and narrative, (including required match), will support the program's results-based service delivery and staffing requirements stated in this RFP.

*A sliding fee scale for Chore and Respite services based on the most current Federal Poverty Guidelines for Alaska, as well as a sliding fee scale policy, and the application or worksheet to evaluate the recipient's income in determining the co-pay will need to be submitted at the time of award. Grant Income includes receipts from recipients or their family through the sliding fee scale. Grant income must be reported each quarter.

The proposed budget will be fully compliant with the limitations described in this RFP, and those detailed in 7 AAC 78.160 (Costs). Regulations are provided under the GEMS Documents tab.

Resources specific to budgeting are also available under the GEMS Documents tab. DOH Grant Budget Preparation Guidelines provide information and guidance about budget lines, cost detail groupings, and narrative requirements. Grantee User Manual Part I provide detailed instructions for entering a budget proposal in the chapter "Responding to a Solicitation."

Other Agency Funding: Prior to submitting a proposal, applicants are required to list all other agency funding received and applied for. This task must be completed by an Agency Power User in the Other Funding section of the Agency Administration tab. This is part of the pre-award risk assessment required under Uniform Guidance 2 CFR 200.

Indirect Costs: If the proposed budget includes indirect costs, 7 AAC 78.160(p) requires a copy of the agency's

current federally approved Indirect Cost Rate Agreement. The agreement must be uploaded in the Agency Administration tab. Lapsed agreements can be used if uploaded with the negotiating federal agency's written approval to continue using the rate until a new agreement is negotiated.

Payment for Services/Grant Income: If applicable to the services proposed in response to this solicitation, awarded grantees must have a Medicaid Provider Number or apply to obtain one, and will make reasonable effort to bill all eligible services to Medicaid and any other available sources of payment before seeking grant support for delivery of the proposed services. DOH funds are the payer of last resort.

In the applicant's proposed budget, anticipated receipts and expenditures for all grant income must be evident in the detail and narrative. Fiscal reports for awarded income generating projects will include the receipts and expenditure of all grant income.

Section 2 Applicant Qualifications

2.01 Agency Experience

Proposal evaluation will include consideration of the applicant's history of compliance with service and grant requirements, and previous experience in providing the same or similar services. Evaluation may include Department site reviews, program audits, and confirmation of the successful resolution of any findings. This is part of the pre-award risk assessment required under Uniform Guidance 2 CFR 200.

The applicant must describe previous experience providing services the same or similar to those proposed. The description must clearly identify the time period over which services were provided and the target population served.

2.02 Project Staffing

Project staffing must be sufficient to implement the proposed activities in order to meet program goals and the anticipated outcomes. Resumes, position descriptions, and professional credentials for key project personnel must be uploaded as part of the response. This is part of the pre-award risk assessment required under Uniform Guidance 2 CFR 200.

The applicant will be required to demonstrate the administrative infrastructure to support the project exists within the agency or through collaborations that support efficiencies. Executive and administrative staff must be qualified, as indicated by their professional and educational experience detailed in the attached resume(s).

As appendices to the proposal, resumes and job descriptions must be submitted for key project personnel including the program director, case manager(s), and service coordinator(s) for the services proposed. Applicants are expected to describe the agency's employee orientation process and the staff training plan including training for special populations served and how both are accomplished for staff in outlying service areas.

Case Managers are not required to be certified care coordinators under this grant but are required to take the basic care coordination training offered by SDS within three months of hire and every two years thereafter. The training may be taken online or face-to-face. The training schedule may be found at Senior and Disabilities Training Schedule and Registration website.

2.03 Administrative, Management, and Facility Requirements

The applicant must demonstrate the agency's sustainable fiscal and administrative capacity. Executive, administrative, and financial staff must be qualified, as indicated by the resumes of position holders uploaded as an element of the proposal. This is part of the pre-award risk assessment required under Uniform Guidance 2 CFR 200.

1. The applicant must ensure procedures are in place to protect client confidentiality compliant with state and federal standards.
2. The applicant must ensure its most recent financial audit was submitted to the appropriate state office (see Audit Requirements below), and any findings identified have been resolved.
3. The applicant must attach a current organizational chart showing the relationship of this project to the other functions within the organization.
4. Applicants must identify other grant funding applied for or awarded for the period of this grant in their agency record in GEMS, to help demonstrate fiscal sustainability.

Awarded proposers will be required to submit additional agency information if the agency GEMS record is not current.

By submitting a proposal, the applicant agrees to comply with the following additional administrative and management requirements:

Quality Assurance Requirements for Grantee Service Providers

In order to assure that providers of all services are qualified and deliver quality services, the Division of Senior and Disabilities now requires assurance all providers will comply with the Conditions of Participation adopted in regulations: Alaska Administrative Code 7AAC 130.200 - 130.319.

The Conditions of Participation (COP) contain new standards for providers, and operation of all home and community-based services. At a minimum, all applicants must meet the Provider Conditions of Participation and applicants wishing to provide other services must comply with the Conditions of Participation associated with specific services. The Conditions of Participation provide guidance and standards for the Home and Community Based Medicaid Waiver Program and apply to similar services provided through grant funds.

1. Applicants providing Medicaid reimbursable services must have a Medicaid Provider number, or apply to obtain one, and shall seek Medicaid reimbursement for all eligible services. Proof of Certification or application for certification must be submitted with their proposal.
2. Applicants providing Medicaid reimbursable services, who do not have a Medicaid Provider number, and do not intend to obtain one, must include a request for exemption from the Medicaid requirement with their proposal.
3. Applicants providing services that are not reimbursable by Medicaid must comply with the Provider Conditions of Participation and must provide an assurance of compliance with their proposal.
4. Applicants requesting an exemption to requirements outlined in any of the Conditions of Participation must submit a request for exemption in meeting the terms of the Conditions of Participation with their proposal.

The COPS applicable to the services requested by this solicitation are the Provider Conditions of Participation and Services are Care Coordination Services COP, Chore Services COP, and Respite Care Services COP. Applicants may review these and all COPs for the provision of home and community-based services at the Senior and Disabilities Regulation Amendments page.

Note: Requests for exemption from Medicaid Certification and/or Conditions of Participation requirements must cite the specific section of the Conditions of Participation and an explanation of why the applicant believes the

requirement would create an undue hardship, is not feasible, or would create a barrier to providing services.

Background Checks

This program is subject to the licensing and certification authority of the DOH. This program receives payments in whole or in part, from DOH and is subject to the statutory requirements of Alaska Statues 7AAC 47.05.300 - 47.05.390 requiring background checks. Describe the agency's policy/procedures for implementing the background check requirement. For agencies proposing to serve multiple and/or remote locations, explain how this is accomplished for staff in outlying areas.

The Alaska Background Check Unit (BCU) provides centralized background check support for programs that provide for the health, safety, and welfare of persons who are served by the programs administered by DOH. This requirement applies to unsupervised volunteers. More information may be found at Division of Health Care Services Alaska Background Check Program page.

Critical Incidents and Mandatory Reporting

Senior and Disabilities Services policies and procedures and applicable state laws in relation to reporting critical incidents and mandatory reporting. Critical incident policy and reporting form may be found at the Senior and Disabilities Services Adult Protective Services page.

Program Manual and Forms

Successful applicants will use the program resources, forms, and data collection methods utilized by SIH Services.

Audit Requirements:

Federal Requirements: Agencies spending $750,000 or more total Federal Financial Assistance in the agency fiscal year may be required to comply with conditions of the Single Audit Act of 1984, P.L. 98-502, as amended by the Single Audit Act Amendments of 1996, P.L. 104-156, and as defined in 2 CFR 200.

State Requirements: Agencies spending $750,000 or more total State Financial Assistance in the agency fiscal year are required to comply with the conditions of 2 AAC 45.010-090. The current regulations may be viewed at the State of Alaska, Department of Law Document Library, or copies may be obtained from the contact identified on the cover page of the RFP.

Information on State and Federal Single Audit Acts compliance may be obtained from:

State Single Audit Coordinator
Department of Administration
Division of Finance
PO Box 110204
Juneau, AK 99811-0204
Telephone: (907) 465-4666
Fax: (907) 465-2169

Department of Health Program Audit Requirements: All DOH grantees are subject to the requirements of 7 AAC 78.230. If awarded, agencies which are not required to file State Single Audits under 2 AAC 45.010 must ensure a fiscal audit of the agency operations under the grant program is performed by an independent, licensed, certified public accountant at least once every two years and submitted to:

State of Alaska, Department of Health
Finance and Management Services
Audit Section
PO Box 110602
Juneau, AK 99811-0602
Telephone: (907) 465-3120

Facility, Service Access, and Safety:

1. The applicant must address potential safety concerns for clients and staff in the management of services proposed in response to this RFP.
2. The applicant must describe client accessibility to services and the way in which that will enhance project success.
3. The applicant must describe how the physical location of the facility will enhance delivery of services to the targeted population.
4. All applicants for DOH grants must have a written plan for emergency response and recovery that provides for potential safety concerns and the safe evacuation of clients and staff. This plan is mandatory for agencies providing residential and/or critical care services as noted in the State Grant Assurances.

2.04 Support/Coordination of Services

In order to maximize the continuum of care for clients served through their proposed project, applicants must collaborate and coordinate with a broad range of agencies that provide services and supports to seniors in the communities where the applicant proposes to provide services. Applicants must provide the following and must be updated on GEMS as needed:

1. Tangible demonstration of formal partnerships, referral, and cooperative agreements that are in place as appendices to the proposal including the Aging and Disability Resource Center (ADRC) in the regions served, where available. Agreements must be current, specific to the communities and regions proposed to be served, and specifically address the services or expertise to be provided, where available.
2. Letters of support documenting community support where services are proposed.

Section 3 General Instructions for Proposal Submission

3.01 Eligibility

Applicants must be eligible to apply under 7 AAC 78.030 (Eligible Applicants). Eligible applicants are state agencies; political subdivisions of the state such as cities, organized boroughs, and Regional Educational Attendance Areas; nonprofit organizations and consortia of nonprofits; and Alaska Native entities. As follows, eligibility will be verified by Grants and Contracts.

1. Political subdivisions of the state and Regional Educational Attendance Areas will be verified by State records.
2. Eligible nonprofits are listed in the State's database of registered nonprofit entities or the US Internal Revenue Service's register of tax-exempt organizations. Nonprofit subsidiaries of nonprofit corporations must also provide a letter from the parent organization confirming nonprofit status.
3. Alaska Native entities as defined in 7 AAC 78.950(1) must submit, with the application, a legally binding resolution waiving the entity’s sovereign immunity to suit through the duration of the program, identified in RFP Subsection 3.05. The resolution must be authorized in compliance with the tribe’s constitution, either by the tribal council or by majority vote of the tribal membership. The required template is provided at

Subsection 4.02, Other Technical Requirements.

Applicant agency GEMS records must contain the agency's current State of Alaska Business License number, and a current governing board roster which includes titles, contact information, and terms of office for each seat. The roster must include emergency contact information outside the applicant agency for one or more officers.

Grants and Contracts will verify neither the applicant agency nor its principals are presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from receiving grant assistance from any State or federal department or agency. If an agency or its principals are excluded from receiving grant assistance, the proposal may not be considered.

Applicants who have had a contract or grant to help produce this RFP are not eligible to apply and any submitted proposal will not be considered.

3.02 Acceptance of Terms

By submitting a proposal, an applicant accepts all terms and conditions of this RFP including all identified attachments and guidelines, 7 AAC 78, and any other applicable statutes and regulations. Copies of these may be accessed through the contact person identified on the cover page or through the web address(es) identified in this RFP.

If a grant is awarded, this RFP and the applicant's proposal become part of the grant agreement. The applicant will be bound by the provisions contained in the awarded proposal unless the Department agrees that specific parts of the proposal are not part of the agreement.

Proposals and other materials submitted in response to this RFP become the property of the State and may be returned only if the State allows. Proposals are public documents and may be inspected or copied by anyone after grants have been awarded.

3.03 Inquiries

Applicants should immediately review this RFP for defects and questionable or confusing content. Questions that can be answered by directing the applicant to a specific section in the RFP may be answered verbally by the contact person identified on the RFP cover page. Questions that cannot be answered by directing an applicant to a specific section of the RFP may be declared substantive. The applicant will be directed to submit the question in writing to the contact person at the email address on the cover page no later than the Deadline for Written Inquiries, also identified on the cover page. This will allow issuance of any necessary amendments and/or clarifications to all prospective applicants.

Applicants are responsible for monitoring GEMS or the State's Online Public Notices website for any clarifications or amendments that may be issued regarding this solicitation.

Proposals will not be accepted after 3:59 PM prevailing local time on the due date identified on the cover page.

3.04 Proposal Costs and Content

The Department will not be responsible for any expenses incurred by the applicant prior to the authorized grant

performance period. All costs of responding to this RFP are the responsibility of the applicant.

The applicant is responsible for the content of the proposal.

3.05 Duration

This RFP is for the remainder of fiscal year FY2023, 12/1/2022 through 6/30/2023.

3.06 Proposal Review

Following the deadline for receipt of proposals, no revisions will be accepted unless provided in response to a request from the contact person named in this RFP. Proposals will be reviewed as follows:

1. Proposals will be evaluated in a manner that will avoid disclosure of contents before notices of grant award have been issued.
2. Department of Health staff will evaluate each proposal for minimum responsiveness and other technical requirements and eliminate nonresponsive proposals from consideration.
3. Using the criteria set out in this RFP and 7 AAC 78.100 (Criteria for Review of Proposals), Department staff will evaluate each responsive proposal. **Scores for each criterion will be based solely on the response to the associated question. Points will not be earned if the information was provided in response to another question in Section 4**. Department staff will also review relevant departmental documentation regarding the applicant. Staff recommendations regarding awards and levels of funding will include consideration of the following:
    i. a history of the applicant's compliance with grant requirements, to include records of program performance, on-site program reviews, and prior year audits;
    ii. priorities in applicable state health and social services plans;
    iii. requirements of applicable state and federal statutes; and
    iv. municipal ordinances or regulations applicable to the grant program.

If there are multiple responsive proposals for which there is insufficient money to fully fund, or supplementary expertise is deemed necessary to the review of proposed services, the Department may appoint a Proposal Evaluation Committee (PEC) as an additional advisory body. PEC members will initially evaluate proposals, independently of other committee members. As a committee the PEC will meet in a **closed session** (7 AAC 78.090 Review of Proposals) to further review proposals and develop recommendations. Scores will be assigned based on the applicant's response to each individual question and the associated criteria. **Applicants will not earn points for a given question based on a response to another question in the RFP**. The PEC review will include discussion of each proposal's merits. PEC recommendations will rank proposals in priority order and include approval or disapproval for award, modifications to the proposed project, and special compliance conditions.

All staff advisory recommendations and, if applicable, those of the PEC, and all review materials will be submitted for consideration by the Division Director, who will make recommendations to the Commissioner of the Department of Health or the Commissioner's designee.

3.07 Final Decision Authority

Recommendations are advisory only, including those from any PEC that may be held. The final decision to approve or disapprove award, the amount of each award, and whether to impose special conditions or modifications rests

with the Commissioner or Commissioner's designee.

NOTE: The final decision may include additional considerations, such as a lack or duplication of services in certain locations, or alternative services that may be available; a critical need for services by vulnerable populations; and matters of health, life and safety. The Department has the responsibility to ensure public monies are utilized in a manner that protects the interests of the people of the State and retains the right to make final awards that ensure responsible distribution of grant funds.

3.08 Notification of Grant Award and Appeals

Within fifteen (15) days after the decision regarding grant awards, applicants will be notified of the final funding decisions, and, if awarded, any conditions of award or modifications. Following any necessary negotiations for revisions to the proposed budget and scope of services, successful applicants will be issued a grant agreement. This formal agreement will contain specific performance and reporting requirements consistent with Department policy and procedure and 7 AAC 78.

Per 7 AAC 78.305 (Request for Appeal), an applicant may appeal a final grant award decision. Requests for hearing must be addressed to the Commissioner and received in writing at the address below within 15 days after the applicant receives notification of the decision. The request must contain the reasons for the appeal and must cite the law, regulation, or terms of the grant upon which the appeal is based.

With a copy to the contact identified on the solicitation cover page, send appeal to:

Adam Crum, Commissioner
Department of Health
3601 C Street, Suite 902
Anchorage, Alaska 99503-5923

3.09 Cancellation of the RFP/Termination of Award

Contingent upon funding appropriations and the Governor's approval, the Department may fund proposals from eligible applicants. The Department may withdraw this RFP at any time and reserves the right to refrain from making an award when such action is deemed to be in the best interest of the state. Funds awarded for a grant as a result of this RFP may be withheld and the grant terminated by written notice from the state to the grantee at any time for violation by the grantee of any terms or conditions of the grant award, or when such action is deemed to be in the best interest of the state.

Section 4 Submission Requirements/Evaluation Criteria

4.01 Minimum Responsiveness Criterion per 78.100(2)(A)

Proposals that fail to meet the minimum responsiveness requirements below will be eliminated from consideration per 7 AAC 78.090(b)(2).

1 Applicant is eligible per Alaska Administrative Code 7 AAC 78.030.

Evaluation/Review Criteria		Review	Points
a	Applicant is eligible per Alaska Administrative Code 7 AAC 78.030.	☑	

4.02 Other Technical Requirements per 7 AAC 78.060, 78.090(b) and 78.100

Response & Organizational Documentation

1 If applying as a non-profit organization, confirm non-profit status is documented.

Evaluation/Review Criteria		Review	Points
a	The agency is listed as a non-profit in good standing on the confirmed at State's Corporation Database.	☑	
b	The agency's current 501(c)(3) status is confirmed on the IRS Exempt Organizations Search.	☑	
c	If a non-profit subsidiary of a non-profit corporation, a verifying letter from the parent non-profit agency is uploaded to the applicant's agency GEMS record (under General in the Agency Administration tab). The parent corporation must meet criteria a and/or b.	☑	

2 If applying as a federally recognized tribal entity, upload the signed Resolution for Tribal Entities using the template provided below. Confirm the following criteria are met.

Evaluation/Review Criteria		Review	Points
a	The applicant is a recognized Alaska Native entity as verified by the Federal Registry. If a tribal consortium, all members are recognized Alaska Native entities.	☑	
b	A Resolution, completed on the provided form, is uploaded in the space provided. If a tribal consortium, a Resolution from each member tribe is uploaded as a single file.	☑	

3 If applying as a government entity, confirm the following criterion is met.

Evaluation/Review Criteria	Review	Points

a	The applicant is another State Agency, such as the University; a political subdivision such as a city or municipality, verified at Local Boundary Commission webpage or an REAA under Alaska Statue AS 14.08.031 verified on the Department of Education Alaska School Map.	☑	

4 Confirm neither the applicant agency nor its principals are presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from receiving grant assistance from any State or federal department or agency. If an agency or its principals are excluded from receiving grant assistance, the proposal may not be considered.

Evaluation/Review Criteria		Review	Points
a	The applicant agency nor its principals are barred from receiving federal assistance as verified in the federal System for Awards Management (SAM) site.	☑	

5 Electronically sign the State Grant Assurances form.

Evaluation/Review Criteria		Review	Points
a	State Grant Assurances form is signed by an individual authorized to enter into legal agreements on behalf of the applicant agency.	☑	

6 Confirm the following information is provided at the Agency Administration tab. These tasks must be completed by a Power User. If the information is found to be incomplete or not current, there may be delay in execution of any offered award.

Evaluation/Review Criteria		Review	Points
a	The General section contains a current governing board roster. The roster includes terms of each seat and contact information outside the applicant agency for one or more officers.	☑	
b	The Other Funding section contains a record for each source of agency operating funds. The record includes funds applied for under this solicitation. This is part of the pre-award risk assessment required under Uniform Guidance 2 CFR 200.	☑	
c	The General section contains a State of Alaska business license number, verified at Alaska Business License Search page.	☑	
d	All agency contact records are up to date, including Head of Agency, Primary Contact, and Head of Financial Operations.	☑	

e	The applicant's agency record contains the Agency Fiscal Year Start Date.	☑	
f	The applicant's agency GEMS record contains a current Federally Negotiated Indirect Cost Rate Agreement. If lapsed, the agreement is uploaded with written confirmation from the negotiating agency that the rate is valid until a new agreement is approved.	☑	

7 ***In the text bow below, include written assurance that the applicant will comply with the Provider Conditions of Participation (COP) for all services funded under this RFP, or submit a request for an exemption from compliance that cites the specific section of the COP and explanation of why the applicant believes the requirement would create an undue hardship, or not feasible, or would create a barrier to providing services.***

Evaluation/Review Criteria		Review	Points
a	The proposal includes written assurance that the applicant will comply with the Provider Conditions of Participation (COP) for all services funded under this RFP or includes a satisfactory request for an exemption from compliance citing the specific section and explanation as to the reason for a request for exemption.	☑	

8 ***In the text box below, include a written statement declaring whether the applicant will be providing Medicaid reimbursable services. If so, attach proof of certification or an application for certification, or submit a request for exemption from certification.***

Evaluation/Review Criteria		Review	Points
a	The applicant has declared that they will provide Medicaid reimbursable services; and has attached proof of certification, application for certification, or a satisfactorily justified a request for exemption from certification.	☑	

4.03 History of Compliance with Grant Requirements per 7 AAC 78.100(2)(B)

1 ***Previous recipients of DOH awards will confirm the following criteria pertaining to past performance and compliance are met. This is part of the pre-award risk assessment required under Uniform Guidance 2 CFR 200. All other applicants will mark complete without confirming.***

Evaluation/Review Criteria		Review	Points
a	Fiscal, narrative, and data reporting in prior years has been complete and timely.	☑	

b	Required State and Federal Single Audits have been submitted, verified at Division of Finance, State Single Audit. Any prior year audit exceptions have been resolved, verified at Finance and Management Services Audit Section contact.	☑	
c	Activities in prior year(s) demonstrate effective delivery of services. DOH review may include documentation such as performance reports, audit reports, grant records, site visits, etc.	☑	
d	Agency historically maintains required standards. Verification may include, though is not limited to, quality assurance reviews, licensing, and certifications.	☑	

4.04 Questions and Criteria Related to Program Policy, Goals, Outcomes, and Activities

1 In the text box below, describe the proposed project identifying the ways in which it will achieve the program goals and anticipated outcomes stated in this RFP.

Evaluation/Review Criteria		**Review**	**Points**
a	The description demonstrates a thorough understanding of program goals and outcomes, and clearly identifies the ways in which they will be achieved.	☐	80

2 In the text box below, describe the overall program, activities and services that will be performed. Using the template provided, attach a completed SIH Planned Services and Expenditure form for the region to be served.

Evaluation/Review Criteria		**Review**	**Points**
a	The response identifies how the project plan aligns with the goal and stated outcomes of the program.	☐	100
b	The response describes how the resources and activities will lead to achieving the proposed outputs. The activities listed should match the activities listed in the Logic Model.	☐	100
c	The proposed activities are supported by those identified in the attached SIH Planned Services and Expenditures form.	☐	50

3 In the upload field below, provide the timeline for the initiation of services and implementation of project activities.

Evaluation/Review Criteria		Review	Points
a	The timeline proposed for initiation of services and project activities is compatible with program intent.	☐	120

4 In the text box below, include confirmation the attached SIH Case Management Assessment/Plan of Care form will be used to assess individuals or upload a copy of the Assessment form proposing to be used for Division approval.

Evaluation/Review Criteria		Review	Points
a	The proposal contains confirmation the agency will use the attached SIH Case Management Assessment form or the agency has uploaded a draft of the Assessment form proposing to use.	☑	

5 Provide the proposed budget for the first year of the project. Include detail and supporting narrative as shown in the DOH Grant Budget Preparation Guidelines (Documents tab). Confirm the following criteria are met.

Evaluation/Review Criteria		Review	Points
a	The budget narrative is complete and mutually consistent with the budget detail.	☑	
b	Cost line items are allowable under 7 AAC 78.160 and are compliant with stated program requirements.	☑	
c	Travel costs are consistent with 7 AAC 78.160(h) and (i), and with any program requirements or limitations identified in the solicitation.	☑	
d	Equipment costs and subcontract costs are allowed by the program and consistent with 7 AAC 78.280.	☑	
e	Indirect costs are fully compliant with rates and exemptions of the agency's current Federally Negotiated Indirect Cost Rate Agreement, uploaded in the General section of the Agency Administration tab.	☑	

f	The budget supports the proposed project and program intent, and the project appears achievable with demonstrated resources.	☐	40
g	Costs are reasonable and substantiated in the narrative.	☐	20
h	The proposed budget narrative clearly describes any necessary allocation of resources among target populations or service areas.	☐	20
i	Proposed sources of 10% Required Match are identified in the budget narrative as well as in the Matching Fund Source table located near the beginning of the application. All proposed sources of matching funds are eligible, and the level of match is met.	☑	
j	Anticipated receipts and expenditures for all grant income are evident in the detail and narrative of the budget.	☑	

6 In the text box below, describe the ways in which the project aligns with program intent. The response will identify project resources, activities, and clearly state the project's anticipated goals, outputs, and outcomes. In the upload field below, provide the project's completed Logic Model.

Evaluation/Review Criteria		**Review**	**Points**
a	The described activities are well developed, reasonable and supportive of program intent.	☐	80
b	The response identifies project resources, activities, and clearly states the project’s anticipated goals, outputs, and outcomes.	☐	40
c	The applicant's Logic Model identifies project resources, activities, and projected outcomes that meet program intent.	☐	120

7 In the text box below, describe the project evaluation plan, including indicators and data gathering strategies that will be implemented to address the program's performance measures identified in Subsection 1.04.

Evaluation/Review Criteria		**Review**	**Points**
a	The proposed evaluation plan includes indicators and data gathering strategies aligned with the program performance measures identified in Subsection 1.04.	☐	80

8 In the text box below, describe the target population and service area(s) of the proposed project. Using the template provided, upload a completed Outreach Plan outlining the plan to advertise the grant services being provided in the selected area.

Evaluation/Review Criteria		Review	Points
a	The description clearly identifies the proposed target population and service area and meets the intent of the services solicited.	☐	100
b	Applicant clearly described their ability to provide services in the service area specified. The service are described match the service area listed on the Planned Services and Expenditures form.	☐	50
c	The Outreach Plan is attached and clearly outlines the plan to advertise the grant services in the selected area.	☑	

4.05 Applicant Qualifications - Criteria Relating to Personnel, Management, and Facilities

1 In the text box below, describe the agency's previous experience in providing services the same as, or similar to, those proposed. Clearly identify the time period over which services were provided and the population served. This is part of the pre-award risk assessment required under Uniform Guidance 2 CFR 200. If the applicant is not a current or prior year grantee of DOH or this Program, upload all references and documentation supporting the successful deliver of same or similar services to the target population, including proof of audit compliance.

Evaluation/Review Criteria		Review	Points
a	The applicant's previous experience providing the same or similar services demonstrates the resources and capacity needed to provide the solicited program services. Note: DOH staff review will also include DOH documentation such as prior year performance reports, audit reports, site visits, etc. as noted in Subsection 4.03. If not a current or prior year grantee of DOH or the SIH program, the proposal includes references and documentation of the successful delivery of same or similar services to the target population and includes proof of audit compliance.	☐	60

2 In the text box below, describe the proposed project's program and administrative staffing needs. Scan the following documents as a single file and upload in the space provided below: 1) Position descriptions for key project positions 2) Resumes and professional credentials for position holders 3) Resumes of administrative staff providing supervision, fiscal, reporting, and management needs. This is part of the pre-award risk assessment required under Uniform Guidance 2 CFR 200.

Evaluation/Review Criteria		Review	Points

a	Staff providing services are qualified and competent as demonstrated by the uploaded position descriptions, resumes, and professional credentials.	☐	120
b	Staffing levels are sufficient to support the requirements of the proposed project and compliant with all identified program mandates.	☐	80
c	Position descriptions support the intent of the RFP and the project proposed.	☐	60
d	Administrative staff is qualified as demonstrated by the resumes provided.	☐	80
e	Administrative capacity demonstrates capability to meet management and reporting needs.	☐	80

3 In the text box below, describe the procedures that will be used to protect client confidentiality.

Evaluation/Review Criteria		**Review**	**Points**
a	The applicant's description identifies the procedures necessary to protect client confidentiality compliant with State and Federal standards.	☐	100

4 In the text box below, describe the service delivery facilities and locations and the ways in which access to services will enhance project success.

Evaluation/Review Criteria		**Review**	**Points**
a	The facilities described are safe and appropriate to the purpose of the program.	☐	60
b	Access to the locations will enhance delivery of services to the targeted populations.	☐	60

4.06 Demonstration of Support/Coordination of Service

1 In the text box below, describe the ways in which the project planning process involved the public and potential service recipients.

Evaluation/Review Criteria		**Review**	**Points**
a	The applicant’s description demonstrates the involvement of the public and potential recipients of services in planning the project proposed.	☐	40

2 In the text box below, describe partnerships or collaborations necessary to the proposed project. In the upload field below, provide a single-file scan documenting existing partnerships and collaborations specific to the proposed project.

Evaluation/Review Criteria		Review	Points
a	Partnerships and collaborations necessary for the effective delivery of services are well described. Evidence specific to the proposed project is provided.	☐	60

3 In the text box below, describe the in-place or planned coordination with the State or other providers for referrals necessary to project success. Identify the project staff involved as well as the responsible positions at the referring agencies.

Evaluation/Review Criteria		Review	Points
a	The applicant's description demonstrates a clear understanding of the roles that must be performed by the applicant and by referring agencies for the effective delivery of services to the targeted population.	☐	60