

IOWA DEPARTMENT OF PUBLIC HEALTH

DIVISION OF BEHAVIORAL HEALTH

REQUEST FOR PROPOSAL 58813002

HIV Core Medical and Support Services

RFP Table of Contents

SECTION 1 -- GENERAL AND ADMINISTRATIVE ISSUES

- 1.01 Purpose
- 1.02 Project Period/Contract Term
- 1.03 Eligibility Requirements
- 1.04 Service Delivery Area
- 1.05 Available Funds
- 1.06 Schedule of Events
- 1.07 Inquiries
- 1.08 Amendments to the RFP
- 1.09 Open competition
- 1.10 Withdrawal or Resubmission of Proposals
- 1.11 Acceptance of Terms and Conditions
- 1.12 Costs of Proposal Preparation
- 1.13 Multiple Proposals
- 1.14 Oral Presentation
- 1.15 Rejection of Proposals/Cancellation of RFP
- 1.16 Restrictions on Gifts and Activities
- 1.17 Use of Subcontractors
- 1.18 Reference Checks
- 1.19 Criminal Background Checks
- 1.20 Information From Other Sources
- 1.21 Verification of Proposal Contents
- 1.22 Bid Proposal Clarification Process
- 1.23 Waivers and Variances
- 1.24 Disposition of Proposals
- 1.25 Public Records
- 1.26 Copyrights
- 1.27 Appeal of Award Decision
- 1.28 Definition of Contract
- 1.29 Construction of RFP

SECTION 2 – DESCRIPTION OF SERVICES

- 2.01 Description of Work and Services
- 2.02 Objectives
- 2.03 Staffing or Personnel Requirements
- 2.04 Budget
- 2.05 Required Reporting

SECTION 3 -- PROPOSAL FORMAT AND CONTENT

- 3.01 Technical Requirements
- 3.02 Proposal Contents
- 3.03 Budget
- 3.04 Business Organization
- 3.05 Litigation or Investigation
- 3.06 Proposal Checklist

SECTION 4 – PROPOSAL REVIEW PROCESS AND CRITERIA

- 4.01 Overview of Review Process
- 4.02 Scoring of Proposals

SECTION 5 – CONTRACT

- 5.01 Conditions
- 5.02 Incorporation of Documents
- 5.03 Order of Priority
- 5.04 Contractual Payments

SECTION 6 – APPENDICES

Appendices are posted in a separate file on the IDPH Web page under *Funding Opportunities*: www.idph.state.ia.us.

SECTION 7 – ATTACHMENTS

Attachments are posted in a separate file on the IDPH Web page under *Funding Opportunities*: www.idph.state.ia.us.

SECTION 1 -- GENERAL AND ADMINISTRATIVE ISSUES

1.01 Purpose

The purpose of this Request for Proposal (RFP) 58813002 is to solicit proposals that will enable the Iowa Department of Public Health (IDPH) to select the most qualified applicant to provide care and support services to HIV-infected Iowans through the Ryan White Part B Program.

The mission of the Iowa Ryan White Part B Program is to meet the health care needs of persons living with HIV disease by funding primary health care and support services to get people into primary medical care and help them stay in care. This includes providing direct access to life-saving medications through the AIDS Drug Assistance Program (ADAP). The intention of the programs is to reduce the use of more costly inpatient and urgent care, increase access to care for underserved populations, improve quality of life for those affected by the epidemic, and decrease transmission of HIV from infected people. HIV care-related services such as medical and non-medical case management, oral health care, medical nutrition therapy, mental health services and substance abuse outpatient care may be supported with these funds.

Client Services

Agencies awarded funding will offer case management, transportation to and from medical appointments, assistance with medical and dental bills, payment of health insurance premiums, referrals to substance abuse and mental health treatment, and other supportive services, as appropriate.

Case managers assist low-income clients with managing their medical care and addressing barriers to medical care and treatment adherence. This includes working with them to make and keep appointments, manage other aspects of their lives, and achieve a very high level of adherence to their medications. Adherence is essential to help avoid developing resistance to medications and to optimize health outcomes. Case managers also help clients access other benefit programs for which they may be eligible, including the AIDS Drug Assistance Program.

Medical HIV Case Management

Medical case managers help individuals living with HIV access primary medical care and life-saving medications, identify and remove barriers to medical care, and ensure adherence to a prescribed treatment plan.

Medical HIV case management is a range of client-centered services that ensure timely and coordinated access to primary medical care, medications, and other support services. Primary activities link a person to primary medical care or services and focus on improving treatment adherence. Secondary activities may be needed for HIV-positive individuals to achieve their medical outcomes and must have a direct relationship to an individual's HIV clinical outcomes.

The objectives of medical case management are to:

- Assess the client's needs;
- Assist the client with accessing ancillary services and benefit programs;
- Help the client maintain ongoing medical care and treatment;
- Develop and implement a care plan that includes regular medical care;
- Empower clients to remain as independent as possible;
- Improve service delivery and client health outcomes;
- Ensure that self-sufficient clients are appropriately discharged;
- Control costs while ensuring that client needs are properly addressed;
- Coordinate services across funding streams;
- Reduce service duplication across providers;
- Use available funds and services in the most efficient and effective manner.

Non-medical Case Management and Supportive Services

The goal of non-medical case management services is to enhance access to and retention in medical care for eligible people living with HIV through a range of client-centered services. This is a human-service approach that supports engagement and retention in medical care. This approach emphasizes community linkages to bio-psychosocial supports for reducing real or perceived barriers to medical care.

Non-medical case management includes the provision of advice and assistance in obtaining medical, social, community, legal, housing, transportation, food assistance, emergency financial assistance, and other needed services. Non-medical case management does not include coordination and follow-up of medical treatments.

The objectives of non-medical case management are to:

- Decrease barriers to medical and support services;
- Increase the client's awareness of treatment options;
- Build/strengthen relationships between the client and case manager;
- Foster client self-sufficiency through advocacy and access to ancillary services and other benefit programs.

Benefit Coordination

Getting and keeping affordable health insurance can be difficult for many PLWHAs. They may face barriers to finding information about programs for which they may qualify, or they may have difficulty completing applications or navigating the healthcare system. Low-income PLWHAs may qualify for a number of benefit programs that include drug coverage, including Medicaid, Medicare, Veterans Affairs programs, Consolidated Omnibus Budget Reconciliation Act (COBRA) policies, or private insurance. Gaps in coverage may result in becoming ineligible for private insurance because of pre-existing condition exclusions on many policies.

Other benefit programs and services for which a PLWHA may qualify include SSI, SSDI, Housing Opportunities for Persons with AIDS (HOPWA), and the Health Insurance Premium Payment (HIPP) Program.

In addition to providing benefit coordination, in some instances funding may be used to provide wrap-around services, including paying premiums, deductibles, and copays not fully covered by these other payers.

The objectives of Benefits Coordination are to:

- Provide the best match between client needs and benefit programs;
- Ensure access to and continuity of benefits through client advocacy with benefit providers;
- Help the client navigate complex benefit programs or applications to programs;
- Ensure the payer of last resort by providing guidance to clients on choosing the best benefit options;
- Provide wrap-around services, when applicable.

1.02 Project Period/Contract Term

The project period shall be from April 1, 2013, to March 31, 2017.

IDPH expects the initial contract period to be a one-year term from April 1, 2013, to March 31, 2014. IDPH shall have the option to renew the contract for up to three (3) additional one (1) year terms subject to review of the continuation application, contractor performance and compliance with the terms and conditions of the contract, and availability of funds.

The issuance of this RFP in no way constitutes a commitment by IDPH to award a contract.

1.03 Eligibility Requirements

Applicants must meet each of the following eligibility requirements for consideration.

Eligible Applicants

Private, not-for-profit organizations and public or governmental agencies are eligible to submit proposals in accordance with this RFP.

A for-profit entity is eligible to apply for these funds only if a not-for-profit organization is unable or unwilling to provide quality HIV-related service(s) to persons in a geographic region of the state. Not-for-profit contractors are prohibited from serving as a conduit of these funds to a for-profit entity unless the above is true and verified.

Applicants must demonstrate that they will serve clients who are eligible for Ryan White-funded services. Eligible clients must have a documented HIV diagnosis, and they must document that their primary residence is in Iowa. It is not necessary to be a U.S. citizen to receive services. If

applicants propose additional eligibility requirements for their clients, those requirements must be described in their proposals.

Applicants must demonstrate experience and proficiency in serving people living with HIV or AIDS. They must also demonstrate the ability to commence services on April 1, 2013.

No expenditures will be incurred with Ryan White funds for any item or service that may reasonably be expected to be paid for by other state, federal, or private benefit programs. **The Ryan White Part B Program must be the payer of last resort**, and appropriate documentation must be included in the client file that supports this requirement (i.e., documentation of all referrals and follow up shows that attempts have been made to utilize other payers first).

Certain types of expenses cannot be supported with the funds in this RFP. In no case may Ryan White funds be used to pay for off-premise social or recreational activities (e.g., movies, vacations, parties, or social retreats). These funds may NOT be used for clinical trials; clothing; employment services; funerals; household appliances; needle exchange; pet foods or products; local or State taxes; direct maintenance expense (tires, repairs, etc.) of a privately owned vehicle or any other costs associated with a vehicle; or installation of permanent systems of filtration of all water entering a private residence.

In no case may the funds in this RFP be used to make direct payments to a client, whether in the form of cash or checks. If direct provision of a service is not possible or effective, vouchers or similar programs, which may only be exchanged for a specific service or commodity, must be used to meet the clients' needs.

IDPH will supply successful applicants with detailed guidance regarding client eligibility requirements. Contractors must agree to abide by this guidance as a condition for initial and ongoing funding.

Electronic Communication Requirements

Applicant is required to maintain and provide to IDPH, upon application, a current and valid email account for electronic communications with IDPH.

1.04 Service Delivery Area

The service delivery area is the State of Iowa. Within the State, the service area may be defined by the agency.

Applicants must complete all components in **Attachment C**, including which counties their project will *regularly* serve, in which locations onsite services will be provided, and what populations will be served.

1.05 Available Funds

The source of funding is United States Department of Health and Human Services, Health Resources and Services Administration (HRSA). The enabling legislation is under Part B of

Title XXVI of the Public Health Service (PHS) Act, as amended by the Ryan White HIV/AIDS Treatment Extension Act of 2009 (Public Law 111-87), which specifies many of the eligibility criteria, fundable services, and data requirements described in this Request for Proposal document. The legislation can be obtained at http://frwebgate.access.gpo.gov/cgi-bin/getdoc.cgi?dbname=111_cong_public_laws&docid=f:publ087.111.pdf.

Applicants may apply for available funding for their service area by adding the maximum funds per county in the table below for a one-year contract period. Actual total awards and individual contract funding levels may vary from that listed or funding may be withdrawn completely, depending on availability of funding.

COUNTY	2013 Funds	COUNTY	2013 Funds	COUNTY	2013 Funds
ADAIR	\$3,000	FLOYD	\$3,000	MONONA	\$3,000
ADAMS	\$3,000	FRANKLIN	\$3,000	MONROE	\$3,000
ALLAMAKEE	\$4,632	FREMONT	\$3,000	MONTGOMERY	\$4,632
APPANOOSE	\$3,000	GREENE	\$3,000	MUSCATINE	\$8,548
AUDUBON	\$3,000	GRUNDY	\$3,000	O'BRIEN	\$3,000
BENTON	\$3,000	GUTHRIE	\$3,000	OSCEOLA	\$3,000
BLACK HAWK	\$32,044	HAMILTON	\$6,263	PAGE	\$5,284
BOONE	\$4,569	HANCOCK	\$3,000	PALO ALTO	\$3,000
BREMER	\$4,958	HARDIN	\$5,284	PLYMOUTH	\$4,305
BUCHANAN	\$4,958	HARRISON	\$4,305	POCAHONTAS	\$3,000
BUENA VISTA	\$6,916	HENRY	\$6,916	POLK	\$187,707
BUTLER	\$4,305	HOWARD	\$3,000	POTTAWATTAMIE	\$30,086
CALHOUN	\$3,000	HUMBOLDT	\$3,000	POWESHEIK	\$5,284
CARROLL	\$4,305	IDA	\$3,000	RINGGOLD	\$3,000
CASS	\$4,305	IOWA	\$4,632	SAC	\$3,000
CEDAR	\$3,000	JACKSON	\$5,937	SCOTT	\$67,288
CERRO GORDO	\$9,853	JASPER	\$6,916	SHELBY	\$4,305
CHEROKEE	\$3,000	JEFFERSON	\$5,937	SIOUX	\$4,958
CHICKASAW	\$4,958	JOHNSON	\$49,666	STORY	\$15,074
CLARKE	\$4,632	JONES	\$5,284	TAMA	\$3,000
CLAY	\$4,958	KEOKUK	\$4,958	TAYLOR	\$3,000
CLAYTON	\$4,958	KOSSUTH	\$3,000	UNION	\$3,000
CLINTON	\$11,158	LEE	\$6,590	VAN BUREN	\$3,000
CRAWFORD	\$3,000	LINN	\$46,403	WAPELLO	\$9,853
DALLAS	\$10,832	LOUISA	\$4,632	WARREN	\$6,263
DAVIS	\$3,000	LUCAS	\$3,000	WASHINGTON	\$5,937
DECATUR	\$3,000	LYON	\$3,000	WAYNE	\$3,000
DELAWARE	\$3,000	MADISON	\$5,284	WEBSTER	\$5,611
DES MOINES	\$11,158	MAHASKA	\$4,958	WINNEBAGO	\$3,000
DICKINSON	\$4,632	MARION	\$6,916	WINNESHIEK	\$3,000
DUBUQUE	\$16,053	MARSHALL	\$11,485	WOODBURY	\$26,823
EMMET	\$3,000	MILLS	\$4,632	WORTH	\$3,000
FAYETTE	\$4,958	MITCHELL	\$3,000	WRIGHT	\$3,000

The county funding allocation above is meant only to be a guideline for overall budget development. It is the goal of the IDPH to create a client-centered system of regional service delivery (RSD). Though successful applicants will generally provide services for a specific region, **they must be able to provide services to any eligible resident of Iowa**. Successful applicants will not be required to demonstrate that they have served clients from every county for which they received funding, nor will they be required to demonstrate that the value of the delivered services matches the above allocations on a county-by-county basis.

After initial award, the IDPH reserves the right to amend contracts or reallocate funds to reflect changes in the distribution of clients among counties or service providers

1.06 Schedule of Events (All times and dates listed are local Iowa time.)

The following dates are set forth for informational purposes. IDPH reserves the right to change them.

EVENT	DATE
RFP Issued	September 20, 2012
Written Questions and Responses	
Round 1 Questions Due	September 28, 2012
Interim Responses Posted By:	October 5, 2012
Round 2 Questions Due	October 12, 2012
Interim Responses Posted By:	October 19, 2012
Final Questions Due	October 26, 2012
Final Cumulative Responses Posted By:	November 9, 2012
Letters of Intent	October 5, 2012
Proposals Due	November 19, 2012
Post Notice of Intent to Award	January 4, 2013

A. RFP Issued – September 20, 2012. IDPH will post the RFP on the IDPH Web page under the *Funding Opportunities* quick link at: www.idph.state.ia.us. IDPH will send a copy of the RFP to any person or entity which requests the RFP.

B. Written Questions and Responses. Written questions related to the RFP must be submitted via email to John McMullen at John.McMullen@idph.iowa.gov no later than **the dates specified in the table above.**

Questions must be submitted by electronic mail. If the question or comment pertains to a specific section of the RFP, the section and page must be referenced. Oral questions will not be accepted.

IDPH will prepare written responses to all pertinent and properly submitted questions and post the written questions and responses on the IDPH Web page. IDPH’s written responses will be considered part of the RFP. Written responses will be prepared and posted according the schedule of events table above.

It is the responsibility of the applicant to check the IDPH Web site periodically for written questions and responses to this RFP.

C. Letters of Intent Due – October 5, 2012. An applicant must submit a letter of intent via email to John McMullen at John.McMullen@idph.iowa.gov by 4:30 pm on October 5, 2012.

The letter of intent must include the applicant's name, mailing address, electronic mail address, fax number, telephone number and a statement of intent to apply for this RFP.

Failure to submit a letter of intent to IDPH by the deadline specified and in the manner specified will result in the rejection of the applicant's proposal. A letter of intent emailed to John McMullen after the stated due date and time will be rejected and not reviewed by IDPH. IDPH will notify the applicant of the rejection.

D. Proposals Due – November 19, 2012

Proposals must be **received** by 4:00 p.m. (local Iowa time) on November 19, 2012, by the IDPH SharePoint Service Contract Center in compliance with the following requirements:

- Email proposal documents as a single zipped file **OR** a single PDF, no larger than 20MB, to [**applications@idph.iowa.gov**](mailto:applications@idph.iowa.gov). The preferred submission is a single zipped file.
- The subject line of the email must read "RFP 58813002". Do not include anything else in the subject line of the email.
- The single zipped file or single PDF must be named "RFP 58813002 (insert your agency name)".
- Do not include additional information or text in the body of the email as it will not be available to IDPH staff.

Proposals submitted to IDPH in any manner other than through the IDPH SharePoint Service Contract Center (e.g. electronic mail to any other address, faxed, hand-delivered, mailed or shipped or courier-service delivered versions) will be rejected and not reviewed by IDPH. Any information submitted separately from the proposal will not be considered in the review process.

Proposals will be rejected and not reviewed by IDPH for the following reasons:

- **If the proposal is received by the IDPH SharePoint Service Contract Center after the stated due date and time.**
- **If the proposal is submitted in any manner other than by email to applications@idph.iowa.gov.**
- **If the proposal is not submitted as a single zipped file or a single PDF file.**

IDPH will notify the applicant of the rejection.

The due date and time requirements for receipt of the proposal are mandatory requirements and will not be subject to waiver as a minor deficiency. The date and time of submission of a proposal is automatically documented upon receipt by the IDPH SharePoint Service Contract Center. Applicants have the sole responsibility to ensure

their emailed proposal is received by the IDPH SharePoint Service Contract Center prior to the deadline.

An electronic notification of receipt of the applicant's email will be generated automatically. If the electronic notification is not received within ten (10) minutes of the applicant's email, please contact the SharePoint Helpdesk at 1-866-520-8987 to confirm delivery (available prior to 4 PM on Weekdays, excluding State Holidays).

If an applicant emails the proposal multiple times, only the last submission received by IDPH SharePoint Service Contract Center prior to the stated due date and time will be accepted for review.

E. Release of Names of Applicants – November 26, 2012. The names of all applicants who submitted proposals by the deadline shall be released to all who have requested such notification via an email request to John McMullen at John.McMullen@idph.iowa.gov.

F. Notice of Intent to Award – January 4, 2013. A Notice of Intent to Award the contract(s) will be posted on the IDPH Web page www.idph.state.ia.us under *Funding Opportunities* link by 4:30 pm. Applicants are solely responsible for reviewing the Notice of Intent to Award to determine their award status.

G. Contract Negotiations and Execution of the Contract – Following the posting of the Notice of Intent to Award, the successful applicant(s) will retrieve a contract document through the IDPH SharePoint Service Contract system. The successful applicant has ten (10) working days from date of receipt in which to negotiate and sign a contract with IDPH. If a contract has not been executed within ten (10) working days, IDPH reserves the right to cancel the award and to begin negotiations with the next highest ranked applicant or other entity deemed appropriate by IDPH. IDPH may, at its sole discretion, extend the time period for negotiations of the contract.

1.07 Inquiries

During the period following release of this RFP and until the Notice of Intent to Award is posted, applicants should contact only John McMullen in the manner provided for in section 1.06(C). Unauthorized contact regarding this RFP with other state employees may result in disqualification. In no case shall verbal communications override written communications. Only written communications are binding on IDPH.

IDPH assumes no responsibility for representations made by its officers or employees prior to the execution of a legal contract, unless such representations are specifically incorporated into the RFP or the contract.

Any verbal information provided by the applicant shall not be considered part of its proposal.

1.08 Amendments to the RFP

IDPH reserves the right to amend the RFP at any time. In the event IDPH decides to amend, add to, or delete any part of this RFP, a written amendment will be posted on the IDPH Web site. The applicant is advised to check the IDPH Web site periodically for amendments to this

RFP.

1.09 Open Competition

No attempt shall be made by the applicant to induce any other person or firm to submit or not to submit a proposal for the purpose of restricting competition.

1.10 Withdrawal or Resubmission of Proposals

Proposals may be withdrawn, modified and resubmitted by an applicant at any time prior to the stated due date and time for the receipt of proposals. If an applicant emails the proposal multiple times, only the last submission received by IDPH SharePoint Service Contract Center prior to the stated due date and time will be accepted for review. **An applicant desiring to withdraw its proposal after submission shall submit notification via email to John McMullen at John.McMullen@idph.iowa.gov.**

1.11 Acceptance of Terms and Conditions

A. An applicant's submission of a proposal constitutes acceptance of the terms, conditions, criteria and requirements set forth in the RFP and operates as a waiver of any and all objections to the contents of the RFP. By submitting a proposal, an applicant agrees that it will not bring any claim or have any cause of action against IDPH or the State of Iowa based on the terms or conditions of the RFP or the procurement process.

B. IDPH reserves the right to accept or reject any exception taken by an applicant to the terms and conditions of this RFP. Should the successful applicant take exception to the terms and conditions required by IDPH, the successful applicant's exceptions may be rejected and IDPH may elect to terminate negotiations with that applicant. However, IDPH may elect to negotiate with the successful applicant regarding contract terms which do not materially alter the substantive requirements of the RFP or the contents of the applicant's proposal.

1.12 Costs of Proposal Preparation

All costs of preparing the proposal are the sole responsibility of the applicant. IDPH is not responsible for any costs incurred by the applicant which are related to the preparation or submission of the proposal or any other activities undertaken by the applicant related in any way to this RFP.

1.13 Multiple Proposals

Only one proposal will be accepted from each applicant.

1.14 Oral Presentation

Applicants may be requested to make an oral presentation of the proposal. The determination of need for presentations, the location, order, and schedule of the presentations is at the sole discretion of IDPH. If an oral presentation is required, applicants may clarify or elaborate on their proposals, but may in no way change their original proposal.

1.15 Rejection of Proposals/Cancellation of the RFP

A. IDPH reserves the right to reject, in whole or in part, any or all proposals, to advertise for new proposals, to arrange to receive or itself perform the services herein, to abandon the need for such services, and to cancel this RFP if it is in the best interests of IDPH.

B. Any proposal will be rejected outright and not evaluated for any of the following reasons:

1. The applicant fails to submit the letter of intent, if required by this RFP, by the relevant dates and times and in the manner stated in section 1.06.
2. The applicant fails to submit the proposal in sufficient time for receipt by IDPH SharePoint Service Contract Center prior to the stated due date and time or in the manner stated in section 1.06.
3. The applicant is not an eligible applicant as defined in section 1.03.

C. Any proposal may be rejected outright and not evaluated for any one of the following reasons:

1. The applicant fails to include required information or fails to include sufficient information to determine whether an RFP requirement has been satisfied.
2. The applicant fails to follow the proposal format instructions or presents information requested by this RFP in a format inconsistent with the instructions of the RFP.
3. The applicant provides misleading or inaccurate answers.
4. The applicant states that a mandatory requirement cannot be satisfied.
5. The applicant's response materially changes a mandatory requirement.
6. The applicant's response limits the right of IDPH.
7. The applicant fails to respond to IDPH's request for information, documents, or references.
8. The applicant fails to include any signature, certification, authorization, or stipulation requested by this RFP.
9. The applicant initiates unauthorized contact regarding the RFP with a state employee.

1.16 Restrictions on Gifts and Activities

Iowa Code Chapter 68B contains laws which restrict gifts which may be given or received by state employees and requires certain individuals to disclose information concerning their activities with state government. Applicants are responsible for determining the applicability of this chapter to their activities and for complying with these requirements.

In addition, Iowa Code Chapter 722 provides that it is a felony offense to bribe a public official.

1.17 Use of Subcontractors

A. The applicant is permitted to subcontract for the performance of certain services required under the contract. Subcontracts must adhere to the provisions of Section 5 of the IDPH General Conditions effective October 1, 2009 as posted on the IDPH Web page at www.idph.state.ia.us under the *Funding Opportunities* link. Planned use of subcontractors by an applicant must be clearly explained in the proposal. This information must include:

1. The name and address of the subcontractor if known;
2. The scope of work to be performed by each subcontractor;
3. Subcontractor qualifications; and
4. The estimated dollar amount of each subcontract.

B. Current individual employees of the State of Iowa may not act as subcontractors under this contract.

C. The applicant is fully responsible for all work performed by subcontractors. No subcontract into which the applicant enters into with respect to performance under the contract will, in any way, relieve the applicant of any responsibility for performance of its duties.

1.18 Reference Checks

IDPH reserves the right to contact any reference to assist in the evaluation of the proposal, to verify information contained in the proposal and to discuss the applicant's qualifications and the qualifications of any subcontractor identified in the proposal.

1.19 Criminal Background Checks

IDPH reserves the right to conduct criminal history and other background investigations into the applicant, its officers, directors, managerial and supervisory personnel, clerical or support personnel, and health care professional personnel retained by the applicant for duties related to the performance of the contract. Such information may be used in determining contract awards. The applicant shall cause all waivers to be executed by appropriate persons to effectuate the investigations.

1.20 Information from Other Sources

IDPH reserves the right to obtain and consider information from other sources concerning an applicant, including the applicant's product or services, personnel, and subcontractors, and the applicant's capability and performance under other IDPH contracts, other state contracts and contracts with private entities. IDPH may use any of this information in evaluating an applicant's proposal.

1.21 Verification of Proposal Contents

IDPH reserves the right to verify the contents of a proposal submitted by an applicant. Misleading or inaccurate responses shall result in rejection of the proposal pursuant to Section 1.15.

1.22 Bid Proposal Clarification Process

IDPH may request clarification from applicants for the purpose of resolving ambiguities or questioning information presented in the proposals. Clarifications may occur throughout the proposal evaluation process. Clarification responses shall be in writing and shall address only the information requested. Responses shall be submitted to IDPH within the time stipulated at the time of the request. An applicant will not be permitted to modify or amend its proposal if contacted by IDPH for this reason.

1.23 Waivers and Variances

IDPH reserves the right to waive or permit cure of non-material variances in the proposal's form and content providing such action is in the best interest of IDPH. In the event IDPH waives or permits cure of nonmaterial variances, such waiver or cure will not modify the RFP requirements or excuse the applicant from full compliance with RFP specifications or other contract requirements if the applicant is awarded the contract. The determination of materiality is in the sole discretion of IDPH.

1.24 Disposition of Proposals

All proposals become the property of IDPH and shall not be returned to the applicant.

If IDPH awards funds to an applicant, the contents of all proposals will be in the public domain at the conclusion of the selection process and will be open to inspection by interested parties subject to exceptions provided in Iowa Code Chapter 22 or other provision of law.

1.25 Public Records

All information submitted by an applicant will be treated as public information following the conclusion of the selection process unless the applicant properly requests that information be treated as confidential at the time the proposal is submitted.

Any request for confidential treatment of information must be included in the transmittal letter with the applicant's proposal. In addition, the applicant must enumerate the specific grounds in Iowa Code Chapter 22 which support treatment of the material as confidential. The request for confidential treatment of information must also include the name, address, and telephone number of the person authorized by the applicant to respond to any inquiries by IDPH concerning the confidential status of the materials.

Any proposal submitted which contains confidential information must be conspicuously marked as containing confidential information and must indicate which sections of the proposal should be treated as confidential. Identification of the entire proposal as confidential shall be deemed non-responsive and shall disqualify the applicant. A Proposal containing confidential information must be emailed as a single zipped file or PDF to applications@idph.iowa.gov by 4:00 p.m. (local Iowa time) on November 19, 2012. The subject line of the email must read RFP 58813002. The single zipped file or PDF must be named "RFP 58813002 (insert your agency name) Confidential".

The applicant must submit one copy of the proposal from which the confidential information had been excised. The confidential material must be excised in such a way as to allow the public to determine the general nature of the material removed and to retain as much of the proposal as possible. A proposal from which the confidential information had been excised must be emailed as a single zipped file or PDF to applications@idph.iowa.gov by 4:00 p.m. (local time) on November 19, 2012. The subject line of the email must read RFP 58813002. The single zipped file or PDF must be named "RFP 58813002 (insert your agency name)".

In the event IDPH receives a public request for RFP information marked confidential, written notice shall be given to the applicant seventy-two (72) hours prior to the release of the information to allow the applicant to seek injunctive relief pursuant to Iowa Code Section 22.8. The information marked confidential shall be treated as confidential information to the extent such information is determined confidential under Iowa Code Chapter 22 or other provisions of law by a court of competent jurisdiction.

The applicant's failure to request confidential treatment of material pursuant to this section and the relevant law will be deemed by IDPH as a waiver of any right to confidentiality which the applicant may have had.

1.26 Copyrights

By submitting a proposal, the applicant agrees that IDPH may copy the proposal for the purpose of facilitating the evaluation of the proposal or to respond to requests for public records. By submitting the proposal, the applicant consents to such copying and warrants and represents that such copying will not violate the rights of any third party. IDPH shall have the right to use ideas or adaptations of ideas that are presented in the proposals. In the event the applicant copyrights its proposal, the department may reject the proposal as noncompliant.

1.27 Appeal of Award Decision

The posting of the Notice of Intent to Award on the IDPH Web page constitutes receipt of notification of the adverse decision per 641 Iowa Administrative Code Chapter 176.8(1). Applicants may appeal the adverse award decision by filing a written appeal to IDPH within 10 working days of posting of the Notice of Intent to Award in accordance with 641 Iowa Administrative Code Chapter 176.8(1). Appeals shall be submitted in writing, return receipt requested, to John McMullen, Contract Administrator, Division of Administration and Professional Licensure, Iowa Department of Public Health, Lucas State Office Building, Des

Moines, Iowa 50319-0075. Appeals must clearly and fully identify all issues being contested and demonstrate what procedures in the proposal were not followed. In the event of an appeal, the Department will continue working with the successful applicant pending the outcome of the appeal.

1.28 Definition of Contract

The full execution of a written contract by both parties shall constitute the making of a contract for services and no applicant shall acquire any legal or equitable rights relative to the contract until the contract has been fully executed by the successful applicant and the IDPH.

1.29 Construction of RFP

This RFP shall be construed in light of pertinent legal requirements and the laws of the State of Iowa. Changes in applicable statutes and rules may affect the award process or the resulting contract. Applicants are responsible for ascertaining the relevant legal requirements.

SECTION 2 – DESCRIPTION OF SERVICES

2.01 Description of Work and Services

The IDPH Ryan White Program is requesting applications from organizations that propose to continue or join Iowa's statewide network of Regional Service Providers (RSP) for persons living with HIV/AIDS.

Part B funding is used to assist RSP's in developing and/or enhancing access to a comprehensive continuum of high quality, community-based care for low-income individuals and families living with HIV. A comprehensive HIV/AIDS continuum of care includes the following core medical services delivered by qualified staff:

- Medical case management;*
- Oral health services;*
- Mental health services;*
- Medical nutrition therapy;* and
- Outpatient substance abuse treatment services.*

These services must assist PLWHA in accessing treatment of HIV infection that is consistent with Department of Health and Human Services HIV Treatment Guidelines. (Current treatment guidelines are available at www.aidsinfo.nih.gov.) The guidelines include ensuring access to antiretroviral and other drug therapies, including prophylaxis for and treatment of opportunistic infections.

This continuum of care may include those supportive services that enable individuals to access and remain in primary medical care, and can include the following:

- Case management (non-medical);
- Emergency financial assistance;
- Food bank/home-delivered meals;
- Health education/risk reduction;
- Legal services;
- Linguistics services;
- Medical transportation services;
- Outreach services;
- Psychosocial support;
- Referral for health care/supportive services;
- Rehabilitation services;
- Respite care; and
- Treatment adherence counseling.

At least 50% of requested funds must support core medical services, which are designated with asterisks (*) above. Definitions for all of the approved services are located in **Appendix II**.

Funds may be used to provide wrap-around services and payments not provided by other payers such as Medicaid, Medicare, Veteran's Administration, private or public insurance policies, and COBRA.

RSP's must provide outreach to inform low-income PLWHAs of the availability of services and how to access them through the use of informational materials such as brochures, newsletters, posters, community bulletins, or any other type of promotional materials.

RSP's should prioritize linking and maintaining clients living with HIV in medical care. In addition, they should consider conducting activities to address engagement and retention in care and unmet need for HIV primary medical care (see definitions).

Applicants are encouraged to co-locate medical case management in settings where clients also receive onsite outpatient/ambulatory health services, mental health services, or substance abuse treatment services. Applicants are urged to include letters of collaboration with their applications that demonstrate access to medical records, use of multidisciplinary care teams, and other aspects of co-located medical case management.

RSP's must hire, appoint, or retain qualified staff to deliver HIV services. Participation in training and capacity building is required, and includes, but is not limited to, case manager certification.

RSP's must participate in quality management activities that include compliance with relevant standards of care and collection and reporting of data for performance improvement.

All RSP's must adhere to IDPH's Case Management Standards for medical case management (see <http://www.idph.state.ia.us/HivStdHep/HIV-AIDS.aspx?prog=Hiv&pg=HivCss>), including the use of standardized forms, and agree to participate in the updating or revising of the standards, as needed.

To ensure proper stewardship of grant funds and compliance with federal requirements based on the Ryan White HIV/AIDS Program legislation, IDPH Ryan White Part B staff will conduct annual site visits to include fiscal and program components. Site visits are based on requirements detailed in the National Monitoring Standards for the Ryan White HIV/AIDS Program Part B Grantees and can be found at <http://hab.hrsa.gov/manageyourgrant/granteebasics.html>.

RSP's should participate in the development of the Consumer Needs Assessments, the Statewide Coordinated Statement of Need (SCSN), and the corresponding Comprehensive Plan, as requested.

RSP's must submit quarterly narrative reports with the format determined by the IDPH Ryan White Part B program. In addition, they must submit a service provider report and a client-level report as required by the Ryan White Services Report (RSR). More information on this report can be found here: <http://hab.hrsa.gov/manageyourgrant/files/rsrinstructionmanualsupp.pdf>

To ensure ease and consistency in reporting, Part B RSP's are required to use CAREWare for their client-level data collection.

RSP'S must establish and maintain appropriate referral relationships with entities that constitute key points of entry including emergency rooms, substance abuse and mental health treatment programs, detoxification centers, detention facilities, sexually transmitted disease clinics, homeless shelters, HIV disease counseling and testing sites, Federally Qualified Health Centers, Ryan White Part C programs, and any other regional health care point of entry. In addition, RSP's should prioritize collaborating with the Housing Opportunities for Persons with AIDS (HOPWA) program.

No more than 10% of the award may fund administrative services, including indirect costs.

2.02 Objectives

Applicants must complete a work plan. A template has been provided for specific Part B goals in **Attachment D**. Estimates of the numbers of clients served or units of service provided are acceptable, but they should be based on historical data, whenever possible. There are additional blanks for optional, locally determined objectives. If you have locally determined goals, please use the same format to describe the associated objectives.

2.03 Staffing or Personnel Requirements

These services may be provided directly by staff, or they may be offered by subcontractors or through a collaborative payment system involving other community providers. Appropriate licensure, as defined in state laws and regulations, must be demonstrated.

2.04 Budget

Applicants must supply budget information on the two forms provided in Attachments F and G. Provide detailed financial information, by type of service, in the Budget Spreadsheet, a Microsoft Excel spreadsheet. Supply narrative descriptions and justifications for the line items on the Budget Narrative, in Microsoft Word format.

When submitting your budget, include both the "Detailed Budget Forms" and the "Summary" sheets that make up the full Budget Spreadsheet workbook. Your Budget Narrative must include detailed descriptions of how costs were determined and how they relate to the proposed work plan. The line-item totals in the Budget Narrative must match the line-item totals on the Budget Spreadsheet.

2.05 Required Reporting

DATA COLLECTION AND REPORTING

Unless stipulated otherwise, all data collected, produced, or derived exclusively from the work under this RFP shall remain the sole property of the IDPH, whether in individual, aggregate, identified or de-identified form, or any other form required by the IDPH.

The Contractor and its subcontractors agree not to release, divulge, publish, transfer, sell, or otherwise make known any such data to unauthorized persons without the express written consent of the Ryan White Part B Program, or as otherwise required by law. This includes a prior written request by the Contractor to the Ryan White Part B Program for submission of abstracts, reports, or conference presentations that use data collected under this RFP.

Notwithstanding the aforementioned, the applicants awarded a contract shall be entitled to retain a set of any such data collected or work papers necessary to perform its duties under the RFP and in accordance with professional standards.

Applicants awarded a contract must provide statistical and program achievement information and assurances to the IDPH in a manner that meets the requirements of the Health Resources and Services Administration (HRSA) –HIV/AIDS Bureau (HAB). Contractors are required to utilize CAREWare to meet these requirements, to enter all data elements in a timely manner, and to ensure that all appropriate reporting mechanisms will be maintained.

This information includes:

- a) Statistical and Program Achievement: All contractors receiving Part B funds **MUST** comply with the reporting requirements of the Ryan White HIV/AIDS Program Annual Service Report (RSR).
- b) Quarterly narrative reports and up-to-date fiscal information are required.

Report	Method of Submission	Date Due
Quarterly Narrative and Statistical Reports April 1, 2013 to June 30, 2013 July 1, 2013 to September 30, 2013 October 1, 2013 to December 31, 2013 January 1, 2014 to March 31, 2014	1 electronic copy uploaded to the Completed Reports folder in the Contractor's SharePoint Service Contract Site	July 31, 2013 October 15, 2013 January 31, 2014 April 30, 2014

Expense Reports:

The successful applicants shall prepare a monthly expense report in an Electronic Expenditure Workbook (EEW).

Expense Report	Date Due
Monthly Electronic Expenditure Workbook (EEW)	Submit expenses within 45 days of month of expenditure

SECTION 3 -- PROPOSAL FORMAT AND CONTENT

These instructions prescribe the format and content of the proposal and are designed to facilitate the submission of a proposal that is easy to understand, review, and evaluate.

3.01 Technical Requirements

- A. Proposal documents must be submitted in a single zipped file (preferred) or single PDF file format, no larger than 20 MB, and emailed per the instructions outlined in section 1.06 E. Shortcuts or links to proposal documents will not be accepted and shall result in document rejection, which may result in rejection of the proposal.
- B. Proposals must be typewritten and follow the format delineated herein.

Aspect	Requirement
Format	Documents must be created in MS Office Word or Excel. MS Office 97-2003 format is the minimum product accepted.
Length	There is no page limit for the narrative sections.
Font size	Proposal must be in a minimum of 12 point font. A smaller font may be used for tables, figures or maps.
Margins	Narrative sections must use a minimum of one inch on all sides. Required forms contain preset margins which may not be changed.
Spacing	May be single- or double-spaced.
Header or Footer and Pagination	Insert a header or footer that identifies the applicant name, page number and the RFP number. All pages are to be sequentially numbered (1, 2, 3...) inclusive of all documents at the bottom or top of each page, including the cover page, maps, charts, budget pages, tables, and appendices or attachments; and beginning with the cover page as number one. If applicant is submitting an audit report (if required from section 3.04), this audit appendix does not need to be included in the sequentially numbered appendices.
Signatures on Cover Page	The cover page (page 1 of Attachment A) must be complete and contain an electronic signature by an individual authorized to obligate the applicant agency.
Minority Impact Statement	The minority impact statement must be complete and contain an electronic signature by an individual authorized by the applicant agency.
Proposal content	Failure to adhere to prescribed instructions, technical requirements (section 3.01), format, or proposal content (section 3.02) may result in disqualification (rejection) of the proposal.

- C. Do not submit promotional materials. Promotional materials or items other than required by this RFP will not be considered during the review process.
- D. Any information or materials submitted separately from the proposal will not be considered in the review process.

3.02 Proposal Content

A. Cover Page: Identifies the applicant's legal name, federal identification number, and key contact information for the project. Complete required form-**Attachment A** following these instructions:

- Applicant - Provide the legal name of the applicant entity. This must be the entity associated with the Federal Identification (ID) number per the Internal Revenue Service (IRS). If the entity operates under another name as a "d/b/a" (doing business as), please include that in the legal name. Provide the applicants federal identification number. Provide the applicant's address, telephone and FAX number as requested in the first section of Attachment A.
- Total Funds Requested – Indicate the total amount of funds requested for the HIV Core and Medical Support Services, not to exceed the amounts outlined in section 1.05.
- Conditions/Signature – The person authorized to execute legal documents on behalf of the entity must date and insert an electronic signature to certify that the applicant is in agreement with the conditions listed.
- Key Personnel for this Proposal – Provide information for agency personnel associated with this proposal. Include the information in the table provided on page 2 of the Cover Page (Attachment A). Describe the executive, management, technical, and professional staff who would perform duties related to this project. Include the number of staff, their roles, and their expertise and experience in providing these types of services. Provide evidence for any necessary applicable professional licenses required by law by listing the license number associated with the professional personnel.
 - Executive Director Name, email address, experience as applicable – Complete and provide the name of the person who has overall responsibility and authority for administering the program in which the entity is applying for the funds.
 - Program Administrator Name, email address, experience, as applicable – Complete the table by providing the name of the individual with direct day-to-day responsibility for this program and the person that the department can contact concerning the proposal.
 - Fiscal Director Name, email address, experience, as applicable – Complete the table by providing the name of the individual with overall responsibility and authority for financial management for this program.
 - Case Managers Name, email address, experience, as applicable – Complete the table by providing the name of the individual with responsibilities.

B. Minority Impact Statement: Identifies the applicant's potential impact of the project's proposed programs or policies on minority groups. Complete required form – **Attachment B** following these instructions:

- Applicants must independently complete the "Minority Impact Statement" form by checking the box that most accurately reflects the proposed project programs or policies

impact on minority persons.

- Describe the rationale or evidence for your choice in a brief narrative, as well as identifying the specific minority groups in which there is a positive or negative impact (if applicable) on the checklist.
- Insert an electronic signature of a person authorized to execute legal documents on behalf of the entity and return it with the proposal.

C. Population Description: Project Abstract, County Funding, Site Location, and Population. Applicants must complete all components in **Attachment C**, including which counties their project will *regularly* serve, in which locations onsite services will be provided, and what populations will be served.

D. Applicant Narrative: Applicant's Background, Demonstrated Experience, Community Partnerships and Needs Assessment (or community narrative). In narrative format, respond to each of the items listed below completely:

1. Describe the population of HIV-positive persons you will serve. Include the age, gender, race and ethnicity, geographic location, risk factors, and other characteristics of the population.
2. Describe the specific HIV-related service needs of your population utilizing the service definitions from **Appendix II** of this RFP. Cite relevant data to justify these needs. Explain how you will ensure that any program requirements listed in the definitions for each service category will be met (e.g., licensed professionals, specific counseling requirements, documentation, etc.). Be sure to develop a work plan with goals and objectives for each service category being funded (**see Attachment E**).
3. When providing wrap-around services for eligible clients, describe how you will ensure payer of last resort, timely payments, and accurate record keeping and reporting.
4. Describe your outreach efforts to inform low-income individuals with HIV disease of the availability of services and how to access them.
5. Describe the extent to which your organization has succeeded in linking and maintaining clients living with HIV or AIDS in medical care over the past year.
6. Describe your organization's efforts (current and proposed) to co-locate medical case management in settings where clients also receive onsite outpatient/ambulatory health services, mental health services, or substance abuse treatment services. Describe how you will ensure timely and coordinated access to medically appropriate levels of health and support services that improve continuity of care. Include efforts of your paid staff as well as collaborations with other service providers.

7. Describe your efforts to find people not in care and get them into primary care.
8. Describe your organization's plan for hiring, appointing, and retaining qualified staff to deliver the proposed HIV service(s). Briefly describe their past or expected training, credentials, licensure, and language proficiencies. Clearly describe your capacity to begin service delivery on April 1, 2013.
9. Describe your existing and proposed efforts to monitor, comply with relevant service category standards of care, and improve the quality of services that you have chosen to provide. Attach all quality assurance protocols that you have developed. Describe internal monitoring and continuous quality management activities. Include a statement of commitment to following statewide standards, including the use of standard forms. In addition, describe your plan for participation in updating or revising statewide standards and quality assurance protocols, as needed.
10. Describe your existing and proposed efforts to be prepared for and to participate actively in annual site visits based on the National Monitoring Standards found at <http://hab.hrsa.gov/manageyourgrant/granteebasics.html>. If subcontractors are proposed, describe how you will ensure that the subcontractor(s) are meeting performance expectations as described by this RFP and the National Monitoring Standards.
11. Describe your existing and proposed efforts to participate in statewide planning and needs assessment activities.
12. Applicants must collect and report client-level data, consistent with HRSA requirements. IDPH will make CAREWare, an online software system, available at no cost to the applicant for collection of data. Describe how you will meet the data collection and reporting requirements described in section 2.05.
13. Provide a brief history and description of the existing partnerships between your agency and other key partners in providing service(s) for people living with HIV. Include your current or proposed relationship with the Housing Opportunities for People with AIDS (HOPWA) program administered by the Iowa Finance Authority.

Agreements among both funded and non-funded partners are necessary to develop and implement an effective Regional Service Providers program. Partners may include key points of entry including emergency room, substance abuse and mental health treatment programs, detoxification centers, detention facilities, sexually transmitted disease clinics, homeless shelters, HIV disease counseling and testing sites, Federally Qualified Health Centers, Ryan White Part C programs, and any other regional health care point of entry. These partnerships are an expectation of all funded agencies and are to be evident in both application work plans and documented via written referral relationships. Provide a list of the names of the agencies or organizations for which you have current or planned written referral relationships in **Attachment D**.

E. Subcontracts. If the applicant intends to use subcontractors in completing work and services of this RFP, refer to Section 1.17 of the RFP and include the requested information from that section here. Note: Subcontracted services with a value of \$2,000 or greater require written agreements. These agreements must be submitted to and approved by IDPH (after notice of award) prior to signature by either party. (See Section 5 of the IDPH General Conditions).

F. Work Plan or Action Plan. Using the form provided (**Attachment E**), applicants shall address objectives for specific Ryan White Part B Program service categories and any other broad goals. Please supply the missing data. Estimates are acceptable, but they should be based on historical data whenever possible. There are additional blanks for optional, locally determined objectives.

G. Office Locations and Services. Identify and specify the location(s) of the applicant's offices or other facilities involved in provision of services under this proposal. Complete the Service Delivery Form (**Attachment F**) or include a chart or table that outlines all of the agency's offices (including addresses) and the services provided.

H. W-9.

If applicant is not a current contractor with IDPH, include a completed W-9 form.

3.03 Budget

A budget must be included in the proposal detailing the costs of the project. A budget narrative shall describe how the budget was calculated and justify the expenses detailed.

The applicant will submit a line-item budget of anticipated direct project costs for the period from April 1, 2013, to March 31, 2014. The budget shall include only the line-item categories listed below, and shall comply with the guidelines as outlined in Section 2.04 of this RFP. The applicant shall complete required forms **Attachment G and H** to describe proposed expenditures. Line-item categories include:

- Salary/Fringe Benefits
- Contractual/subcontracts
- Equipment
- Other
- Administrative or Indirect Costs

1. Salary/Fringe Benefits:

List all staff directly funded, wholly or partially with these funds. Employee's names (if current staff), credentials, and position titles must be listed. Justification must include the total annual salary and fringe benefits paid to the employee, as well as the total annual salary and fringe benefits charged to this project.

2. Contractual/subcontracts:

The applicant is permitted to subcontract for the performance of certain services. Refer to Section 1.17 of this RFP and Section 5 of the IDPH General Conditions for subcontract provisions and requirements. If services performed for any activities outlined in this RFP are to be subcontracted, the applicant must include subcontractor name and estimated dollar amount of each subcontract.

3. Equipment:

List any equipment anticipated to be purchased with these funds. Equipment is defined as any item with a cost or value of \$5,000 or more and with an anticipated useful life of one year or more. If the item does not meet this definition, it should be included in "other" costs.

4. Other:

All other anticipated expenses using funds must be listed on the line-item budget and justified. This category includes office supplies, educational supplies, project supplies, incentives, communication, rent and utilities, training, information technology-related expense, travel, etc. This will include any equipment costs not meeting the above definition for equipment.

Travel

IDPH will not reimburse travel amounts in excess of limits established by Iowa Department of Administrative Services, State Accounting Enterprise. Current in-state maximum allowable amounts are:

Food- \$8.00/breakfast, \$12.00/lunch, \$23.00/dinner

Lodging- Maximum \$83 plus taxes per night

Mileage- Maximum of \$0.39 per mile

5. Administrative Costs or Federally Approved Indirect Rate:

Indirect costs may not exceed 10% of the total direct costs. Indirect costs should include general organizational expenses, such as executive management time, finance, human resources or other support services effort, liability insurance, and other expenses not directly charged to the program. Items not directly charged to the program might include facility rent/lease, postage, telephone, utilities, etc. These items support employees that provide services directly related to the program.

Administrative costs are those that are incurred for common or joint objectives, and therefore cannot be identified readily and specifically with a sponsored program, but are nevertheless necessary to the operations of the organization. For example, the costs of operating and maintaining facilities, depreciation and administrative salaries are generally treated as indirect costs.

The applicant shall maintain documentation to support the administrative cost allocation. IDPH reserves the right to request the documentation at any time.

All charges to the grant must be in accordance with the applicable office of Management and budget cost principles (A-87, A-122, AND A-21) as well as the exclusions and limitations described in the notice of grant award delivered by HRSA to IDPH

3.04 Business Organization Information

A Business Organization Form must be fully completed and up-to-date within the contractor’s SharePoint Service Contract site.

If the applicant is a current contractor with IDPH and already has access to the IDPH Service Contract SharePoint system, then the applicant is responsible to verify the information included in the Business Organization form is **current and uploaded** in their respective Business Organization folder within their SharePoint Service Contract site. If any updates are needed to the Business Organization Form or supporting information, the applicant must complete these prior to proposal submission. **Applicant shall provide a statement in the proposal that the Business Organization form has been reviewed and is accurate.**

If the applicant is a **new** potential contractor with IDPH and does not currently have access to the IDPH Service Contract SharePoint system, then the Business Organization Form (**Attachment I**) and any supporting information required in this section shall be electronically attached in a PDF as a Business Organization Appendix to the proposal being submitted.

Follow these instructions to complete the Business Organization Form (**Attachment I**) as necessary:

Item	Field	Description
	Agency Name	Provide the name of the agency applying.
	Date	Provide the date the form is completed.
Structure		Identify and describe the legal structure of the applicant. (e.g., corporation, 501(c)3, county government).
	Evidence of authorization to do business in Iowa	Check the type of organization of the applicant agency. If the agency marks “Other,” then the applicant must be currently registered with the Iowa Secretary of State’s office to do business in Iowa or agrees to register if applicant is awarded a contract.
Organization History	History	Provide a brief history of the agency.
	Mission Statement	Include the agency’s mission statement.
	Vision Statement	Include the agency’s vision statement.
Table of Organization	Is there a <u>current</u> table of organization uploaded in the	In “no”, include a table of organization for the applicant agency as part of the proposal appendices.

	SharePoint Business Organization document library?	
Disclosure of Litigation	Is there any litigation, administrative, or regulatory proceedings pending or threatened against your agency or subcontractor?	<p>Answer “no” or “yes” as to whether the applicant has any pending or threatened litigation, administrative or regulatory proceedings or similar matters which could affect the applicant’s ability to perform required services.</p> <p>If “yes,” list and summarize any pending or threatened litigation, administrative, or regulatory proceedings or similar matters which could affect the applicant’s ability to perform required services.</p>
Disclosure of Contract Default	Has your agency or a subcontractor defaulted on a contract?	<p>Answer “no” or “yes” as to whether the applicant or any subcontractor identified within the proposal has defaulted on a contract within the preceding three years.</p> <p>If “yes,” list all applicable contracts and subcontracts, including the name(s) of a contact person and phone number for the other party(s) holding the contract defaulted upon, and provide a brief description of the incident(s). Add rows if needed.</p>
Disclosure of Contract Termination	Has your agency or subcontractor terminated a contract?	<p>Answer “no” or “yes” as to whether the applicant or any subcontractor identified within the proposal has terminated a contract with another party prior to its full term within the preceding three years.</p> <p>If “yes,” list all applicable contracts and subcontracts, the name(s) of a contact person and phone number for the other party(s) holding the contract that was terminated, and provide a brief description of the incident. Add rows if needed.</p>
	Has your agency or a subcontractor had a contract terminated?	<p>Answer “no” or “yes” as to whether the applicant or any subcontractor identified within the proposal has had a contract terminated by another party prior to its full term within the preceding three years.</p> <p>If “yes,” list all applicable contracts and subcontracts, the name(s) of a contact person and phone number for the other</p>

		<p>party(s) that terminated the contract, and provide a brief description of the incident. Add rows if needed.</p>
<p>Audited financial statement</p>	<ol style="list-style-type: none"> 1. Does the agency currently hold a contract with IDPH? 2. Has the agency submitted audit reports (or operating statement if non-profit organization) to IDPH for the preceding three year period? 3. Does the agency need to submit an audited financial statement with this proposal? 	<p>Check “yes” or “no” regarding whether the applicant agency currently holds a contract with IDPH. If “yes,” go to #2. If “no,” go to #3.</p> <p>Check “yes” or “no” regarding whether the applicant agency has previously submitted audit reports (or operating statement if applicant is nonprofit corporation) for the preceding three-year period.</p> <p>If “yes,” no additional information is needed. Any applicant agency that currently holds a contract with the department and has previously submitted a current audit report need not submit a copy with this proposal.</p> <p>If “no,” go to #3.</p> <p>If the agency responds “no” to either #1 or #2, then yes, the agency must provide an audited financial statement for the preceding three-year period within the proposal appendices.</p> <p>Nonprofit corporations whose previous funding level has not required an audited financial statement must submit a year-end operating statement and balance sheet for the preceding three-year period and a current operating statement in lieu thereof.</p>

3.05 Litigation or Investigation

The applicant shall list and summarize pending or threatened litigation, administrative, or regulatory proceedings or similar matters which could affect the ability of the applicant to perform the required services. Failure to disclose such matters may result in rejection of the proposal or in termination of any subsequent contract. This is a continuing disclosure requirement. Any such matter commencing after submission of a proposal must be disclosed in

a timely manner in a written statement to the IDPH.

3.06 Proposal Checklist

The applicant is not required to submit a checklist with the proposal. Refer to **Attachment J** for the list of items which must be included in the proposal.

SECTION 4 – PROPOSAL REVIEW PROCESS AND CRITERIA

4.01 Overview of Review Process

Review/evaluation of proposals submitted under this RFP will be conducted in three phases.

Phase I -- Technical Review: The first phase will involve a preliminary review by the IDPH staff of an applicant's compliance with the mandatory requirements, including technical requirements (section 3.01) and proposal content (section 3.02), for submitted proposals. Proposals which fail to satisfy technical requirements or proposal content may be eliminated from the proposal review. These proposals may be rejected and will not be returned to the applicant. IDPH will notify the applicant of a rejection that occurs during Phase I of the review process. The IDPH reserves the right to waive minor variances at the sole discretion of the IDPH.

Phase II – Review Committee: Proposals determined to be compliant with technical requirements and proposal content will be accepted for the second phase of evaluation, which shall be completed by a review committee or committees established by the IDPH. The membership of the review committee(s) shall be determined by the bureau chief with input and oversight from the respective division director. The review committee(s) shall evaluate proposals in accordance with a point system. Each committee member will review the proposals and the evaluation criteria outlined in this chapter and assign a point total for each criterion. If an applicant is requested to make an oral presentation of the proposal pursuant to RFP Section 1.14, the committee members may consider the oral presentation of the applicant in determining the points awarded.

The total score awarded by each committee member will be averaged to arrive at the final score (rounded to the nearest whole number) for each proposal and the proposals will then be ranked based on the average of the evaluation scores. IDPH staff may solicit additional input and recommendations from the review committee(s).

In the event competitive proposals receive an equal number of points, two division directors and the respective bureau chief administering the program may conduct a second review utilizing the same scoring process.

Phase III -- IDPH Review and Award: The third phase will be a final review. The IDPH will consider the submitted proposals and the review committee's scores and recommendations.

The IDPH may also consider geographical distribution, budget information, any information received pursuant to Sections 1.18 - 1.22 of the RFP, and any other information received pursuant to the procurement process. IDPH reserves the right not to award the contract to the applicant with the highest point average.

4.02 Scoring of Proposals

A maximum of 100 points may be awarded to each proposal. A minimum average score of 60 or greater is required for the proposal to be considered for funding. Proposals scoring less than the minimum average score will be rejected.

Applicants will be scored using the scoring tool in Appendix III. Components of the project narrative, work plan, and budget/budget narrative will each be awarded up to five points as described below. The point score will be multiplied by the weight for that proposal component and then all components will be summed to arrive at the final score.

Points will be assigned for each scored component listed below as follows:

- 5 – Applicant’s proposal or capability is exceptional and exceeds expectations for this criterion.
- 4 – Applicant’s proposal or capability is superior and slightly exceeds expectations for this criterion.
- 3 – Applicant’s proposal or capability is satisfactory and meets expectations for this criterion.
- 2 – Applicant’s proposal or capability is unsatisfactory and contains numerous deficiencies for this criterion.
- 1 – Applicant’s proposal or capability is not acceptable or applicable for this criterion.

The maximum scores to be awarded for each proposal section are as follows:

Proposal Component	Weight	Potential Maximum Score
Cover Page (Attachment A)	--	Required
Key Personnel (Attachment A)	--	Required
Minority Impact Statement (Attachment B)	--	Required
Project Abstract, County Funding, Site Location, and Population (Attachment C)	--	Required
Project Narrative		
Background & Need	1	5
Access to Care	4	20
Quality Management	2	10
Planning	1	5
Data and Reporting	1	5
Community Partnerships (Attachment D)	1	5
Work Plan (Attachment E)	4	20
Budget and Narrative Budget (Attachment G & H)	6	30
Subcontractor Information	--	Required, if using subcontractors
Service Delivery Form (Attachment F)	--	Required
W-9 Form	--	Required, if new contractor
Business Organization Form or Statement (Attachment I)	--	Required
Litigation or Investigation Disclosure	--	Required
Proposal Checklist (Attachment J)	--	Optional
Total		100 Points Maximum

SECTION 5 – CONTRACT

5.01 Conditions

Any contract awarded by the IDPH shall include specific contract provisions and the IDPH General Conditions effective October 1, 2009 as posted on the IDPH Web page www.idph.state.ia.us under *Funding Opportunities link*. Refer to **Appendix I** for the Draft Contract Template. The Draft Contract Template included is for reference only and is subject to change at the sole discretion of IDPH.

The contract terms contained in the general conditions are not intended to be a complete listing of all contract terms, but are provided only to enable applicants to better evaluate the costs associated with the RFP and the potential resulting contract. Applicants should plan to include such terms in any contract awarded as a result of the RFP. All costs associated with complying with these requirements should be included in the proposal. If the contract exceeds \$ 500,000, or if the contract together with other contracts awarded to the Contractor by the IDPH exceeds \$500,000 in the aggregate, the Contractor shall be required to comply with the provisions of Iowa Code chapter 8F.

IDPH requires Contractors to link with the local board of health when providing services supported by IDPH funding. In particular, Contractors are expected to assist the local board of health in carrying out the three core functions of public health as defined in 641 IAC 77.3 (137): assessment, policy development and assurance. Examples of linking with the board of health include, but are not limited to:

- Provide environmental and/or health data to the local board of health for the purposes of, and provide assistance in, assessing and analyzing the health status of the community.
- Submit reports to the local board of health on the effectiveness, accessibility, and quality of services provided.
- Include the local board of health in establishing policies and plans associated with the services provided. This can be accomplished by establishing a liaison between the contractor and the board of health or by attending regular meetings of the board of health.
- Educate the local board of health about the services provided and work with the board to identify target populations in need of the services provided.
- Be active in the Community Health Needs Assessment and Health Improvement Plan process.
- Provide the board of health expert input on the services provided and how those services relate to; the health priorities of the community and health improvement plans to address those priorities.

The contractor is expected to provide documentation of linkage efforts if requested by IDPH.

Results of the review process or changes in federal or state law may require additions or changes in final contract conditions requirements.

5.02 Incorporation of Documents

The RFP, any amendments and written responses to applicant questions, and the proposal submitted in response to the RFP form a part of the contract. The parties are obligated to perform all services described in the RFP and proposal unless the contract specifically directs otherwise.

5.03 Order of Priority

In the event of a conflict between the contract, the RFP and the proposal, the conflict shall be resolved according to the following priorities, ranked in descending order:

1. the Contract;
2. the RFP;
3. the Proposal.

5.04 Contractual Payments

The IDPH provides contractual payments on the basis of reimbursement of expenses in accordance with Iowa Code 8A.514. In the event the contractor lacks sufficient working capital to provide the services of the contract, an advance not to exceed one month's value of the contractual amount may be provided by the IDPH. One-third (1/3) of this advance will be deducted from eligible reimbursement of expenses for the 7th, 8th and 9th months of service.

SECTION 6 – APPENDICES

Appendices are posted in a separate file on the IDPH Web page under *Funding Opportunities* link: www.idph.state.ia.us.

- Appendix I Draft Contract Template
- Appendix II Service Definitions
- Appendix III Scoring Tool

SECTION 7 – ATTACHMENTS

Attachments are posted in a separate file on the IDPH Web page under *Funding Opportunities*: www.idph.state.ia.us. Applicants must download these forms and include them in the proposal as outlined in Section 3 of this RFP.

- Attachment A Cover Page
- Attachment B Minority Impact Statement
- Attachment C Project Abstract, County Funding, Site Location, and Population
- Attachment D Community Partnerships
- Attachment E Work plan
- Attachment F RW Budget forms (Excel spreadsheets)
- Attachment G RW Budget narrative
- Attachment H Service Delivery Form
- Attachment I Business Organization Form
- Attachment J Proposal Checklist