

Solicitation Information December 3, 2018

Request for Proposals Number: MFP-2018-1 Title: Community Enhancement Grants

Submission Deadline: January 24, 2019, 3:00 p.m. (Eastern Time)

There will be a pre-bid proposal conference regarding this Request for Proposals. The conference is not mandatory.

Date: December 14, 2018

Time: 10:00 a.m. – 11:00 a.m.

Location: Virks Building, 3 West Road, Cranston, Room 214.

Questions concerning this solicitation must be received by the RI Executive Office of Health and Human Services at Linnea. Tuttle@ohhs.ri.gov no later than January 15, 2018 at 4:00 p.m., eastern time. Questions must be submitted in a Microsoft Word attachment. Please reference the Request for Proposals number on all correspondence. Questions received, with responses, will be posted on the Internet as an addendum to this solicitation. It is the responsibility of all interested parties to download this information. No questions will receive individual responses. No other contact with State parties is permitted.

Bid Surety Bond Required: No

Payment and Performance Bond Required: No

Buyer: RI Executive Office of Health and Human Services

Name of Contact Person: Linnea Tuttle

Title of Contact Person: Chief, Health Systems Development

Note to Applicants:

- Applicants must register on-line at the State Purchasing Website at www.purchasing.ri.gov
- Proposals received without a completed RIVIP Bidder Certification Cover Form attached may result in disqualification.

THIS PAGE IS NOT A BIDDER CERTIFICATION COVER FORM

Table of Contents

SECT	FION 1. INTRODUCTION AND NOTIFICATIONS	3
	TION 2. BACKGROUND AND INTENT	
	TION 3: SCOPE OF WORK AND REQUIREMENTS	
A.	Grant Award Amounts	7
В.	Target Population to be Served	
C.	Funding Priorities	
D.	Grant Period	9
E.	Eligible Applicants	9
SECT	TION 4: TECHNICAL AND COST PROPOSAL REQUIREMENTS	10
A.	Technical Proposal	10
В.	Cost Proposal	11
C.	ISBE Proposal	11
SECT	TION 5: EVALUATION AND SELECTION	11
A.	Technical Proposal Evaluation	11
B.	Cost Proposal Evaluation	12
C.	ISBE Participation Evaluation	12
D.	Scoring	13
E.	General Evaluation.	13
SECT	TION 6. QUESTIONS	14
SECT	TION 7. PROPOSAL CONTENTS	14
SECT	TION 8. PROPOSAL SUBMISSION	15
APPE	ENDIX A. PROPOSER ISBE RESPONSIBILITIES AND MBE, WBE, AND/OR	
DISA	BILITY BUSINESS ENTERPRISE PARTICIPATION FORM	17
ATT <i>A</i>	ACHMENT 1. WORK PLAN TEMPLATE AND INSTRUCTIONS	21
Λ TT <i>!</i>	ACHMENT 2 RUDGET TEMPI ATE	22

SECTION 1. INTRODUCTION AND NOTIFICATIONS

Under delegated authority, The Rhode Island Executive Office of Health and Human Services (EOHHS), on behalf of the Department of Administration/Division of Purchases (DOA), is soliciting proposals from qualified providers to deliver projects that help older Rhode Islanders and those with disabilities thrive in the community. Through this Request for Proposals (RFP), the state will utilize funding from the state's Money Follows the Person (MFP) program to support innovative programs and services that promote quality of life and help older adults and adults with disabilities to remain living in, or return to, the community. Funded projects will address gaps in available community programs and services in Rhode Island or strengthen, but not duplicate, existing offerings. Examples of needs addressed through funded projects include: social isolation, transportation, food insecurity, and caregiver support among others. Projects will be implemented in accordance with the terms of this RFP and the State's General Conditions of Purchase, which may be obtained at the Division of Purchases' website at www.purchasing.ri.gov.

The initial contract period will begin approximately April 1, 2019 and continue for one year. Contracts may be renewed for up to one additional 12-month period based on provider performance and the availability of funds.

This is a Request for Proposals, not a Request for Quotes. Responses will be evaluated based on the relative merits of the proposal, in addition to cost. There will be no public opening and reading of responses received by EOHHS pursuant to this solicitation, other than to name those offerors who have submitted proposals.

Instructions and Notifications to Offerors

- 1. Potential applicants are advised to review all sections of this RFP carefully and to follow instructions completely, as failure to make a complete submission as described elsewhere herein may result in rejection of the proposal.
- 2. Alternative approaches and/or methodologies to accomplish the desired or intended results of this RFP are solicited. However, proposals which depart from or materially alter the terms, requirements, or scope of work defined by this RFP may be rejected as being non-responsive.
- 3. All costs associated with developing or submitting a proposal in response to this RFP or for providing oral or written clarification of its content, shall be borne by the applicant. The state assumes no responsibility for these costs even if the RFP is cancelled or continued.

2017-2 Page 3 of 21

- 4. Proposals are irrevocable for a period of not less than 180 days following the opening date, and may not be withdrawn, except with the express written permission of the State Purchasing Agent.
- 5. All pricing submitted will be considered firm and fixed unless otherwise indicated in the proposal.
- 6. It is intended that an award pursuant to this RFP will be made to a prime vendor, or prime vendors in the various categories, who will assume responsibility for all aspects of the work. Subcontracts are permitted, provided that their use is clearly indicated in the vendor's proposal and the subcontractor(s) to be used is identified in the proposal.
 - If subcontracting is assumed, a required Memorandum of Understanding between all parties listed under the lead agency is required to be included with the proposal. Specific budgets pertaining to the work of subcontractors must be clearly detailed in the submitted budget and further explained in a narrative justification of all requested costs.
- 7. The purchase of goods and/or services under an award made pursuant to this RFP will be contingent on the availability of appropriated funds.
- 8. Applicants are advised that all materials submitted to the Division of Purchases for consideration in response to this RFP may be considered public records as defined in R. I. Gen. Laws § 38-2-1, *et seq.* and may be released for inspection upon request once an award has been made.
 - Any information submitted in response to this RFP that an applicant believes are trade secrets or commercial or financial information which is of a privileged or confidential nature should be clearly marked as such. The applicant should provide a brief explanation as to why each portion of information that is marked should be withheld from public disclosure. Applicants are advised that the Division of Purchases may release records marked confidential by an applicant upon a public records request if the state determines the marked information does not fall within the category of trade secrets or commercial or financial information which is of a privileged or confidential nature.
- 9. Interested parties are instructed to peruse the Division of Purchases website on a regular basis, as additional information relating to this solicitation may be released in the form of an addendum to this RFP.
- 10. By submission of proposals in response to this RFP, applicants agree to comply with R. I. General Laws § 28-5.1-10 which mandates that contractors/subcontractors doing business

2017-2 Page 4 of 21

with the State of Rhode Island exercise the same commitment to equal opportunity as prevails under Federal contracts controlled by Federal Executive Orders 11246, 11625 and 11375.

Providers are required to ensure that they, and any subcontractors awarded a subcontract under this RFP, undertake or continue programs to ensure that minority group members, women, and persons with disabilities are afforded equal employment opportunities without discrimination on the basis of race, color, religion, sex, sexual orientation, gender identity or expression, age, national origin, or disability.

Providers and subcontractors who do more than \$10,000 in government business in one year are prohibited from engaging in employment discrimination on the basis of race, color, religion, sex, sexual orientation, gender identity or expression, age, national origin, or disability, and are required to submit an "Affirmative Action Policy Statement."

Providers with 50 or more employees and \$50,000 or more in government contracts must prepare a written Affirmative Action Plan prior to issuance of a purchase order.

- a. For these purposes, equal opportunity shall apply in the areas of recruitment, employment, job assignment, promotion, upgrading, demotion, transfer, layoff, termination, and rates of pay or other forms of compensation.
- b. Providers further agree, where applicable, to complete the Contract Compliance Report (http://odeo.ri.gov/documents/odeo-eeo-contract-compliance-report.pdf), as well as the Certificate of Compliance (http://odeo.ri.gov/documents/odeo-eeo-certificate-of-compliance.pdf), and submit both documents, along with their Affirmative Action Plan or an Affirmative Action Policy Statement, prior to issuance of a purchase order. For public works projects vendors and all subcontractors must submit a Monthly Utilization Report (http://odeo.ri.gov/documents/monthly-employment-utilization-report-form.xlsx) to the ODEO/State Equal Opportunity Office, which identifies the workforce actually utilized on the project.

For further information, contact Vilma Peguero at the Rhode Island Equal Employment Opportunity Office, at 222-3090 or via e-mail at ODEO.EOO@doa.ri.gov.

11. In accordance with R. I. Gen. Laws § 7-1.2-1401 no foreign corporation has the right to transact business in Rhode Island until it has procured a certificate of authority so to do from the Secretary of State. This is a requirement only of the successful applicant(s). For further information, contact the Secretary of State at (401-222-3040).

In accordance with R. I. Gen. Laws §§ 37-14.1-1 and 37-2.2-1 it is the policy of the State to 12. support the fullest possible participation of firms owned and controlled by minorities (MBEs) and women (WBEs) and to support the fullest possible participation of small disadvantaged businesses owned and controlled by persons with disabilities (Disability Business Enterprises a/k/a DisBE) (collectively, MBEs, WBEs, and DisBEs are referred to herein as ISBEs) in the performance of State procurements and projects. As part of the evaluation process, applicants will be scored and receive points based upon their proposed ISBE utilization rate in accordance with 150-RICR-90-10-1, Regulations Governing Participation by Small Business Enterprises in State Purchases of Goods and Services and Public Works Projects. As a condition of contract award applicants shall agree to meet or exceed their proposed ISBE utilization rate and that the rate shall apply to the total contract price, inclusive of all modifications and amendments. Applicants shall submit their ISBE participation rate on the enclosed form entitled "MBE, WBE and/or DisBE Plan Form", which shall be submitted in a separate, sealed envelope as part of the proposal. ISBE participation credit will only be granted for ISBEs that are duly certified as MBEs or WBEs by the State of Rhode Island, Department of Administration, Office of Diversity, Equity and Opportunity or firms certified as DisBEs by the Governor's Commission on Disabilities. The current directory of firms certified as MBEs or WBEs may be accessed at http://odeo.ri.gov/offices/mbeco/mbe-wbe.php. Information regarding DisBEs may be accessed at www.gcd.ri.gov.

For further information, visit the Office of Diversity, Equity & Opportunity's website, at http://odeo.ri.gov/ and see R.I. Gen. Laws Ch. 37-14.1, R.I. Gen. Laws Ch. 37-2.2, and 150-RICR-90-10-1. The Office of Diversity, Equity & Opportunity may be contacted at, (401) 574-8670 or via email Dorinda.Keene@doa.ri.gov.

13. HIPAA – Under HIPAA, a business associate is a person or entity, other than a member of the workforce of a HIPAA covered entity, who performs functions or activities on behalf of, or provides certain services to, a HIPAA covered entity that involves access by the business associate to HIPAA protected health information. A business associate also is a subcontractor that creates, receives, maintains, or transmits HIPAA protected health information on behalf of another business associate. The HIPAA rules generally require that HIPAA covered entities and business associates enter into contracts with their business associates to ensure that the business associates will appropriately safeguard HIPAA protected health information. Therefore, if a Contractor qualifies as a business associate, it will be required to sign a HIPAA business associate agreement.

SECTION 2. BACKGROUND AND INTENT

Rhode Island is a healthcare leader and continues to strive toward being a good place to grow up

and to grow old. We are committed to building a healthcare system that is responsive to people's needs and promotes choice, community, and quality of life. In May 2018, Governor Gina M. Raimondo announced a multi-phased effort to transform how Rhode Island finances and delivers long-term care and supports to older Rhode Islanders and those with disabilities. The goal is to ensure people have an opportunity to live an inspired life, of their choosing, and to receive the right support, at the right time.

This initiative was informed by earlier work, such as the Reinventing Medicaid report, the Lewin Group Long Term Services and Supports Evaluation of Rebalancing Strategies, and the Aging in Community Final Report. Through the initiative, the Governor directed the Rhode Island Executive Office of Health & Human Services and its partners to talk to Rhode Islanders about their experiences and use these insights to shape investments and improvements in the system. This RFP, funded by Rhode Island's MFP program, is responsive to the Governor's charge and to feedback received from older Rhode Islanders and those with disabilities.

MFP, a federal demonstration grant, began in Rhode Island in 2011. Through it, the State helps elders and people with disabilities who desire to live in the community versus an institution, have that opportunity. Through September 2018, the program has assisted 365 people become reestablished in the community. And, it is helping to strengthen the state's network of community based supports.

Through this RFP, the State will invest in innovative programs and services that promote quality of life and help seniors and those with disabilities to remain living in, or return to, the community. Funded projects will address gaps in available community programs and services in Rhode Island or strengthen, but not duplicate, existing offerings. Examples of needs addressed through funded projects include: social isolation, transportation, food insecurity, and caregiver support among others.

SECTION 3: SCOPE OF WORK AND REQUIREMENTS

A. Grant Award

The sum of all awards will not exceed \$500,000. We expect several bidders and expect to fund a variety of projects that help strengthen available supports for older adults and people with disabilities. At least one project will be funded in each of the focus areas identified in Section 3. C., provided there is an acceptable application that fully meets required criteria. Grants may be awarded for a one-year or two-year period.

Applicants are advised that proposals may not be funded for the full request. Be certain to categorize deliverables so they can stand alone if your application is accepted and is not funded in its entirety. Be sure line item budget details can be distinguishable if reductions occur.

2017-2 Page 7 of 21

Should additional funding become available, EOHHS reserves the option to direct the vendor(s) to conduct additional tasks to support the overall scope of this project.

B. Target Population to be Served

Projects will serve both Medicaid beneficiaries as well as other older adults and people with disabilities who require assistance to remain in the community. Applicants will identify their service area, which may include the state or a region of it, and each applicant will determine eligibility criteria designed to reach the target population.

Target populations include older adults (aged 60 or older) and adults with disabilities (18 or older) who:

- Have communication limitations that interfere with receipt of and response to information
- Require assistance to maintain health and address medical needs
- Function independently with assistive devices
- Require, and may lack, informal support for behavioral health needs, including a need for supervision
- Lack regular access to transportation

C. Funding Priorities

Funding priority will be given to those programs that promote quality of life and enhance or expand access to home and community based services. Programs are expected to encourage choice and continuity, reflect diversity, and be accessible. A project will be evaluated based on the following criteria:

- Has a clearly identified and supported gap or need
- Is not otherwise available through Medicaid or another source
- Serves the target populations
- Has an evaluation plan to determine outcomes and effectiveness
- Is cost effective
- Demonstrates a realistic plan for sustainability

A proposal must respond to one of the following focus areas and identify which focus area is being addressed. Examples are provided for each focus area, but applicants are encouraged to propose innovative projects that address identified and documented needs in the focus areas.

- 1. Transportation
 - Transportation that expands options, complements existing programs, and fosters community engagement but does not supplant existing programs.
 - Transportation safety.

2. Community Supports

- Chore and home maintenance services to provide minor home repair and installation of adaptive devices that promote a safe living environment. May include support for pet care.
- Intergenerational and senior volunteer programs to assist with needs such as yard work, snow removal, and grocery shopping, while providing volunteer opportunities for Rhode Islanders.
- Money management and/or financial planning services for consumers who need assistance managing bill paying and financial matters.
- Peer mentors and health advocates who provide companionship, socialization, support for disease self-management, and/or medical escort services.
- Village type programs and Naturally Occurring Retirement Communities developed by creating and strengthening local entities.

3. Education and Training

- Health promotion activities, including implementation of evidence-based programs, such as those for chronic disease self management, nutrition support, behavioral health intervention, and fall risk management.
- Caregiver services and training, including development of resources for caregivers and implementation of evidence-based programming for caregivers.
- Digital technology training to increase the ability of elders and individuals with disabilities to access current technology as a tool for community engagement, a means for identifying resources, and to access tools to help manage health.

4. Nutrition and Food

- Nutrition education, including evidence-based programs that address nutritional needs.
- Program or service to increase and improve access to healthful food, including fresh produce.

D. Grant Period

Services under an award through this RFP are expected to begin on or about April 1, 2019 and to continue for one calendar year. Applicants may request funding for two years as part of their proposal. If approved, contracts may be renewed for a second year based on availability of funds and provider performance. Applicants are required to develop a plan for sustaining projects after the funding period ends.

E. Eligible Applicants

Public agencies, private not-for-profit organizations, and faith-based organizations with demonstrated experience, knowledge, and/or interest in serving the needs of the targeted population of RI residents.

SECTION 4: TECHNICAL AND COST PROPOSAL REQUIREMENTS

A. Technical Proposal

The narrative proposal must address each of the following elements:

Section 1 Applicant Organization Profile (1 page maximum)

Provide a brief description of your organization and its mission. Include an explanation of your organization's interest in this project and how the proposed project corresponds with the mission of the organization. Describe how the proposed project will fit within the organizational structure and outline the organization's experience and capacity to implement the proposed project. If applicable, describe the facility where the proposed project will operate.

Section 2 Project Description (3 pages maximum)

Describe the proposed project, outlining what you plan to accomplish. Clearly explain how the proposed project meets the Community Enhancement Grants priority to develop programs that enhance or expand access to home and community based services and promote quality of life. Identify the target population to be served, including demographic information. Provide a description of the geographic area covered and explain any significant factors about the area. Explain how you determined the service gap or need for the proposed project and support the determination of need with appropriate data. Provide an outreach plan that demonstrates capacity to reach the target population and outlines activity you will undertake.

Section 3 Outcomes and Evaluation (1 page maximum)

Provide goals and objectives for the proposed project. Objectives should be specific, measurable and achievable. Clearly describe project outcomes and performance measures that will demonstrate project effectiveness. Define project success and describe the evaluation process you will use. Explain how data will be used to track progress. Include information, and a tool, if appropriate, for assessing consumer satisfaction. Outline reporting procedures that you will use to share results of your evaluation with EOHHS.

Section 4 Sustainability (1 page maximum)

Describe the plan for sustaining the proposed project following termination of grant funding, including efforts that will be undertaken to secure permanent funding.

Section 5 Other Information (1 page maximum)

Share other information you feel RI should consider in developing and awarding Community Enhancement Grants Projects and information about your proposed project that is not captured elsewhere in your response.

Section 6 Work Plan

Develop a work plan that identifies specific goals and details project implementation, with anticipated timelines. A sample work plan template is included as Attachment 1. Respondents may use the template or develop their own format that incorporates elements of the attached template.

Use the work plan to clearly describe what you will do and how it will lead to the desired outcomes. Outline how you will implement proposed activities. The plan should include well defined objectives with action steps that will lead to completion of objectives. Provide a detailed timeline of the project and its activities, highlighting key milestones in development, implementation and evaluation.

B. Cost Proposal

Detailed Budget and Budget Narrative:

Using the budget form provided in Attachment 2, provide a detailed budget, including a narrative, which reflects costs associated with the proposed project. Identify which focus area from Section 3. C. that your proposal fits. Explain whether you are requesting funding for one year or two years. If funding is requested for two years, complete a budget for two years. If funds are awarded for two years, an updated budget will be required prior to commencement of the second year of funding. Funds will be awarded as a fixed sum with negotiated payment terms based on the type of proposal.

C. ISBE Proposal

See Appendix A for information and the MBE, WBE, and/or Disability Business Enterprise Participation Plan form(s). Bidders are required to complete, sign and submit these forms with their overall proposal in a sealed envelope. Please complete separate forms for each MBE, WBE and/or Disability Business Enterprise subcontractor/supplier to be utilized on the solicitation.

SECTION 5: EVALUATION AND SELECTION

Proposals will be reviewed by a technical evaluation committee (TEC) comprised of staff from State agencies and consulting subject matter experts. The TEC will conduct an initial administrative review for completeness, responsiveness, and eligibility. Applications that are judged to be complete and responsive will advance to the evaluation process.

A. Technical Proposal Evaluation

Each proposal that meets all basic eligibility requirements as outlined in the RFP will have a full evaluation of its technical proposal. Technical proposals must receive a minimum of 60 out of a maximum of 70 points to advance to the cost evaluation phase. Any technical proposals scoring

2017-2 Page 11 of 21

less than 60 points will not have the accompanying cost or ISBE participation proposals opened and evaluated. The proposal will be dropped from further consideration.

Technical proposals scoring 60 points or higher will have the cost proposals evaluated and assigned up to a maximum of 30 points in the cost category bringing the total potential evaluation score to 100 points. After total possible evaluation points are determined ISBE proposals shall be evaluated and assigned up to six bonus points for ISBE participation.

B. Cost Proposal Evaluation

The maximum number of points awarded for the cost proposal is thirty. Each cost proposal corresponding to a technical proposal achieving a score of at least sixty points will be evaluated. The technical proposal score and cost proposal score are added together for a total maximum score of 100 points. (Additional points may be added for providers meeting ISBE criteria, as described below.) Grants may be awarded to top scoring proposals up to a maximum total of \$500,000.

An acceptable cost proposal meets the criteria outlined below. Cost proposals that do not score at least 25 points will **not** be accepted.

Criteria:

- Budget aligns with the project description and is supported by the budget narrative.
- Budget is clearly presented, is credible, and reflects appropriate expenditures.
- The project and budget are cost effective

Scoring:

Exceeds criteria 28-30 points
Meets criteria 25-27 points
Does not fully meet criteria 0-24 points

C. ISBE Participation Evaluation

Calculation of ISBE participation rate

- 1. ISBE participation rate for Non-ISBE applicants. The ISBE participation rate for non-ISBE applicants shall be expressed as a percentage and shall be calculated by dividing the amount of a non-ISBE applicant's total contract price that will be subcontracted to ISBEs by the non-ISBE applicant's total contract price. For example, if the non-ISBE's total contract price is \$100,000.00 and it subcontracts a total of \$12,000.00 to ISBEs, the non-ISBE's ISBE participation rate would be 12%.
- 2. ISBE participation rate for ISBE applicants. The ISBE participation rate for ISBE applicants shall be expressed as a percentage and shall be calculated by dividing the amount of the ISBE applicant's total contract price that will be subcontracted to ISBEs and the amount that will be self-performed by the ISBE applicant by the ISBE applicant's total contract price. For example, if the ISBE applicant's total contract price is

\$100,000.00 and it subcontracts a total of \$12,000.00 to ISBEs and will perform a total of \$8,000.00 of the work itself, the ISBE vendor's ISBE participation rate would be 20%.

Assignment of points for ISBE participation

The applicant with the highest ISBE participation rate receives the maximum ISBE participation points of six. All other applicants are assigned points by applying the following formula:

(Applicant's ISBE participation rate/Highest ISBE participation rate) X Maximum ISBE participation points of six

For example, assuming the weight given by the RFP to ISBE participation is 6 points, if Applicant A has the highest ISBE participation rate at 20% and Applicant B's ISBE participation rate is 12%, Applicant A will receive the maximum 6 points and Applicant B will receive (12%/20%) X 6 which equals 3.6 points.

D. ScoringProposals shall be reviewed and scored with maximum points outlined below.

Criteria	Points
Applicant Profile	5 Points
Project Description	20 Points
Outcomes and Evaluation	10 Points
Sustainability	10 Points
Work Plan	25 Points
Total Possible Technical Points	70 Points
Cost proposal	30 Points
Total Possible Evaluation Points	100 Points
ISBE Participation	6 Points
Total Possible Points	106 Points

E. General Evaluation

EOHHS reserves the right to send qualifying questions and to receive responses to those questions from bidders, request interviews and presentations from bidders, contact references, and/or use other appropriate mean to evaluate submitted proposals and a bidder's qualifications.

Proposals found to be technically or substantially non-responsive at any point in the evaluation process will be rejected and not considered further.

The TEC will provide a written recommendation, including the results of all evaluations, to the Rhode Island Department of Administration, Division of Purchases who will make the final selection for this RFP.

The state reserves the right to accept or reject any or all options, bids, or proposals and to act in its own best interest. The state also reserves the right to cancel the solicitation in its entirety in its sole discretion.

If an applicant is selected for an award, no work is to commence until a purchase order is issued by the Division of Purchases.

The State's General Conditions of Purchase contain the specific contract terms, stipulations and affirmations to be utilized for the contract awarded for this RFP. The State's General Conditions of Purchases are found at the following URL:

https://www.purchasing.ri.gov/RIVIP/publicdocuments/ATTA.pdf.

SECTION 6. QUESTIONS

Questions concerning this solicitation must be e-mailed to Linnea Tuttle, Chief, Health Systems Development, EOHHS at Linnea.Tuttle@ohhs.ri.gov no later than January 15, 2019 at 4:00 p.m., eastern time. No other contact with state parties is permitted. Please reference RFP number MFP-2018-1 on all correspondence. Questions must be submitted via email in a Microsoft Word attachment in a narrative format with no tables. Answers to questions received shall be posted on the Internet as an addendum to this solicitation. No questions will receive individual responses. It is the responsibility of all interested parties to monitor the solicitation for any procurement related postings. If technical assistance is required, call the Help Desk at (401) 574-8100.

SECTION 7. PROPOSAL CONTENTS

- A. Proposals must include the following:
 - 1. An original plus six hard copies. In addition, submissions must include a complete proposal in electronic format (flash drive). The electronic version must be identical to the original hard copy submission. The technical proposal, cost proposal, ISBE documentation, RIVIP Bidder Certification Cover Form, and Rhode Island W-9 must each be saved in separate folders that are clearly labelled to indicate the contents. In any variance between the hard copy and the electronic file, the original hard copy takes precedence.
 - 2. One completed and signed RIVIP Bidder Certification Cover Form (included in the original copy only) downloaded from the Division of Purchases website at www.purchasing.ri.gov. Do not include any copies in the Technical or Cost proposals.

- 3. One completed and signed Rhode Island W-9 (included in the original copy only) downloaded from the Division of Purchases website at http://www.purchasing.ri.gov/rivip/publicdocuments/fw9.pdf. Do not include any copies in the Technical or Cost proposals.
- 4. One completed, signed, and sealed Appendix A. MBE, WBE, and/or Disability Business Enterprise Participation Plan. Please complete <u>separate forms</u> for each MBE/WBE or Disability Business Enterprise subcontractor/supplier to be utilized on the solicitation. Do not include any copies in the Technical or Cost proposals.
- 5. The Technical Proposal, including the work plan, as described in Section 4. The technical proposal is limited to seven (7) pages, excluding the work plan.
- 6. The Cost Proposal, as described in Section 4. For the original and each hard copy, the cost proposal must be in a separate, signed, sealed envelope.
- B. All proposals must conform to the following writing and formatting guidelines.
 - Be written in English
 - Be single-spaced
 - Have one inch margins on all sides
 - Be prepared with black ink on white 8.5" x 11" paper
 - Use 12 point Times New Roman font
 - Have sequential page numbers on each page
 - Have the applicant's name on each page
 - Have clearly labelled attachments
 - Not have staples or permanent binding (binder clips or elastic bands are acceptable)

SECTION 8. PROPOSAL SUBMISSION

Applicants must submit proposals responsive to this RFP on or before January 24, 2019, 3:00 p.m., eastern time. Responses received after this date and time, as registered by the official time clock in the reception area of EOHHS, shall not be accepted.

Proposals must be hand-delivered or mailed in a sealed envelope marked MFP-2018-1 to:

RI EOHHS

Virks Building

3 West Road

Cranston, RI 02920

Attention: Linnea Tuttle, Chief, Health Systems Development

Proposals received after the above-referenced due date and time will not be accepted. Proposals misdirected to other State locations or those not presented to EOHHS by the scheduled due date and time shall be determined to be late and shall not be accepted. Proposals faxed, or emailed, to EOHHS shall not be accepted. The official time clock is in the reception area of EOHHS, Virks Building.

APPENDIX A. PROPOSER ISBE RESPONSIBILITIES AND MBE, WBE, AND/OR DISABILITY BUSINESS ENTERPRISE PARTICIPATION FORM

A. Proposer's ISBE Responsibilities (from 150-RICR-90-10-1.7.E)

- 1. Proposal of ISBE Participation Rate. Unless otherwise indicated in the RFP, a Proposer must submit its proposed ISBE Participation Rate in a sealed envelope or via sealed electronic submission at the time it submits its proposed total contract price. The Proposer shall be responsible for completing and submitting all standard forms adopted pursuant to 105-RICR-90-10-1.9 and submitting all substantiating documentation as reasonably requested by either the Using Agency's MBE/WBE Coordinator, Division, ODEO, or Governor's Commission on Disabilities including but not limited to the names and contact information of all proposed subcontractors and the dollar amounts that correspond with each proposed subcontract.
- 2. Failure to Submit ISBE Participation Rate. Any Proposer that fails to submit a proposed ISBE Participation Rate or any requested substantiating documentation in a timely manner shall receive zero (0) ISBE participation points.
- 3. Execution of Proposed ISBE Participation Rate. Proposers shall be evaluated and scored based on the amounts and rates submitted in their proposals. If awarded the contract, Proposers shall be required to achieve their proposed ISBE Participation Rates. During the life of the contract, the Proposer shall be responsible for submitting all substantiating documentation as reasonably requested by the Using Agency's MBE/WBE Coordinator, Division, ODEO, or Governor's Commission on Disabilities including but not limited to copies of purchase orders, subcontracts, and cancelled checks.
- 4. Change Orders. If during the life of the contract, a change order is issued by the Division, the Proposer shall notify the ODEO of the change as soon as reasonably possible. Proposers are required to achieve their proposed ISBE Participation Rates on any change order amounts.
- 5. Notice of Change to Proposed ISBE Participation Rate. If during the life of the contract, the Proposer becomes aware that it will be unable to achieve its proposed ISBE Participation Rate, it must notify the Division and ODEO as soon as reasonably possible. The Division, in consultation with ODEO and Governor's Commission on Disabilities, and the Proposer may agree to a modified ISBE Participation Rate provided that the change in circumstances was beyond the control of the Proposer or the direct result of an unanticipated reduction in the overall total project cost.

B. MBE, WBE, AND/OR Disability Business Enterprise Participation Plan Form:

Attached is the MBE, WBE, and/or Disability Business Enterprise Participation Plan form. Bidders are required to complete, sign and submit with their overall proposal in a sealed envelope. Please complete separate forms for each MBE, WBE and/or Disability Business Enterprise subcontractor/supplier to be utilized on the solicitation.



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS DEPARTMENT OF ADMINISTRATION ONE CAPITOL HILL PROVIDENCE, RHODE ISLAND 02908

MBE, WBE, and/or DISA	BILITY B	USINES	S ENTERPRISI	E PARTICIPAT	ION PLAN	
Bidder's Name:						
Bidder's Address:						
Point of Contact:						
Telephone:						
Email:						
Solicitation No.:						
Project Name:						
Enterprise subcontractors and supplie submitted to the prime contractor/ver Office of Diversity, Equity and Oppoby the Governor's Commission on subcontractors must self-perform 100 credit. Vendors may count 60% of dealer/supplier, and 100% of such expin its entirety and submitted at time Enterprise subcontractor/supplier of	ndor. Pleas rtunity MB Disabilities % of the wo expenditures of bid. Ple	se note the E Complise at time ork or subsections of the E Complished for metal the E Complete Complete the E Complete Complete E Complete Complete E Comp	at all MBE/WBE iance Office and of bid, and the econtract to anoth aterials and suppom an MBE certiplete separate for	E subcontractors/s all Disability Bus at MBE/WBE ar er RI certified Mi blies obtained fro fied as a manufac	suppliers must be certifications be siness Enterprises must be and Disability Business EBE in order to receive particular an MBE certified as a staturer. This form must be contained the contained as a staturer.	ed by the certified interprise ticipation a regular completed
Name of Subcontractor/Supplier:						
Type of RI Certification:	□ MBE	□ WB	E 🗆 Disabilit	y Business Enterj	prise	
Address:						
Point of Contact:						
Telephone:						
Email:						
Detailed Description of Work To Be Performed by Subcontractor or Materials to be Supplied by Supplier:						
Total Contract Value (\$):			Subcontract Value (\$):		ISBE Participation Rate (%):	
Anticipated Date of Performance:						

Prime Contractor/Vendor Signature	Title	Date	
Subcontractor/Supplier Signature	Title	Date	

M/W/Disability Business Enterprise Utilization Plan - RFPs - Rev. 5/24/2017

Community Enhancement Grant Work Plan

Provide specific, measurable project objectives that clearly state the outcomes you intend to achieve. Objectives should be realistic and achievable within the grant period.

For each objective, include the detailed action steps required to achieve the objective. Include a timeframe for each action step, showing progress of work and anticipated completion.

Proposed Project:

Objective 1:				
	Quarter 1	Quarter 2	Quarter 3	Quarter 4
Action Steps				
1)				
2)				
3)				
Objective 2:				
	Quarter 1	Quarter 2	Quarter 3	Quarter 4
Action Steps				
1)				
2)				
3)				
Objective 3:				
	Quarter 1	Quarter 2	Quarter 3	Quarter 4
Action Steps				
1)				
2)				
3)				

Community Enhancement Grants Project Budget

Fully complete the budget form and attach a detailed budget narrative, of no more than two pages, that documents all costs associated with each line item on the budget.

Proposed Project:

Budget	Provided/ In Kind	Budget Request Year 1	Budget Request Year 2 (if requested)	Total Request
Personnel				
Salaries				
Fringe				
Travel				
Equipment				
Supplies and Printing				
Overhead/Administrative				
Other (describe)				
TOTAL				



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

DEPARTMENT OF ADMINISTRATION

Office: (401) 222-2280

Fax: (401) 222-6436

Michael DiBiase, Director

One Capitol Hill Providence, RI 02908

September 17, 2018

Patrick M. Tigue Medicaid Program Director Executive Office of Health and Human Services 3 West Road, Virks Building Cranston, RI 02920

Re:

Delegated Purchasing Authority

Administering Grant Awards to Community Enhancement Projects

Dear Director Tigue:

I am writing in response to your July 30, 2018 letter requesting delegated procurement authority relative to the Executive Office of Health and Human Services to administer grant awards to community enhancement projects. Pursuant to R. I. Gen. Laws § 37-2-54 (a) and Procurement Regulation 2.2.3, it is hereby determined to be in the best interest of the State of Rhode Island to delegate limited procurement authority to the Director of the Medicaid Program for the purpose of supporting programs that enhance or expand access to home and community-based services.

This limited delegated authority shall be administered by the Director of the Medicaid Program. The Executive Office of Health and Human Services will utilize a public competitive solicitation process (Request for Proposals) to solicit applications from interested service providers. The limited delegated procurement authority shall extend through September 30, 2020, but may be renewed upon request.

Thank you for your attention to this correspondence.

Sincerely,

Michael DiBiase

Director/Chief Purchasing Officer

cc:

Secretary Eric Beane

Nancy R. McIntyre Peter Keenan

Michael D. Mitchell, Esq.

Page 1 of 1

REQUISITION



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS ONE CAPITOL HILL **PROVIDENCE RI 02908**

Date:

26-NOV-18

Requisition No.

Required Date:

27-NOV-18

1588535

Description: RFP- EOHHS, under Delegated Authority, is soliciting proposals from qualified providers to deliver projects that help older Rhode Islanders with disabilities.

S H I P T O	02800-006 Executive Office Of Health And Human Services EOHHS-EXECUTIVE OFFICE OF HEALTH AND HUMAN SERVICES 3 WEST ROAD CRANSTON RI 02920		PO to be Changed Document to Create Purchase Agreement Source Document Not Defined Agency Use Field		- X > O - C E	06800-021 Executive Office Of Health And Human Services DOA CONTROLLER ONE CAPITOL HILL, 4TH FLOOR PROVIDENCE RI 02908
----------------------------	---	--	--	--	---------------	--

	Requesting	Department	Contact Person	Contact Person			Prior P.O.
Execut		Health And Human vices	Costa, Susan M 401-462-66	45	DELEGATED AUTHORITY		
Line	Code	Clas	ss-Item and Description	Quantity	Unit	Unit Price	Total
1	952.59	from qualified provide Islanders with disabilit	ext format Delegated Authority, is soliciting proposals to deliver projects that help older Rhode ies. unt: 19.10.028.2018133.02.653110.00000 ins: 1	1	Each	0.00	0.00
					Total:		0.00