Area Agency on Aging for Southwest Florida

THE AREA AGENCY ON AGING

FOR

PLANNING AND SERVICE AREA 8

Charlotte, Collier, DeSoto, Glades, Hendry, Lee and Sarasota Counties

Community Care for the Elderly Program

Request for Proposal (RFP)

For

Lead Agency Designation

AAASWFL RFP-2018-01
FOR THE PERIOD OF
JULY 1, 2018 – JUNE 30, 2024

Area Agency on Aging
FOR SOUTHWEST FLORIDA
Your Aging and Disability Resource Center

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SECTION A - INTRODUCTION

1. Legislatively Mandated Requirements

The Community Care for the Elderly Act (CCE) (ss. 430.201-430.207, Florida Statutes (F.S.)) was created by the Florida Legislature to assist functionally impaired elderly persons to live dignified and reasonably independent lives in their own homes, or in the homes of relatives or caregivers. The CCE program provides a continuum of care through the development, expansion, reorganization and coordination of multiple community-based services to assist elders to reside in the least restrictive environment suitable to their needs.

Pursuant to ss. 430.203 and 430.204, F.S., “A Lead Agency must be designated for each community care service system.” A community care service system is defined as a service network comprised of a variety of home-delivered services, day care services, and other basic services (referred to as home and community based services). The primary goal of the community care service system is to prevent unnecessary institutionalization of functionally impaired elderly persons by providing community-based services.

In accordance with s. 430.203(9)(c), F. S., " Lead Agency must be given the authority and responsibility to coordinate some or all of the services, either directly or through subcontracts, for functionally impaired elderly persons. These services include, but are not limited to, case management, homemaker and chore services, respite care, adult day care, personal care services, home-delivered meals, counseling, information and referral and emergency home repair services. The Lead Agency must compile Community Care for the Elderly statistics and monitor, when applicable, subcontracts with agencies providing core services. Pursuant to s. 430.203(9), F.S., agencies must be designated at least once every six years as a result of a competitive procurement conducted through a Request for Proposal (RFP) process.

The goal of the RFP is to define the scope of work to be accomplished, and convey the requirements and expectations for Lead Agency designation under the Community Care for the Elderly Act. Pursuant to s. 430.203(9), (a), F.S., these guidelines include requirements for the “assurance of quality and cost efficiency of services, minimum personnel standards, and employee benefits.”

The Area Agency on Aging for Southwest Florida has been designated by the State of Florida Department of Elder Affairs (DOEA) as the Area Agency on Aging (AAA) for Planning and Service Area 8, which covers Charlotte, Collier, Desoto, Glades, Hendry, Lee and Sarasota Counties. As such, it is

identified by the State as the contracting agency of choice for the coordination and administration of the Community Care for the Elderly Program in PSA 8. The Area Agency on Aging for Southwest Florida intends to fulfill the legislatively mandated requirements referenced above by issuing this Request for Proposal (RFP) for the contract period beginning Fiscal Year 2018-2019 and ending Fiscal Year 2023-2024 for the provision of CCE services. The CCE contracts procured through this RFP process may be renewed for five additional years, contingent upon satisfactory performance and availability of funds. Community-based organizations interested in obtaining a CCE Lead Agency designation are required to submit written proposals detailing their qualifications and plans for providing case management services, coordination of home and community based services and other Lead Agency required functions of the CCE program.

2. Statement of Need

Demographic data of the sixty years of age and over population for Planning and Service Area (PSA) 8 comprising the counties of: Charlotte, Collier, DeSoto, Glades, Hendry, Lee and Sarasota, obtained from the Department of Elder Affairs, indicates the seven counties within PSA 8 have approximately 606,931 residents aged 60 and older representing 36 percent of the PSA's total population and 12 percent of the State of Florida's sixty and older population. We anticipate over the next 10 years, a considerable number of residents will become elders as a result of net migration and the cohort of "baby boomers" continuing to age into retirement. It is estimated between 2010 and 2030, the number of Floridians 60 and older is expected to rise faster than the rest of the country, to an estimated 30 percent of the state's population by 2030.

In addition to the number and percent of elders projected to increase in the coming years, people are also living longer. An expected consequence is the continued rise in the need for long-term care services. Programs must be well managed to avoid the unwanted results of depleted personal savings, strained government entitlement programs, and unrealistic expectations of providers and caregivers (Long-Range Program Plan Fiscal Years 2015-2016 through 2019-2020). The data indicates that the needs of elders will continue to grow as 31% more elders live alone, 26% report they are not receiving adequate nutrition, and 21% of seniors and caregivers experience more problems with their homes (Assessing the Needs of Elder Floridians, 2012).

Along with these rising trends, there are challenges in addressing the increasing size of the 60 and older population. It is reasonable to expect as these individuals age in place and begin to cope with infirmities of old age, their reliance on a caregiver to help with their activities of daily living will also grow. In 2013, one in five elders surveyed by the Florida Department of

Elder Affairs was a caregiver, and more than one-half of these caregivers (56%) did not receive needed help with their caregiving responsibilities.

Queries of the Client Information & Registration Tracking System (CIRTS) on services most often provided under the Community Care for the Elderly program indicates the need to support functionally impaired elders with ongoing assistance and caregiving whether provided through formal or informal means.

The core services most often provided in Planning and Service Area 8 to frail consumers under this program are:

- Case Management / Case Aide
- Personal Care
- Adult Day Care or Adult Day Health Care
- Homemaker
- Housing Improvement
- Material Aide
- Respite
- Specialized Medical Equipment, Services and Supplies
- Home Delivered Meals
- Emergency Alert Response
- Transportation
- Chore

The gap between people served and people awaiting services, as well as the disparity between client needs and depth of services actually provided, poses a serious concern for thought and action. As the contracting agency for development, coordination and administration of the Community Care for the Elderly Program in Planning and Service Area 8, the Area Agency on Aging for Southwest Florida intends to address these concerns through issuance of this RFP. The RFP seeks innovative approaches to service delivery and program management, while emphasizing improved quality and customer satisfaction, all at a reasonable cost.

3. Statement of Purpose

The purpose of this RFP is to solicit applications from qualified agencies / organizations interested in providing case management, core service(s) coordination, and other functions required by law for a Community Care for the Elderly Lead Agency. The purpose of this RFP is for the Area Agency on Aging to select one Lead Agency for each county / Community Care Service Area (CCSA) in Planning and Service Area 8. Responders to bid are encouraged to bid on multiple counties to achieve economies of scale and maximize services to seniors.

The purpose of a designated Lead Agency is to provide case management to all CCE, Home Care for the Elderly (HCE) and Alzheimer's Disease Initiative (ADI) clients and ensure service integration and coordination of service providers within the CCSA. All organizations selected to be lead agencies through this RFP process will be required to screen potential consumers and process enrollments for all consumers who are eligible for benefits under the Emergency Home Energy Assistance Program (EHEAP) in the Community Care Service Area.

The responsibilities of a designated Lead Agency are to:

1. Ensure all other funding sources available have been exhausted before using CCE, HCE, EHEAP, and / or ADI funds.

2. Establish coordination with all community-based health and social services for functionally impaired older persons funded wholly, or in part, by federal, state and local funds to provide a continuum of care.

3. Deliver directly, or through subcontracts, core and other necessary contracted services.

4. Provide case management to applicants and ongoing recipients of core and other contracted services.

5. Assess and collect co-payments for core and other contracted services.

6. Train and use volunteers to the fullest extent possible to provide services to clients and assist with other Lead Agency activities.

7. Compile accurate reports.

8. Monitor subcontract / vendor agreements to ensure quality services and efficient use of funds. Make payments to subcontractors for core and other contracted services.

9. Initiate and maintain coordination among agencies.

10. Arrange in-service training for staff, volunteers, core service subcontractors, and other contracted service providers, in compliance with the Department of Elder Affairs Programs and Services Handbook.

11. Accept voluntary contributions, gifts and grants to carry out a community care service system.

12. Demonstrate innovative approaches to program management, staff training and service delivery that impact cost avoidance, cost-effectiveness and program efficiency.

13. Establish and follow procedures for handling recipient complaints concerning adverse actions such as service termination, suspension or service reduction.

14. Conduct client satisfaction surveys to evaluate and improve service delivery.

15. Implement measureable client outcomes directed at:
    a. Maintaining clients in the least restrictive settings.
    b. Targeting high-risk clients.
    c. Improving quality of life.
    d. Maintaining or improving functional status.

16. Improve operations and accessibility by:
    a. Assuring case management services are available on-call, including evenings, weekends and emergencies for Adult Protective Services (APS) cases.
    b. Providing services, other than case management, within 72-hours to APS referrals classified as high risk and in need of services to prevent further harm.
    c. Responding to referrals for persons at Imminent Risk of institutional placement.

17. Ensure the DOEA Client Information and Registration Tracking System (CIRTS) data is timely and accurate.

18. Develop and implement complaint procedures and ensure subcontractors develop and implement complaint procedures to process and resolve client dissatisfaction with services.

    In addition, the Lead Agency must also ensure that procedures include a process for complaints or grievances involving alleged abuse, neglect, or exploitation to be reported to the Florida Department of Children and Families Adult Protective Services – Abuse Hotline, as required by contract and Florida Statute. Complaints or grievances concerning situations that may endanger the health, safety, or welfare of a recipient will be reported to the Area Agency on Aging within 48 hours.

In performing these responsibilities, the provider must conform to the regulations and standards in the Department of Elder Affairs Programs and Services Handbook, the Adult Protective Services Operational Manual, and Contracts executed with the

Area Agency on Aging.

The Department of Elder Affairs Programs and Services Handbook and the Adult Protective Services Operating Manual can be found at*:*
http://aaaswfl.org/documents/

The CCE Lead Agency is a key component of the publicly funded long-term care system and its performance has a highly significant impact on the lives of the individuals it serves and the local, regional and statewide fiscal sustainability of the long-term care system. It is highly desirable for the Lead Agency designation be conferred only to case management agencies with a proven record of performance under conditions typically found in the everyday course of business of a Lead Agency designated pursuant to Ch. 430, F.S.

Agencies applying to be a CCE Lead Agency under the provisions of Ch. 430, F.S., must have the following qualifications:

1. Ability to provide case management services to functionally impaired elderly persons; coordinating community-based health and social services funded wholly, or in part, by federal, state and local funds to provide a continuum of care.

2. Ability to provide in-home services directly, or by managing a community service system of providers through subcontracts.

3. Ability to provide emergency services to at-risk individuals, such as elders at imminent risk of abuse or institutionalization.

4. Ability to monitor subcontracts / vendors to ensure high quality services and efficient use of funds.

5. Ability to coordinate service delivery using multiple funding sources and subcontractors / vendors.

6. Ability to financially match CCE contract dollars at the rate of $1 dollar of matching funds for every $9 dollars of state appropriated CCE funding (10%).

The review panel will evaluate how well the resources and experience described in each applicant's proposal qualify the applicant to provide services required by the provisions of this RFP. Consideration will be given to the length of time and extent to which the applicant has provided services similar or identical to those requested. The applicant's personnel resources, as well as computer, financial and other technological resources will be considered in evaluating the applicant's qualifications to meet the requirements of this RFP.

To comply with the DOEA Programs and Services Handbook, the designated Lead Agencies will be expected to:

Promote Quality Services by Assuring:

- Case managers develop care plans to meet the individual needs of consumers.
- Case managers act as consumer advocates by seeking services from all community resources, not just from traditional service providers.
- Case managers monitor the quality, appropriateness and cost of services delivered to consumers.
- All staff are appropriately trained and assigned.

Implement Measurable Consumer Outcomes to:

- Maintain consumers in the least restrictive setting.
- Target high-risk consumers.
- Improve quality of life.
- Improve or maintain functional status.

Improve Operations and Accessibility:

- Assure case management services are available on call, including evenings, weekends, and emergencies.
- Provide needed assessment and services within 72 hours to Adult Protective Services referrals classified as high risk and in need of services to prevent further harm, pursuant to Chapter 415, Florida Statutes.
- Serve targeted groups as established in the State Plan on Aging.

Ensure Maximum Efficiency:

- Minimize administrative costs.
- Increase funds available for core services.
- Actively seek all community resources available for client services.
- Clearly identify in the client care plan, funding alternatives used prior to using Community Care for the Elderly funds.
- Seek competitive bids or negotiate vendor agreements for provision of quality, cost-competitive services not directly provided by the designated Lead Agency.
- Thorough and timely billing and collection of all co-payments.

All Community Care for the Elderly funds are placed under competitive procurement. Those organizations currently holding the Lead Agency designation are not held harmless from responding to this Request for Proposal.

SECTION B - RFP SPECIFICATIONS: MINIMUM REQUIREMENTS TO BE MET

1. Program Requirements:

a. Service Delivery Methodology

1) Program Coordination

The Area Agency on Aging for Southwest Florida is designated as an Aging and Disability Resource Center, hereinafter referred to as the "ADRC", under the provisions of Section 430.2053, Florida Statutes. The primary functions of an ADRC are to facilitate consumer friendly access to long-term care services and benefits for elders and caregivers through a coordinated, multi-access "one stop" system that integrates information, referral and eligibility determination functions.

The ADRC functions are supported by designated Access Points. Lead Agencies are one type of ADRC Access Point. An Access Point operates as a local point of contact for elders and caregivers seeking to access long-term care services and benefits.

An Access Point agrees to:

- Refer to the ADRC all individuals seeking long-term care services and benefits, including, but not limited to information, referral, intake, screening and eligibility determinations.
- Implement referral protocols and procedures established by the ADRC.
- Provide the ADRC with the most current information on elder resources available in the contractor's county or local community.

As the ADRC, the agency agrees to:

- Provide timely and helpful long-term care options to elders and caregivers referred by the Access Point.
- Provide the Access Point with written policies and procedures concerning the Access Point referral process.
- Provide technical assistance and training for Access Point staff, as needed.

The ADRC and Access Point mutually agree to:

- Cooperate on efforts to enhance consumer choice, support informed decision-making, minimize service fragmentation and confusion, reduce duplication of administrative paperwork and procedures, and increase cost-effectiveness of long-term care support and delivery systems.
- Participate in public education programs to increase awareness of ADRC services.

Additional coordination and program management responsibilities of the Lead Agency are listed throughout Section B of this document.

2) Case Management and Core Services

Respondents to this RFP are required to submit a proposal detailing the cost for case management services and CCE core services. Case management must be provided directly by a Lead Agency and by that agency only. Case aides support case management and if charged to this contract, must be reflected as a separate service under case management. CCE core services may be offered directly by each Lead Agency, or through qualified provider agencies under subcontract with each Lead Agency. The Area Agency on Aging for Southwest Florida reserves the right to review and approve all subcontracted entities and reimbursement rates for core services.

County specific funding for CCE services under this RFP is included in Section B.2.c. Additional information on core services to be coordinated by the Lead Agency is included in Section B.1.d. of this RFP.

3) Community Care Service System

The Lead Agency designation is contingent upon the bidder's ability to accept referrals and provide case management and coordination of core services countywide for all eligible consumers residing in the specific county / CCSA being bid. Interested bidders must demonstrate the ability to accept referrals and provide case management services and core service coordination countywide.

1. b. Lead Agency Requirements

1) Coordination

New bidders must have two years of case management experience; see Appendix VIb, paragraph 13.

Lead Agency case managers will coordinate all community resources for functionally impaired elderly persons in a community care service system, which is designed to provide a continuum of care as the consumers' needs change. This includes administering and managing the Community Care for the Elderly (CCE) program, the Home Care for the Elderly (HCE) program, and the Alzheimer's Disease Initiative (ADI) program. Each program is funded separately and carries distinct program responsibilities. Alternative funding (city, county, local, etc.) must be used to fund client services prior to using the DOEA / Area Agency contracted funds.

The goal of the HCE Program is to encourage provision of care for elders in

family-type living arrangements or private homes as an alternative to nursing home or other institutional care. The program encourages a person or group, acting as caregiver(s), to provide basic support, maintenance and assistance in arranging specialized services for three or fewer elders, on a not-for-profit basis.

Priority Groups have been established for receipt of CCE services, and are as follows in order of highest priority:

a. CCE emergency services are specifically provided within 72-hours for alleged or actual victims of abuse, neglect or exploitation. Services must be carefully coordinated by the CCE Lead Agency with the Adult Protective Services caseworker / investigator and service provider agencies. Actual or alleged victims of abuse, neglect or exploitation, or those at risk for same, are afforded the highest priority access to CCE services.

b. Referrals for consumers deemed at imminent risk of nursing home placement because their mental or physical health condition has deteriorated to the degree that self-care is not possible, there is no caregiver, and nursing home placement is likely within a month or very likely within 3 months shall receive the next highest priority for CCE services.

Detailed information on services, program requirements and case management coordination is contained in the Department of Elder Affairs Programs and Services Handbook.

Chapter 2 of the DOEA Handbook contains information on all aspects of Case Management, including case manager qualifications, job descriptions, duties and responsibilities, etc. Stated within chapter 2 is a suggested caseload of 60-70 clients per case manager and the possibility of a case manager supervisor handling a small caseload of 30-35 clients. Respondents to this RFP must agree to comply with all of these requirements; Chapter 5 provides a detailed description of the CCE Program Administration, Appendix B contains Co-Pay standards, and Appendix D contains Grievance standards.

2) <u>Confidentiality</u>

Information about functionally impaired elderly persons who receive services under the Community Care for the Elderly Program is confidential (s. 430.207, F.S.). Information received through files, reports, inspections, or otherwise by the Department of Elder Affairs or departmental employees, by persons who volunteer services, or by persons who provide services through contracts with the Department, Area Agency on Aging, Lead Agencies or

other contracting agencies, is confidential and exempt from the provisions of Section 119.07(1), F.S. Such information may not be disclosed publicly in a manner to identify a functionally impaired elderly person, unless that person or their legal guardian provides written consent.

The Lead Agency must ensure confidentiality of consumer information by all employees, service providers and volunteers as required by state laws. It is essential that training be established to promote security of information, including protection from loss, damage, defacement or unauthorized access.

The designated Lead Agency must comply with all requirements of the Health Insurance Portability and Accountability Act (HIPAA) of 1996. The Department of Elder Affairs, Area Agency and Lead Agency recognize each is a Business Associate of the other under the terms of HIPAA. As such, the Lead Agency agrees to the terms included in the Contract (**Appendix I**).

The Lead Agency must also comply with all requirements of the Social Security number confidentiality and security measures as required by Section 119.071(5) F.S. Whenever possible, the Lead Agency should submit reports to the Area Agency on Aging with client identifying information using the assigned client CIRTS identification, in lieu of an individual's social security number.

3) <u>Consumer Identification</u>

a. Outreach

The Lead Agency is responsible for outreach to identify and inform frail elders and their caregivers of the range and availability of services. This may be done in cooperation with church, civic, social and medical organizations. The target audience is those individuals most likely to fall into the high-need category, which is priority levels 4 and 5 when assessed. Lead Agency staff should participate in local networks and consortiums where hospital, home health, social and medical providers are represented as these are often referral sources for high-need individuals.

b. Intake

The intake process begins when an individual or caregiver seeking assistance contacts the ADRC or other access point. The ADRC performs the intake and screening service functions using the 701-S form. Service provider agencies seeking assistance on behalf of an elderly person may make referrals to the ADRC.

During intake, essential information is gathered about the person's physical, mental and functional abilities; concerns, limitations, problems, and general

background is also obtained to assist in eligibility screening for appropriate service referrals.

If during preliminary intake, the elderly person appears eligible for services from CCE, HCE, EHEAP and / or ADI, the intake worker will engage in a more thorough discussion of the person's situation and service needs, called a screening. This screening is required to ensure program eligibility requirements are met.

If a person does not meet eligibility requirements for any program administered by the ADRC, the ADRC shall explain the eligibility criteria and reason for determination. Referral to other community-based service agencies should be made, if appropriate. The referral and determination of ineligibility shall be properly documented and filed as part of the service record. Individuals determined ineligible for CCE, HCE or ADI services shall be informed of their right to appeal per established grievance and appeal policies and procedures.

c. Initial Screening

The screening process begins with determining the urgency of a person's need, and type of assistance required. The purpose of the 701-S Telephone Screening is to assess severity of the person's situation and place them on the Assessed Priority Consumer List (APCL). The 701-S Telephone Screening does not take the place of a comprehensive 701-B in-home assessment, which is required before care plan development and delivery of core service(s). The comprehensive in-home screening (701B) is completed by the lead agency once the client is released from the APCL. The initial 701-S screening is handled through the ADRC by staff who have received their certification on Uniform Client Assessment Training per the DOEA Programs and Services Handbook requirement.

The Prioritization Assessment Instrument DOEA Form 701-S is used to collect common information about applicants applying for services funded by the Department of Elder Affairs. Other items related to this process are:

- It is also used to prioritize persons so those in greatest need and with the least assistance available receive services first.
- It is completed over the phone or in person.
- The client must be contacted within three business days after receiving a referral to complete a Prioritization Assessment Form (DOEA Form 701S).
- If an applicant can be served, and is authorized by the ADRC for enrollment, the Assessment Instrument (DOEA Form 701B) must be completed within 14 business days after receiving authorization to enroll.

- If an applicant cannot be served due to a low priority score (priority rank 1 or 2), they may be placed on the APCL.

d. Eligibility Determination

All clients served by the CCE program must be functionally impaired. As defined under Section 430.203(7) and Rule 58C-1.002, Florida Administrative Code F.S., a functionally impaired elderly person, means any person 60 years of age or older, having physical or mental limitations that restrict the ability to perform the normal activities of daily living and impede the capacity to live independently without the provision of core services. Functional impairment shall be as determined by an initial comprehensive assessment and at least an annual reassessment using the form incorporated by reference in paragraph 58A-1.010(1) (b), F.A.C.

Final determination of eligibility is the responsibility of the CCE Lead Agency. A potential consumer will be determined eligible only after a DOEA Form 701B Assessment is completed to establish age, need and risk of institutional placement without services.

e. Prioritization

Individuals seeking services may enter the community care service system by direct contact with an Access Point.

The Uniform Client Assessment Instrument (Form 701B) developed by the Department of Elder Affairs must be used by the CCE Lead Agency case manager to determine an individual's level of need. Scores obtained using the assessment will provide a priority ranking score to help determine the need for services.

Those people suspected to be victims of abuse, neglect or exploitation are referred by the Department of Children and Families Adult Protective Services (APS) Unit, and shall be given primary consideration over all others to receive Community Care for the Elderly services.

f. Referral

Services not available through the agencies under subcontract or vendor agreement with a CCE Lead Agency should be obtained and / or arranged through referrals to other community resources. Referrals should be made to volunteer agencies, informal networks and proprietary agencies that charge fees a consumer may be able to pay. Services provided under the CCE program should be considered as a 'last resort' to meet the needs of any given consumer.

The CCE Lead Agency case manager must conduct follow-up contacts on referrals within fourteen business days to ensure services have begun as authorized.

g. Enrollment Management

The Assessed Prioritized Consumer List (APCL), also known as the priority list, must be maintained when formal services funded by CCE, HCE and / or ADI are not available. Following the screening and assessment process, the client is placed on the APCL, informed about the enrollment management process and provided alternative sources for assistance that may be available. Further information on APCL or wait list requirements can be found in the DOEA Programs and Services Handbook, Chapter 2.

4) <u>Comprehensive Assessment of Eligible Consumers</u>

The case manager is responsible for completing the DOEA Uniform Client Assessment Instrument, Form 701B. The assessment determines the person's functional status, existing resources and service needs. Further information on DOEA Form 701B requirements can be found in the DOEA Programs and Services Handbook.

a. Determination of Functional Status
A consumer's functional status is determined by the scores received on the Activities of Daily Living (ADL) and the Instrumental Activities of Daily Living (IADL) sections of the DOEA Form 701B Assessment instrument.

b. Establishing Service Needs
The result of the comprehensive assessment process is establishment of a consumer care plan, which must thoroughly address all service needs of the functionally impaired elderly person.

5) <u>Provision of Services to Adult Protective Services (APS) Referrals</u>

The Department of Elder Affairs and Department of Children and Families (DCF) signed a memorandum of agreement to ensure delivery of timely services to vulnerable elders in need of services or victims of abuse, neglect, or exploitation. The agreement calls for development of joint local written procedures through a Memorandum of Understanding for serving Adult Protective Services referrals. Every AAA, DCF region and Lead Agency is responsible for jointly creating and signing a Memorandum of Understanding to define:

- The APS referral process
- Method to track referrals in CIRTS and APS Referral Tracking Tool (ARTT)

- Service delivery guidelines according to “APS Referrals Operations Manual”

The Lead Agency shall ensure, pursuant to Section 430.205(5), F.S., those elderly persons determined by Adult Protective Services (APS) to be victims of abuse, neglect, or exploitation, and who are in need of immediate services to prevent further harm, and are referred by APS as “high risk”, will be given primary consideration to receive CCE services.

Case coordination by a Lead Agency case manager must be available 24 hours per day, seven days a week for elderly victims of abuse, neglect or exploitation who are referred by an APS investigator. Emergency services may be provided, or continued, for up to 31 days for APS referrals by contracted emergency services providers. A DOEA Form 701B Assessment must be conducted within 72 hours to determine eligibility for ongoing CCE services. According to the Ch. 430, F.S., those elderly persons determined through the use of the functional assessment to be at risk of institutional placement, and any victim of abuse, neglect or exploitation shall be given top priority to receive CCE services.

Lead Agency case managers must immediately report to 1-800-96-Abuse Registry any situation where any elderly person is the suspected or actual victim of abuse, neglect, or exploitation.

Lead Agency case managers must coordinate closely with APS workers, investigators and / or caseworkers to:

- Assure immediate need for services is met within 72 hours of an initial high-risk referral from the APS worker.
- Share client or case specific information to assure the best and most expeditious care for the person and eliminate or reduce factors placing the person at risk of abuse, neglect or exploitation.
- Until released by APS, the Lead Agency must coordinate case. management with APS, and may bill for Case Management units.
- Adhere stringently to the guidelines in the DCF APS Operations Manual and DOEA Programs and Services Handbook.

6) Service Care Plan

Lead Agency case managers must prepare a care plan for each eligible consumer using the format prescribed by the DOEA Programs and Services Handbook, Chapter 2, Attachment 4. The care plan is developed in coordination with the consumer and / or caregiver, and must address all consumer needs. It is the responsibility of the case manager to consider the most appropriate resources to provide the services needed, as indicated in the care plan. Consumers or caregivers may accept or decline services or

providers of services. The option of the consumer to choose from multiple service provider agencies must be observed at all times. Chapter 2 of the Department of Elder Affairs Programs and Services Handbook can be found at: http://aaaswfl.org/documents/.

Case managers must manage consumer care plans by arranging for the services accepted, and monitoring the quality of service delivered to their clients. Periodic review of continued appropriateness of the care plan should occur at least twice annually. Specific frequency requirements for each Program are prescribed in the DOEA Programs and Services Handbook, Chapter 2. All consumers must be reassessed at least annually, and care plans must reflect changing or ongoing consumer needs.

7) Resource Management and Development

Community Care for the Elderly funds appropriated by the Florida Legislature must be used only to provide CCE services, case management, and directly related expenditures. The Lead Agency must ensure all other funding sources available have been exhausted before using CCE funds. Additionally, the designated Lead Agency must prepare CCE, ADI and HCE surplus / deficit reports and forward the reports to the Area Agency on Aging and DOEA, upon request.

To provide an effective continuum of care, the Lead Agency must ensure coordination with all community-based health and social services programs for functionally impaired older persons funded wholly or in part by federal, state and local funds. Voluntary contributions, gifts and grants must be encouraged and used to expand CCE services to support a comprehensive service array.

Collecting co-payments from clients is an important responsibility for providers of Community Care for the Elderly (CCE) and Alzheimer's Disease Initiative (ADI) services. State General Revenue resources to support services for the elderly cannot meet the growing needs. Therefore, every eligible client must be given an opportunity to participate in the co-pay for services program. It is critical case managers assess potential clients for their ability to participate in the cost of their care.

It is equally important to identify potential Medicaid-eligible clients and refer them to the ADRC for assistance in obtaining their Medicaid benefits through the Department of Children and Families, and potential eligibility and enrollment in the Medicaid Managed Long-Term Care Program. State General Revenue resources should not be used for clients who meet Medicaid functional impairment criteria and who are Medicaid eligible.

The ADRC provides long-term care options counseling. ADRC Helpline staff conduct long-term care options counseling to assist clients in determining the best and most appropriate selection of services and programs for themselves.

For Medicaid-eligible consumers, the ADRC coordinates eligibility determination for publicly funded program services. When it is determined that a client may be eligible for Medicaid funded programs, ADRC staff assist with eligibility determinations through coordination with CARES and DCF staff.

8) Quality Assurance

To assure effective and efficient client care through delivery of quality services, Lead Agencies must participate in pre-service and in-service training developed according to standards and requirements specified in rules and the DOEA Programs and Services Handbook.

The Lead Agency will self-monitor and self-evaluate the quality of service delivery by its own staff. Additionally, the Area Agency on Aging will conduct independent quality assurance monitoring and performance evaluations of all CCE Lead Agencies.

The degree of client satisfaction with service quality and staff effectiveness must be evaluated periodically during the contract period. A consumer survey must be conducted, compiled and results evaluated and reported to the Area Agency on Aging. Each consumer must be given a survey at least annually. Survey results are expected to be analyzed by the Lead Agency and used to develop continuous quality assurance initiatives to ensure improvements to service delivery.

9) Co-Payment for CCE and ADI

The Lead Agency providers are responsible for collection of fees for services in accordance with rules adopted by the Department of Elder Affairs for the CCE (s. 430.204(8) and FAC, 58C-1.007) and ADI programs (s. 430.503). Provider agencies shall assess fees for services rendered according to those rules. To help pay for services, a functionally impaired elderly person shall be assessed a fee based on an overall ability to pay. The fee assessed shall be fixed according to an established DOEA schedule. Co-pay Guidelines and any policy memoranda on this subject issued subsequently by the Department are included in the DOEA Programs and Services Handbook.

The Lead Agency is responsible for timely billing and collecting assessed co-payments for all services provided under the CCE and ADI programs. This includes coordinating with other service provider agencies with whom CCE

and ADI consumers are shared. Case managers must exercise particular attention to the procedures established for termination of services to consumers due to non-payment, and requirements for consumer notification of right to appeal and approval of waiver of termination for non-payment. The collected funds must be reported to the Area Agency on Aging monthly. All collected co-payment funds must be used to expand consumer services under the CCE and ADI programs and may be used to count toward the 10% contract match requirement. The designated Lead Agency's annual Co-Pay goals will be established in conjunction with by the Area Agency on Aging (based on client data), and the co-pay goal will be incorporated in the negotiated CCE and ADI contracts.

10) <u>Disaster Preparedness and Emergency Related Service Provision</u>

The Lead Agency is required to enter disaster preparedness data into CIRTS for all consumers. In addition to basic identification, location, emergency contact and disability information, this data includes fields to indicate if a consumer needs help for emergency evacuation, and if they need a specially equipped shelter and special disaster registry listing. The Lead Agency must be prepared to use CIRTS reports to routinely provide registry information to the local emergency management team and identify, locate and assist with evacuation and other needs of endangered elderly persons in the event of disaster, as directed by the Department of Elder Affairs.

To prepare for an emergency / disaster event, the Lead Agency will cooperate, coordinate and train with the local emergency management agency to the fullest extent possible. The Lead Agency must maintain a current DOEA required Disaster Plan to be implemented, at the direction of DOEA, in the event a disaster is declared by federal, state or local officials. The plan minimally calls for the following measures and procedures:

- Designation of a Disaster Coordinator and alternate.
- Plans for contacting all at-risk consumers, on a priority basis, prior to and immediately following a disaster.
- Plans to receive referrals, conduct outreach, and deliver services, before and after a disaster, to elderly persons who may or may not be current consumers.
- Plans for after-hours coverage of network services, as necessary.
- Plans to dispatch to shelters outside the disaster area to assist elderly evacuees with special needs, if necessary.
- Plans to help at-risk consumers register with the Special Needs Registry of the local emergency management agency.
- Plans to deliver meals to consumers prior to and following a disaster
- Plans to assign staff to Emergency Operation Centers and / or declared assistance centers to ensure elderly victims in the disaster area receive help.

11) Social Security Number Disclosure

In accordance with Title XIX of the Social Security Act, the client must be informed disclosure of their SSN is voluntary and will be used for referral and screening for Medicaid purposes. The client is not required to provide the SSN, but is encouraged to do so for staff to screen for Medicaid eligibility and referral to the Department of Children and Families or ADRC for potential services.

12) Consumer Grievance and Appeals Procedures

The Lead Agency must develop and maintain procedures to provide for handling consumer complaints and process appeals regarding denial, reduction or termination of core services. These procedures must provide for informing all consumers of the grievance and appeal process, including prior written notification to the consumer of activities related to the grievance / appeal, and providing assistance to consumers desiring to file a grievance / appeal. Information concerning consumer grievance and appeals procedures can be found in **Appendix I**, Contract, and the DOEA Programs and services Handbook.

13) Voter Registration

In accordance with the 1993 National Voter Registration Act 42 U.S.C. 1973gg-5(a), (b), and sections 97.021 and 97.058, Florida Statutes, Lead Agency case managers and staff are required to offer voter registration assistance to individuals applying for Medicaid services. Time spent on voter registration assistance is not a billable case management activity. The case manager must complete a Voter Registration Preference Form to be filed in the client record and assist, if the consumer desires, with completion of the Voter Registration Application Form, forward the application form to the Supervisor of Elections within five days, and complete the CIRTS client voter registration data fields. Voter Registration Preference Forms and Voter Registration Application Forms (in English and Spanish) may be obtained from the Area Agency on Aging.

14) Personnel Standards and Employee Benefits

Personnel policies incorporated into agency operating procedures must be developed to address at a minimum, the following:

a. Employee recruitment and hiring
b. Lines of authority and supervision
c. Working schedules and hours of operation
d. Employee compensation
e. Employee fringe benefits

f. Employee evaluation and promotion
g. Leave
h. Confidentiality and privacy
i. Employee discipline and termination
j. Employee grievance procedures
k. Accidents, safety, and unusual incidents
l. Travel and transportation policies
m. Employee conduct
n. Employee pre-and in-service training and staff development
o. Assurance of agency compliance with all applicable federal and state laws and regulations

Job descriptions must be established for each funded and any associated unpaid position. Job descriptions for funded positions must include salary ranges and must be submitted as part of this proposal. In addition, the minimum education, training, experience and qualifications necessary for each position must be included.

A salary range for each paid position must be established by the governing body of the Lead Agency.

15) Organization Chart

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

16) Reporting

The Lead Agency is required to compile Community Care for the Elderly (CCE), Alzheimer's Disease Initiative (ADI), Home Care for the Elderly (HCE) and Local Service Provider (LSP, if applicable), service delivery statistics and other data and report to the Area Agency on Aging and Department of Elder according to reporting requirements developed by the Department.

The Area Agency on Aging monthly reporting requirements for CIRTS require all client and service data for the previous month to be entered into CIRTS by the 7th day of the month following. Information is reported in the following categories:

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

Case management, case aide and any CCE core service provided by the Lead Agency must be reported monthly in CIRTS by the Lead Agency. All requests for payment reporting requirements must be submitted within the time frame established by the Area Agency on Aging. Other required reports are identified in the Contract.

In addition to proper storage, security and preservation of source documentation, CIRTS data must also be protected. Maintenance will include valid backup and retention of electronic data on a regular basis.

17) <u>Staffing and Facility Requirements</u>

Each Lead Agency's Governing Board must designate a local representative or employee with legal authority to act on behalf of the agency and / or the CCE program. This individual must devote sufficient time to ensure the CCE program is administered and managed per DOEA requirements.

All CCE services (including case management) must be delivered by qualified staff according to service standards included in the DOEA Programs and Services Handbook. The number of staff employed should follow the DOEA Program and Services Handbook and be sufficient to ensure timely service delivery to all Lead Agency consumers.

All CCE Lead Agencies must be open and accessible to the public a minimum of 40 hours per week, Monday through Friday between the hours of 8:00 AM and 5:00 PM. During all other hours, telephone coverage via answering service must be provided. The office should be reasonably accessible to persons seeking assistance and / or information; it is preferable the Lead Agency be centrally located within the Community Care Service Area, and be disability accessible.

Lead Agencies must demonstrate they have sufficient resources, in terms of both trained staff and equipment, to complete timely CIRTS data entry, data management requirements and access to electronic mail from the Department of Elder Affairs and Area Agency on Aging.

A successful bidder for Lead Agency designation must be prepared to assume program responsibilities and service provision at 12:01 AM on the first day covered by the contract period, without interruption to existing consumers. Additionally, case coordination by a Lead Agency case manager must be available 24 hours per day / seven days per week for elderly victims of abuse, neglect or exploitation who are referred by an APS investigator. New bidders for Lead Agency designation must provide detailed plans for the transfer of equipment, files and service care plans to assure a seamless transition with no interruption of service to consumers.

18) Training

All staff providing services require a general pre-service orientation and training specific to the service being provided. Lead Agencies shall be responsible for provision of the pre-service and in-service training for all paid and volunteer staff as referenced in the DOEA Programs and Services Handbook.

Each Lead Agency shall describe and allocate funds for training in the provider application included in this RFP. It is also essential Lead Agencies meet with contracted service providers to establish necessary protocol and procedures for authorization of services, paperwork and reporting unusual incident reports and general expectations for coordination. Service Providers must recognize case managers are the gatekeepers and have responsibility for coordinating and authorizing service to clients.

Pre-service orientation for staff and volunteers shall include:

- Overview of the aging process
- Overview of the aging network (AAA, DCF, AHCA, DOEA and other agencies), and the agency's relationship to the community care service system
- Overview of community care services
- Review the relationship of case management to the community care services system
- Communication techniques with the elderly
- Observation of abuse, neglect, exploitation and incident reporting
- Local agency service procedures and protocol
- Client confidentiality
- Use and completion of assessment instruments and care plans
- Interviewing skills and techniques
- Record keeping procedures
- CIRTS procedures
- Caregiver training regarding responsibilities and resource development techniques
- Interagency coordination and informal network development training
- DOEA's online 701B assessment training

In-service training hours and topics shall be provided at the discretion of the Lead Agencies. Case managers must successfully complete online training on the Uniform Client Assessment Form and pass the certification test as well as attend Care Plan training and receive an acceptable score on the post-test provided by the training team. Additionally, they must have six hours of in-service training per year and document the duration and content in case management staff records. Topics such as Alzheimer's Disease, Cultural Sensitivity, Caregivers Needs, Dealing with Difficult Clients, Mental

Health and the Elderly, and continuing Handbook and Policy Reviews are appropriate. Attendance at the Area Agency on Aging or Department of Elder Affairs sponsored training is required.

Required training will include, but not be limited to, the intake and screening assessment instruments, care plan development and costing and prioritization scoring instrument. It is essential Lead Agencies meet with CCE subcontractors to establish necessary protocol and procedures for authorization of services, paperwork and reporting, unusual incident reports and general expectations for service coordination. Service provider agencies must recognize a case manager's responsibility for coordinating and authorizing services.

19) <u>Volunteers</u>

Pursuant to section 430.204(3), Florida Statutes, concerning the Community Care for the Elderly Program, "The use of volunteers shall be maximized to provide a range of services for the functiona6lly impaired elderly person. The department shall provide or arrange for the provision of training and supervision of volunteers to ensure the delivery of quality services. The department or contracting agency may provide appropriate insurance coverage to protect volunteers from personal liability while acting within the scope of their volunteer assignments under a community care service area. The coverage may also include excess automobile liability protection."

Bidders must provide assurance and demonstrate staffing capability to train and supervise volunteer staff and volunteer supervisors. All bidders must submit a written plan to address recruitment, training, utilization and retention of volunteers to assist the CCE Lead Agency.

Reporting on the number of volunteers and volunteer hours must be submitted to the AAA on the 15th of the month following the end of each quarter of the calendar year.

Lead Agencies may use CCE funds and staff for securing, training and using volunteers. CCE funds may also be used to provide insurance and personal liability coverage, excess automobile liability protection and automobile mileage reimbursement. Per s.112.061(7),(d)1.,a., F.S., the current State of Florida approved mileage reimbursement rate is $0.445 per mile.

1. c. Coordination of Case Management and Consumers to be Case Managed

Each consumer will be assigned one and only one case manager, even if the consumer is enrolled in more than one program. This means only one case manager will be reimbursed for their services at any given time. Case management providers are strongly encouraged to cost-share case managers across programs to assure consumers receive the appropriate mix of services.

Multiple assessments will not be conducted unless a significant change in consumer status occurs to warrant such action. Providers will check CIRTS to determine if a current assessment has been completed prior to conducting an assessment.

When a consumer is enrolled in one or more programs that fund case management, the following applies: Home Care for the Elderly (HCE) will pay case management for HCE program participants who are also enrolled in another General Revenue (GR) program. If a consumer is not enrolled in HCE, the CCE or ADI provider(s) serving the consumer will decide which program will provide and fund case management. Additional information about each program to be case managed is available in the DOEA Programs and Services Handbook.

The case manager is the gatekeeper in the community care service system with the knowledge and responsibility to link consumers to the most beneficial and least restrictive array of community services and resources, irrespective of funding source or program. Case managers serve as a contact between health care and social service delivery systems, particularly physicians, hospitals, health maintenance organizations, nursing homes and home health agencies.

Consumer choice is the primary consideration in determining service referrals. In those instances where more than one CCE subcontractor is available for a given service, and the consumer expresses no preference, the Lead Agency should make the referral based on geographical and cost efficiency considerations. The procedures and referral formats used are to be developed by the Case Management / Lead Agency.

1. d. Services to be Coordinated

The following is a list of the core services, which may be funded under the Community Care for the Elderly Program in Planning and Service Area 8:

Adult Day Care	Health Support	Other
Adult Day Health Care	Home Delivered Meals	Personal Care
Chore	Home Improvement	Pest Control Initial / Maintenance
Caregiver Training / Support	Home Health Aid	Physical Therapy
Case Aide	Homemaker	Respite
Case Management		Pest/Rodent Control, Initiation, & Maintenance
Companionship	Legal Assistance	Shopping Assistance
Counseling	Material Aid	Skilled Nursing Services.
Emergency Alert Response	Medication Management	Speech Therapy
Escort	Nutrition Counseling	Specialized Medical Equip Services & Supplies
Financial Risk Reduction	Occupational Therapy	Transportation

A complete list of the services funded under all programs managed by the Department of Elder Affairs and descriptions for each may be found in the DOEA Programs and Services Handbook.

CCE services and the county specific funding available for case management and core services under this bid are included in Section B.2.c. (Funding Levels). Additionally, county specific historical service funding levels and unduplicated client information for the 2016-2017 CCE contract periods are included as **Appendix XII.**

1. e. Special Conditions

A) The selected Lead Agency will provide case management services equal to or above the level of unduplicated clients proposed for the Fiscal Year 2017-2018 as shown in Section B.2.c.

B) Proposed CCE unit rates must be submitted and the selected bidder will be required to submit all backup documentation to support those rates.

C) Future unit rate increases for CCE services for Fiscal Years 2-6 (and for any subsequent contract renewals) will be negotiated by the Area Agency on Aging for Southwest Florida and the Lead Agency following submission of the Lead Agency's Annual Service Cost Report. All unit rate increase negotiations shall be governed by state mandated policies contained in the DOEA Notice of Instruction **NOTICE #: 092815-1-PC-SCBS,** dated September 28, 2015, which states:

Service Cost Reports *– The Contractor shall require Subcontractors to annually submit to the Contractor service cost reports, which reflect actual costs of providing each service by program. Any multi-year contracts entered into with service providers on or after the effective date of this contract shall contain a provision requiring the contract's parties to re-evaluate the contract's reimbursement rates on an annual basis. The Contractor may annually renegotiate rates based on, including but not limited to, a review of sustainability, the respective consumer price index, or current market conditions. However, it is the intent of the Department that the quality of services provided to current program recipients not be reduced.*

The AAA (Contractor) will annually review the appropriateness of its provider's rates based on a board-approved policy that considers local factors like the provider's sustainability, expected market fluctuations, or the consumer price index. Justification that evidences this review and considers the potential change in rates shall be made available upon annual monitoring or upon the Department's request.

1. f. Planning Goals and Outcome / Output Measures

In keeping with the legislatively mandated requirements for contract performance measures, the DOEA has identified six key goals that the ADRCs and Lead Agencies are required to develop implementation strategies to assist the Department in achieving statewide outcome and output measures identified for the aging network. The goals are:

- Empower older people, individuals with disabilities, their families and other consumers to choose and easily access options for existing mental and physical health and long-term care.
- Enable individuals to maintain a high quality of life for as long as possible through the provision of home and community-based services, including supports for family caregivers.
- Empower older people and their caregivers to live active, healthy lives to improve their mental and physical health status.
- Ensure the legal rights of older people are protected and prevent their abuse, neglect and exploitation.
- Promote planning and collaboration at the community level that recognize benefits and needs of its aging population.
- Maintain effective and responsive management.

The designated Lead Agency is required to adhere to the action steps and implementation strategies in the Area Agency on Aging Area Plan to meet and / or exceed the planning goals and outcome / output measures as specified by the Department of Elder Affairs and Area Agency on Aging.

Planning Goals
This section contains the goals listed above. The applicant should answer each question in reference to each identified goal.

Outcome / Output Measures
The outcome measures outlined in the format section of this application are the statewide initiatives legislatively mandated for the DOEA. The specific state and area-wide criteria for the outcome / output measures and numeric targets for the PSA are indicated. All Lead Agencies are required to describe the strategies and actions they will use to implement and follow to meet and / or exceed the outcome / output measures as specified by DOEA.

The 2018-2019 Service Provider Application (SPA) update contains the pertinent goals and relevant outcomes all Lead Agencies are responsible to address. To complete this section of the SPA, providers should respond to the questions for each goal area defined by the DOEA and Florida Legislature. Specific strategies and actions for each goal should be incorporated to address compliance and improve quality assurance.

2. General Information

a. Contact Person

The contacts for this Request for Proposal process are:

Primary Contact:
Becky MacKenzie, 239-652-6926, Becky.MacKenzie@aaaswfl.org

Backup Contact:
Tammy Rhoades, 239-652-6922, Tammy.Rhoades@aaaswfl.org

Area Agency on Aging for Southwest Florida, 15201 North Cleveland Avenue, Suite 1100, North Fort Myers, FL 33903

b. Inquiries/Cone of Silence

Inquiries: Verbal and written inquiries will be accepted at the pre-proposal conference on January 29, 2018 at 1:00 p.m. A summary of key questions and answers from this conference and any addenda to the Request for Proposals document will be posted on the agency's website *www.aaaswfl.org* on January 31, 2018.

Cone of Silence: Respondents to this RFP, or persons acting on their behalf, may not contact, between the release of this RFP and deadline for submission of written appeals, any employee or officer of the Area Agency on Aging, any individual involved in evaluating proposals submitted in response to the RFP, or any employee or officer of the State of Florida concerning any aspect of this solicitation, except in writing to the contact person identified below. Violation of this provision may be grounds for rejecting a proposal.

No interpretation of the meaning of the RFP documents will be made to any proposer orally. Oral statements made by Area Agency on Aging representatives in the pre-proposal conference may not be relied on by proposers unless such statements are included in the written summary of the conference or addendum. Failure of a proposer to receive any such addendum or summary shall not relieve said proposer from complying with the RFP documents as clarified or revised in writing. All addenda and clarifications issued shall become part of the RFP documents.

Written inquiries will be accepted between January 5, 2018 and January 29, 2018. No written inquiries will be accepted after January 29, 2018 at 11:00 a.m. EST.

Written inquiries may be emailed, hand delivered or mailed to the contact person in charge of this solicitation process:

Becky MacKenzie, Director of Programs and Planning
Area Agency on Aging for Southwest Florida
15201 North Cleveland Avenue, Suite 1100
North Fort Myers, FL 33903
239-652-6926
Becky.MacKenzie@aaaswfl.org

c. Funding Levels

Funding for the Community Care for the Elderly Program is contingent upon an annual appropriation from the Legislature and is therefore subject to reduction or elimination from the state budget.

Services will be bid on a per-county basis and each proposal must ensure the respective services will be accessible throughout the entire county. If an applicant chooses to bid on services in more than one county, a separate Service Provider Application (SPA) must be submitted for each county. Responders to bid are encouraged to bid on multiple counties to achieve economies of scale and maximize services to seniors.

The county specific funding levels and required unduplicated client count information is noted in **Appendix XII**. Please note acceptable bids must meet the following funding and unduplicated client count criteria:

1) County specific funding for Case Management cannot exceed the amount shown in **Appendix XII.**

2) Core services currently funded in each county must be maintained at comparable levels to ensure existing clients continue to receive the needed services, as shown in **Appendix XII** for the 2018-2019 contract period (allowances will be made for changes in total core service funding).

3) The county specific total funding for all CCE Core services and Case Management must match the "Total CCE Funds" shown for the specific county being bid.

4) The total unduplicated clients to be served must be equal to or exceed the number of unduplicated clients shown for the specific county being bid.

d. Matching Requirement

Bidders awarded funds through this solicitation process will be required to provide a match equal to, or greater than, 10% of the total budget presented. The match requirement may be satisfied through a commitment of cash or in-kind resources, or combination. State General Revenue dollars from other contracts or grants may not be used as match. Appropriate matching funds based on the Lead Agency's year to date contract achievement levels must be reported monthly.

e. Type of Contract and Method of Payment

Only fixed unit rate contracts will be issued. Bidders awarded funds will be reimbursed monthly for the units of service provided, at the contracted unit rate, up to the total amount of the contract. The Community Care for the Elderly Lead Agency is expected to manage its budgets such that the Lead Agency is able to provide services to enrolled clients for the entire contract period without interruption. Lead Agencies shall monitor overall contract expenditure rates during the contract period. Monthly invoices submitted by the Lead Agency are consolidated and submitted to the Department of Elder Affairs for payment. Payments are usually received within 45 to 60 days of submission.

Service and client information must be maintained in the Client Information and Registration Tracking System (CIRTS). Case management and core service units must be entered in CIRTS monthly for Lead Agencies to be reimbursed.

Bidders awarded funds through this solicitation agree to maintain and provide, upon request, all programmatic, financial, and CIRTS reports as required in the program and service contract. Copies of the contract are attached to this Request for Proposals document as **Appendix I.** Failure to abide by these terms and conditions may result in suspension of payment and / or termination of the contract.

The method of payment for awarded contracts under this RFP may include payment advances. Per Florida Statutes, advance payments may be made only to not-for-profit corporations and governmental agencies.

The recipient must ensure fixed rates include only those costs in accordance with all applicable state and federal statutes and regulations and are based on audited historical costs in instances where an independent audit is required. All requests for payment will be processed using the Area Agency on Aging billing system. Additional information on method of payment and the schedule of reporting is included in the Program and Service Contract, **Appendix I**.

f. Allowable Costs, Method of Cost Presentation, and Method of Payment

Allowable Costs
All CCE program costs must be reasonable and necessary. Lead Agencies must comply with the provisions of the Florida Single Audit Act as contained in section 215.97, Florida Statutes, if applicable.

Method of Cost Presentation
All contract costs and unit rates must be developed using the Department of Elder Affairs Unit Cost Methodology formats as described in the Service Provider Application Format (**Appendix VIa**) and Instructions packet (**Appendix V**). Please visit the Area Agency on Aging website to obtain related documents for completing this RFP package. Related documents to complete this RFP package can be found here*: http://aaaswfl.org/documents/.*

Bidders must follow the Unit Cost Methodology closely and provide the Area Agency on Aging with information in sufficient detail to allow proposal reviewers to determine the appropriateness and accuracy of all identified costs and rates. Through the review of factual information submitted by each bidder, the review team must be able to establish, that costs are allowable, reasonable and necessary. Budget notes and any additional narrative that will give the review team a clear picture of the allocation methodology followed by the bidder are recommended and bidders are encouraged to make these available.

g. Trade Secrets

The Area Agency on Aging is unable to assure confidentiality of information fitting the definition of trade secrets pursuant to section 812.081 Florida Statutes. The Area Agency on Aging assumes no liability for disclosure of or use of unmarked material containing trade secrets or other confidential material and may use or disclose the data for any purpose, and may assume the proposal was not submitted in confidence and therefore is a public record pursuant to Chapter 119, Florida Statute. The Area Agency on Aging is not obligated to agree with a proposer's claim of exemption for marked materials and, by submitting a proposal, the proposer agrees to be responsible for sdefending its claim that each and every portion of marked trade secrets are exempt from inspection and copying under Florida's Public Records Law. Proposer agrees that it shall protect, defend, and indemnify, including attorney fees and costs, including any appellate costs and attorney fees, the Area Agency on Aging, its officers, employees, agents, and legal counsel from any and all claims and litigation arising from or relating to proposer's claim that the marked portions of its proposal are confidential, proprietary, trade secret, or otherwise not subject to disclosure.

h. Costs of Preparation of Proposal

Any and all expenses involved in the preparation and submission of proposals in connection with this solicitation process shall be borne by the bidder(s). The Area Agency on Aging assumes no liability for any cost incurred by the bidder in responding to this Request for Proposal nor for any other pre-contract costs. Current CCE providers must certify they have not used CCE program funds in preparing a response to this RFP by completing **Appendix XIV**.

i.	**Proposal Deadlines**		
	ACTIVITIES	***DATE***	***TIME (EST/EDT)***
1.	Request for Proposal advertised and released	**01/05/2018**	**10:00 a.m.**
2.	RFP documents available on the Area Agency on Aging website: *www.aaaswfl.org*	**01/05/2018**	**10:00 a.m.**
3.	Pre-Proposal Conference: *Area Agency on Aging for Southwest Florida* *15201 North Cleveland Ave., Suite 1100* *North Fort Myers, FL 33903* The Pre-Proposal Conference will include a review of RFP package, followed by a question and answer session.	**01/29/2018**	**1:00 pm**

i.	**Proposal Deadlines**		
	ACTIVITIES	***DATE***	***TIME (EST/EDT)***
4.	Last day for written inquiries/RFP Questions to be submitted	**01/29/2018**	**4:00 p.m.**
5.	Response to written inquiries & RFP addenda available to registered bidders on the Area Agency on Aging website: *www.aaaswfl.org*	**01/31/2018**	**4:00 p.m.**
6.	Required Intent to Submit a Proposal forms due	**02/05/2018**	**4:00 p.m.**
7.	Last day for proposal submission at: *Area Agency on Aging for Southwest Florida* *15201 North Cleveland Ave., Suite 1100* *North Fort Myers, FL 33903*	**03/02/2018**	**3:00 p.m.**
8.	Proposals opened and reviewed for fatal criteria	**03/02/2018**	**3:05 p.m.**
9.	RFP Review Committee recommendations finalized	**TBD between 03/20/2018-03/29/2018**	**5:00 p.m. EDT**
10.	RFP Review Committee recommendations reviewed by Board of Directors	**04/26/2018**	**4:00 p.m.**
11.	CCE Lead Agency Designation Notice of Intent to Award announced by formal written notice	**04/27/2018**	**4:00 p.m.**
12.	Written appeals due	**05/04/2018**	**4:00 p.m.**
13.	Appeals resolved	**05/08/2018**	**4:00 p.m.**
14.	Announcement of final awards by formal written notice	**TBD**	**TBD**
15.	Transition process begins: Consumer notifications & file transfers	**TBD**	**TBD**
16.	Contract finalized and mailed	**June 2018**	
17.	Transition process ends	**June 30, 2018**	
18.	Program operations begin for new CCE Lead Agencies	**July 1, 2018**	

j. Pre-Proposal Conference

Bidders and interested parties are encouraged to attend the pre-proposal conference, which will take place on January 29, 2018 at:

Area Agency on Aging for Southwest Florida
15201 North Cleveland Avenue, Suite 1100
North Fort Myers, FL 33903

The conference shall start promptly at 1:00 p.m.

Certified Minority Business enterprises are encouraged to participate. Please note attendance at the pre-proposal conference is not a pre-requisite for acceptance of proposals.

k. Notice of Intent to Submit a Proposal

Information regarding any addenda to the Request for Proposals solicitation and copies of written responses to questions resulting in clarifications or addenda to the Request for Proposals will be available on the Area Agency on Aging for Southwest Florida website.

Every entity that intends to submit a proposal must deliver the required Notice of Intent Form (Appendix II) to the Area Agency on Agency at the address below no later than February 5, 2018 at 4:00 p.m. In the event less than two Notices of Intents are received per county, per Ch. 287, F.S., the Area Agency on Aging will institute the Exceptional Purchase provisions for a single source contract. In this case, no response to the RFP is needed, and the Agency will proceed under the single source provisions of Sec. 287.057, F.S.

Any entity who protests the intended decision pertaining to the Exceptional Purchase, shall be required to post, at the time of filing a formal written protest, a bond in the amount equal to one percent of the estimated contract amount, pursuant to Sec. 287.042, F.S.

Failure to submit the Notice of Intent will preclude that party from submitting a proposal.

Notice is to be submitted on or before February 5, 2018 at 4:00 p.m. to:

Becky MacKenzie, Director of Programs and Planning
Area Agency on Aging for Southwest Florida
15201 North Cleveland Avenue, Suite 1100, North Fort Myers, FL 33903
239-652-6926
Becky.MacKenzie@aaaswfl.org

l. Acceptance of Proposal

Proposals must be received by March 2, 2018 at 3:00 p.m. to:

Becky MacKenzie, Director of Programs and Planning
Area Agency on Aging for Southwest Florida, 15201 North Cleveland Avenue, Suite 1100, North Fort Myers, FL 33903
239-652-6926, Becky.MacKenzie@aaaswfl.org

No changes, modifications or additions to the proposals submitted, will be accepted after the submission deadline. However, the Area Agency on Aging may seek written clarifications from proposers.

Proposals not received at either the specified place or by the specified date and time by the Area Agency on Aging clock, or both, will be rejected and returned unopened to the proposer. All times specified in this RFP are based on the Area Agency on Aging clock.

m. Number of Copies Required and Submission Procedure

Bidders are required to submit five copies of their proposal. At least one copy must contain an original signature of an official of the potential provider agency authorized to bind the provider to the agency's proposal. Additionally bidders must submit one electronic copy of the complete Service Provider Application package on a flash drive. Copies of proposals along with the flash drive containing the electronic copy must be submitted **in a sealed envelope or container**, which must be clearly marked on the outside to read:

Proposal for CCE Lead Agency Designation
Submitted by: (name and address of bidder)

The original of the proposal must contain, where required, the signature of an agency official authorized to do so on behalf of the bidder.
Proposals may be forwarded through certified mailed (return receipt requested) or hand delivered to:

Becky MacKenzie, Director of Programs and Planning
Area Agency on Aging for Southwest Florida
15201 North Cleveland Avenue, Suite 1100
North Fort Myers, FL 33903
239-652-6926
Becky.MacKenzie@aaaswfl.org

Proposals must be received on or before March 2, 2018 at 3:00 p.m.
Proposals cannot be faxed or e-mailed.

Proposals will be date and time stamped immediately upon receipt. Staff will open the first proposal at exactly 3:05 p.m. on March 2, 2018, at which time no further proposals will be accepted under this solicitation.

n. Notice of Intent to Award

Notice of final Intent to Award a contract shall be posted, as stipulated in the RFP Timeline, at the Area Agency on Aging office and on the Area Agency on Aging web site *www.aaaswfl.org* and on any other information site for which the initial RFP advertisement appeared. Written notice of Intent to Award will be sent to all respondents by certified mail, return receipt requested.

The Area Agency on Aging will designate as Lead Agencies and award contracts to the proposal ranked highest, using the evaluation methodology and criteria in the RFP, which represent the best offer(s) for services sought subject to the thresholds and procedures described in more detail below. **The Area Agency on Aging reserves the right to reject any and all proposals.**

o. Appeal Process

In accordance with 430.203(9)(a) 1., F.S., and 58C-1.0031 F.A.C. "Lead Agency Dispute Resolution", any party who is substantially affected by the Area Agency on Agency's intended decision to award a contract for a Lead Agency must file a written notice of protest with the Area Agency on Aging within 72-hours after posting of the Notice of Award, excluding weekends and state holidays. Written notices must be hand delivered or sent certified mail, return receipt requested and received by the Area Agency on Aging within the timeframes indicated above. A substantially affected party is any party who bid on the RFP for designation as a Lead Agency.

A formal written protest must be filed within 10 calendar days after date of the Notice of Protest is filed, unless the 10th day falls on a weekend or state holiday, in which case the deadline shall be the next business day.

The formal written protest must state, with particularity, the facts and law upon which the protest is based. Any entity who files a formal protest of the Area Agency on Aging's RFP Intent to Award decision shall be required to post, at the time of filing the formal written protest, a bond in the amount equal to one percent of the estimated contract amount, pursuant to Sec. 287.042, F.S.

"Failure to file a Notice of Protest as described in subsection (4) of Rule 58C-1.0031, Florida Administrative Code (F.A.C.), shall constitute a waiver of proceedings under Rule 58C-1.0031, F.A.C."

In the event any pending bid protest will result in a disruption in services delivery to elderly clients, the Area Agency on Aging reserves the right to

contract on an emergency and interim basis, to maintain the delivery of services in place until such time when the protest is resolved.

p. Contract Terms and Conditions

An example of the anticipated contract and associated attachments may be found under **Appendix I** attached to this RFP. All bidders are instructed to read all documents carefully to determine their agency's ability to meet the requirements in the documents. Proposals must include a signed and dated Contract Terms and Conditions Affidavit (**Appendix III)** that certifies each bidder's intention to abide by all terms and conditions of the Program and Service CCE, ADI, HCE and EHEAP Contracts.
Failure to submit a fully completed Contract Terms and Conditions Affidavit constitutes a fatal flaw and will automatically disqualify a proposal from further review and consideration.

SECTION C: INSTRUCTIONS TO BIDDERS

The following pages contain general conditions a bidder must follow to submit their proposal. The RFP package must include a Table of Contents, and all pages must be numbered. The bidder should use **Appendix XI** (Bidder Checklist) for this purpose. The Table of Contents must note the corresponding page number(s) associated with each item.

1. BIDDER CERTIFICATION

The following forms are REQUIRED and must be included in the proposal:

1. **Administrative Assessment Checklist:** Each bidder is required to fill out this standard checklist to indicate the agency's adherence to commonly accepted fiscal and administrative policies and procedures. The checklist is **Appendix VII** to the RFP.

2. **Contract Terms and Conditions:** A signed statement indicating the bidder's acceptance of all terms and conditions of the Program and Service Contract (**Appendix I**) is required. This Affidavit is included as **Appendix III** to the RFP.

3. **Statement of No Involvement:** A signed statement indicating neither the bidder, nor any person with an interest in the bidder firm had a noncompetitive contract with the Area Agency on Aging that involved any preliminary work (e.g., feasibility study or actual preparation of the RFP) prior to release of the solicitation document. This form is **Appendix IV** to the RFP.

FAILURE TO SUBMIT the Administrative Assessment Checklist – APPENDIX VII , AND Contract Terms and Conditions - APPENDIX III, AND Statement of No Involvement - APPENDIX IV CONSTITUTES A FATAL FLAW, WHICH WILL AUTOMATICALLY DISQUALIFY ANY PROPOSAL FROM FURTHER REVIEW AND CONSIDERATION.

2. SERVICE PROVIDER APPLICATION FORMATS (APPENDIX VI)

a. Service Provider Summary Information Page

Section I.A. of the Service Provider Application (SPA) **Appendix VIa** must be completed in its entirety, and must be signed and dated by an authorized agency official.

b. Program Module – General Requirements

Section II.A. (Items 1-15) of the SPA (**Appendix VIa**) must be completed in its entirety. Detailed instructions are included for each items (1-15) on the specific application format pages. It is helpful to use the guidelines and instructions (**Appendix V**) to complete each item. Bidders will be expected to provide, in narrative form, information that indicates an understanding of the need for, and purpose for the project, as presented in the RFP.
The proposal should include a detailed description of the program objectives pursued by the bidder, as well as an explanation of how each funded service will be provided to achieve the output and outcome measures intended by the bidder.

c. Contract Module – General Requirements

Section II.B. Items 1-3 of the SPA (**Appendix VIa**) must be completed by each bidder. Bidders must closely follow the Unit Costing Methodology and provide the Area Agency on Aging with sufficient detail to allow proposal reviewers to determine the appropriateness and accuracy of all identified costs and rates. The review team must be able to establish, through review of factual information submitted by each bidder, that costs are allowable, reasonable and necessary. Budget notes and any additional narrative to give the review team a clearer picture of the bidder's allocation methodology are recommended to be made available.

Section II.B., items 4-9: depending upon the method of match (cash or in-kind) to be provided by bidder, the appropriate "Commitment of Cash or In-Kind" forms (items 4-9) must be completed. Please note the required match may be satisfied through cash or in-kind resources or a combination of both. It is helpful to use the guidelines and instructions (**Appendix V**) to

complete each item.

Section II.B., item 10: the “Availability of Documents” form identifies required documentation that must be maintained and available at the bidder’s administrative office. The form must be signed and dated by the bidder’s authorized agency official.

3. ORGANIZATIONAL CAPABILITY PACKAGE (APPENDIX VIb)

New Bidders Only
The Organizational Capability Package (**Appendix VIb**) details 15 items requested from a new bidder agency. These items assist the review team in measuring the bidder’s management capabilities, financial position and experience. Bidders are urged to pay close attention to the specific requirements in **Appendix VIb** and address each item in detail.

Transition Plan: In the event a selected provider is not the current provider, a Transition Plan of existing clients and service management must be submitted within 20 days of bid award. Bidders must include a statement agreeing to submit their Transition Plan within 20 days of Bid award. The Area Agency on Aging must approve this plan in advance, and it must include an implementation schedule to ensure uninterrupted service delivery.

Transition Plans must take into consideration the transfer of current client files, staffing and training plans, start-up activities, timeframes for completion, any modification of service delivery schedules and sites, and notification to clients of the new service provider agency.

If there is insufficient time for the current and new service providers to transition services so there is no disruption in service delivery, the Area Agency on Aging may choose to continue services under an emergency contract.

SECTION D: PROPOSAL EVALUATION CRITERIA AND RFP RATING SHEET

1. Description of Evaluation Criteria

Each proposal will be evaluated according to the standards contained in **Appendices: VIII (Proposal Fatal Criteria) & IX (Proposal Evaluation).** Fatal Criteria are items that require the same response from all bidders. Non-fatal criteria are items that can be responded to differently by bidders.

"Fatal" criteria require only a YES or NO response, and if not met in full, the proposal will not be considered further. An ADRC committee under supervision of the person charged with oversight for this RFP will review all

proposals submitted and accepted. **Proposals which receive a negative answer to any item listed in the "Fatal Criteria" section of the Evaluation Scale will be eliminated from further consideration.**

"Non-Fatal" evaluation criteria evaluate the quality and / or completeness of the bidder's response and are rated on a point scale.

To evaluate non-fatal criteria, each section of the proposal is rated as follows:

1. Individual items in each section will be rated on a point scale of 0 to 4, with 4 being the highest rating.

2. A section total is determined by adding the individual section ratings and dividing by the total number of items in that section.

3. A weight value for the section is determined by multiplying the section total by a predetermined weight assigned to that section.

4. A rating for the proposal as a whole is determined by adding the weighted values for each section.

A MINIMUM RATING OF "TWO" IS REQUIRED UNDER THE TOTAL SCORE FOR A PROPOSAL TO BE CONSIDERED.
The evaluation criteria have been designed to give due consideration to agencies able to demonstrate:

- Collaboration and partnerships with the ADRC and other service entities
- Experience providing the service(s)
- Ability to meet minimum service standards and contract requirements as set forth by the DOEA and Area Agency on Aging
- Ability to identify areas of need and strategies to address client outcomes
- Unit cost

Using the Proposal Evaluation Scale **(Appendix IX),** an RFP review and evaluation committee appointed by the Area Agency on Aging Board of Directors will evaluate all written proposals. Proposals scoring less than a minimum rating of "**Two"** will be eliminated from further consideration.

All bidders whose proposals have been reviewed and received a minimum score of **"Two"** or higher may be considered.

In addition to the Proposal Evaluation Scale, a checklist **(Appendix XI)** has been provided to assist bidders in determining if their proposal contains all required items. This document must be completed and forwarded with the RFP package. All items should be initialed noting these items are in the bidder's RFP package.

Each member of the RFP Review and Evaluation Committee is required to complete a Conflict of Interest Questionnaire to ensure they have no conflict of interest, which could interfere in the selection of a contractor. If a committee member answers "yes" to any question on the Conflict of Interest Questionnaire, their participation in the selection team must be terminated and the person must be replaced by someone without a conflict.

If an award under this RFP is made, the Area Agency on Aging for Southwest Florida will designate as Lead Agencies the lowest, responsive, responsible, and best proposer in compliance with this RFP provided said proposal is considered (within the sole discretion of the Area Agency on Aging for Southwest Florida) reasonable and in the best interest of the Area Agency on Aging for Southwest Florida to accept. Lowest, responsive, responsible, and best refers to the results of the quantitative and qualitative evaluation process followed in the review of all proposals to be submitted. The proposal from the most responsible proposer with the highest score which contains the lowest price(s) for service(s) and which is most responsive to the RFP requirements as a whole, will be deemed to be the lowest, responsive, responsible, and best. Price(s) are significant, but it is not necessarily the proposer submitting the lowest-cost proposal who wins the contract. The Area Agency on Aging for Southwest Florida reserves the right to waive any minor irregularity in any proposal. Regardless of any other statements in this RFP, the Area Agency on Aging for Southwest Florida reserves the right to reject any one or all proposals; to re-advertise this Request for Proposal; to postpone or cancel the solicitation process; to waive any informality in any proposal; and to award the contract in the best interest of the Area Agency on Aging for Southwest Florida based on the requirements of the RFP. The Area Agency on Aging for Southwest Florida, likewise, reserves the right to reject the proposal of any proposer who has previously failed to perform properly or to complete on time, contracts of similar nature; or who is not in a position to perform the contract.

The AAA Board of Directors has ultimate approval of provider awarded contracts based upon the recommendations of the RFP Review and Evaluation Committee.

2. RFP Rating Sheet

It is recommended each bidder complete a self-review of their RFP prior to submitting their response. **See Appendices IX and XI.**

END OF DOCUMENT