



AREA AGENCY ON AGING AND DISABILITY

Posted on January 4, 2018

Revised January 8, 2018 (new and revised items in red)

Revised January 26, 2018 (new and revised items in green)

REQUEST FOR PROPOSAL

The following questions have been received from organizations indicating an intent to complete an application to provide supportive and nutritional services to older adults (60+ years of age) and adults with disabilities (18-59 years of age) who reside in the City of Memphis, and Fayette, Lauderdale, Shelby and Tipton Counties in West Tennessee. Through this web page, these questions and Aging Commission’s answers are made available to all interested parties.

Aging Commission of the Mid-South contact for all questions and correspondence:

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Question 1

What is a “Letter of Intent”?

Answer 1

A letter explaining that you plan to complete an application to provide one or more of the services listed on the fact sheet. A sample letter of intent is attached.

Question 2

What deadlines should I be aware of?

Answer 2

Action	Deadline
Submit Letter of Intent	January 10, 2018
Reserve your seat for technical assistance training	January 16, 2018
Commission e-mails Applications and Instructions	January 16, 2018
Technical Assistance Training held	January 23, 2018 ; 10 a.m. to noon
Commission must receive a complete application	February 9, 2018, 4 p.m.

Question 3

What can be submitted as proof of operating a business for a minimum of 12 months

Answer 3

The following are examples, but this is not a comprehensive list. Other documents may also serve to document business operation.

- Certificate of Incorporation with verifying dates
- Business license with verifying dates
- Completed tax forms with verifying dates
- Certificate of Operation with verifying dates

Revised January 8, 2018

Question 4

Are current providers required to submit a letter of intent of proof of operating a business for a minimum of 12 months?

Answer 4

Yes, everyone who is interested in providing a service in response to the RFP must provide the requested information.

Additions January 26, 2018

Question 5

If the owners are the only employees, is worker's compensation insurance required?

Answer 5

The requirement for Workers' Compensation and Employer Liability Insurance are provided below:

- 1) For Contractors statutorily required to carry workers' compensation and employer liability insurance, the Contractor shall maintain:
 - i. Workers' compensation in an amount not less than one million dollars (\$1,000,000) including employer liability of one million dollars (\$1,000,000) per accident for bodily injury by accident, one million dollars (\$1,000,000) policy limit by disease, and one million dollars (\$1,000,000) per employee for bodily injury by disease.
- 2) If the Contractor certifies that it is exempt from the requirements of Tenn. Code Ann. §§ 50-6-101 – 103, then the Contractor shall furnish written proof of such exemption for one or more of the following reasons:
 - i. The Contractor employs fewer than five (5) employees;
 - ii. The Contractor is a sole proprietor;
 - iii. The Contractor is in the construction business or trades with no employees;
 - iv. The Contractor is in the coal mining industry with no employees;
 - v. The Contractor is a state or local government; or

vi. The Contractor self-insures its workers' compensation and is in compliance with the TDCI rules and Tenn. Code Ann. § 50-6-405.

Question 6

Is putting the grant application in a 3-ring binder acceptable or must it be bound or unbound?

Answer 6

Three- ring binders are not required but may be used for the three hard copies. The original should not be a three-ring binder. Staples or binder clips are preferred.

Question 7

How do we find the contact information for the AAAD for the counties that we propose to serve or do we send it to you for all West Tennessee counties which need copies of the proposal?

Answer 7

Each Area Agency on Aging and Disability (AAAD) conducts its own RFP process. This RFP allows you to provide services to Shelby, Fayette, Lauderdale and Tipton counties only. Click on the link below for contact information for the other AAAD's

<https://www.tn.gov/aging/resource-maps/tennessee-area-agencies-on-aging-and-disability.html>

Question 8

Do we submit 1 copy along with the original and an email copy or 3 hard copies. (Page 4 states to submit 1 original and 1 copy; however, page 8 appears to say submit 3 hard copies.

Answer 8

Please submit the original and three copies in person or by mail and e-mail one copy.

Question 9

What is the Employer ID #?

Answer 9

A federal **employer ID** number is issued by the Internal Revenue Service and used to identify a business entity. Any business who has employees, operates as a corporation or partnership, or withholds taxes on income or other wages of a non-resident alien needs an **employer ID** number, according to the IRS. It is also referred to as EIN.

Question 10

What text style and font size are preferred?

Answer 10

12 point Arial is preferred.

Question 11

On page 13 you ask for our history and our "service delivery system for proposed Home and Community Based Services.". Please explain what you are looking for when you ask for our service delivery system; however, does the service delivery description found on page 16 under service delivery fulfill what you are requesting?

Answer 11

To provide the history of your organization at a minimum answer the following questions- When did you start your business? Who do you serve? What is your service area? What services do you provide? Section IV on page 16 responds to the service delivery question. However, this

information should be provided wherever it is requested.

Question 12

The MCOs do not have a history of providing letters of reference describing one's record of billing accuracy and timeliness. How do we "Choices Providers" work around this, seeing page 13 requests this information? The same can be stated for your request for staff accuracy of reporting, quality assurance, and customer satisfaction documentation. Would letters from our private pay contracts suffice?

Answer 12

You can provide proof that a letter was requested and provide any response received. Letters can be submitted from private pay contracts; however, if you are only serving one person, this information will have less influence than information received from an entity for whom you are serving multiple consumers.

Question 13

My organization is a non-profit. Must I file a Form 990?

Answer 13

Tax-exempt organizations, nonexempt charitable trusts, and section 527 political organizations file the Form 990 to provide the IRS with required information. If you are a non-profit, you are most likely tax exempt and must file the Form 990. If you do not file a Form 990, please provide the rule, regulation, statutes, etc. that exempts you from filing.

Question 14

Why do you need a W-9?

Answer 14

The W-9 is used to provide your correct Tax Identification Number to the Aging Commission if we are required to file an information return with the IRS to report, for example, income paid to you.

Question 15

Please give an example of how to ascertain unit costs for the categories on the form below.

In order to be approved as a Service Provider, the applicant must provide a unit rate for each service proposed.

For each of the categories on which you are bidding (congregate, home delivered, frozen, and emergency), provide the following information:

	Congregate	Home Delivered	Frozen	Emergency
Food Cost:				
Labor Cost:				
Equipment Cost:				
Utility Cost:				
All Other Cost:				
Delivery Cost (if applicable):				
Total Cost per meal:				

Answer 15

I'm not able to provide an example. You must calculate your cost using the table provided. For each meal what are your food costs? What are your labor costs? What are your equipment and utility costs? If you are delivering the meal, what is the cost of delivery?

Question 16

In Attachment 1 of the RFPA can you confirm that the proposal submission should identify (check) ALL the counties an applicant serves under or should the submission be limited to only those areas covered under this proposal (Fayette, Lauderdale, Shelby and Tipton)?

Answer 16

Each Area Agency on Aging and Disability (AAAD) conducts its own RFP process. This RFP allows you to provide services to Shelby, Fayette, Lauderdale and Tipton counties only. No other counties should be checked.

Question 17

If YES to question 1 and an applicant provides services in the areas under Medicaid Managed LTSS (TennCare) but not under direct contract with a AAAD, should the applicant still check these counties in Attachment 1? OR do you only want to know where the applicant directly contracts with the AAADs throughout the state of Tennessee?

Answer 17

This RFP is applicable to Shelby, Fayette, Lauderdale and Tipton counties only. No other counties should be checked.

Questions 18

In attachment 4 of the RFP, please confirm that ACMS DOES NOT require any of the attachments listed under bullet 5 until after an organization has been awarded?

Answer 18

If a contract is executed the documents listed under bullet 5 of Attachment 4 shall be submitted no later than 30 days after executing the contract.

Question 19

What is the maximum number of service hours that an individual client can be authorized to receive per week (or per month) for each of the in-home services covered under this RFP:

- a) Personal Care – OAA Title III
- b) Personal Care – State Funds
- c) Homemaker – OAA Title III
- d) Homemaker – State Funds
- e) In-Home Respite – OAA Title III

Answer 19

Service Hours are based on individualized “Care Plans”. Home and Community Based Services (HCBS) provided under the OPTIONS (State Funds) or Title IIIB (OAA) programs shall not exceed a maximum of \$5,000 annually per individual enrolled after July 1, 2014. For individuals enrolled prior to July 1, 2014, HCBS provided under the OPTIONS or Title IIIB (OAA) programs shall not exceed a maximum of \$7,000 annually per individual.

The provider agency’s Unit Cost Price for Personal Care, Homemaker and In-Home Respite for OAA and State Funds are contributing factors to the number of service hours per individualized care plan.

Question 20

For services funded by OAA Title III will the awarded contractor for In-home services be required to:

- f) Notify client of their opportunity to donate to the cost of OAA Title III services (Personal Care, Homemaker or in-home Respite)?
- g) Collect and account for client donations toward OAA Title III funded services?
- h) Provide a Match contribution (in-kind or cash) toward OAA Title III funded services?
- i) If a Match is required how is the match calculated?

Answer 20

Providers cannot notify clients of any donations. Consumers do not donate under OAA Title III services for (personal Care, Homemaker, and In-Respite). Providers may not request or collect any funds from consumers at any time. Yes a 20% match is required toward the OAA program. It is the unit cost rate less the match requirement.

Question 21

Will ACMS provide a Sample Contract for organizations preparing a response so we may understand the standard terms and conditions and provide the required affirmative statement regarding contract terms?

Answer 21

ACMS will not provide a sample contract before the RFPA evaluation process.

Question 22

Will ACMS provide the published process for Complaint Resolution as described in Section 1. page 6 of the RFPA so proposers may understand these requirements?

Answer 22

ACMS will provide the process after it is developed, and prior to executing contracts.

Question 23

Please provide ACMS contract requirements for Insurance limits including for General liability, Professional Liability, Workers Compensation and any other coverage required.

Answer 23

See Answer 5 above.

Question 24

Will ACMS please provide a list of the companies who submitted formal letters of Intent to respond to this RFPA for In-home services according to the January 10, 2018 requirement?

Answer 24

When the RFP process concludes a list can be provided to anyone who submits a written request.

Question 25

The Plough Foundation funding for the ACMS clients served through the No Hungry Senior (NHS) program will run out on 12/31/18. Currently 684 (70%) of the active NHS clients are from ACMS referrals. While we are actively seeking funds for sustainability, however it is possible that after 12/31 these clients will no longer be served and to continue to receive meals they will need to go back on the ACMS waiting list.

We are inquiring if we can increase the number of meals to be served through this RFP to include these NHS clients? We realize that these clients will first need to be assessed by ACMS and that this may put an undo strain on your staff, so if possible, MIFA trained assessors are willing to assist with this process.

Answer 25

ACMS cannot address this question during the RFP process.

Question 26

How often will Provider receive reimbursements?

Answer 26

Requests for reimbursements should be received by the 10th of each month for services delivered the previous month. Reimbursements should be received within 30 days of receipt.

Question 27

OAA Title 111B -Along with providing social and personal needs for the elder, will provider also be responsible for total care of residence, according to their demographics who have no family

or friends.

Answer 27

The provider will not be responsible for total care of the residence. The provider agency will only be responsible for authorized services and tasks approved by the AAAD.

Question 28

Are there a number of hours in training each year for OAA Title 111B?

Answer 28

Service Provider staff are required to participate in training relevant to their major job responsibilities. Service Providers will have to adhere to their licensure regulations regarding number of hours required for staff.

Question 29

Please clarify, dose PSSA Licensing, Monitoring reports and POC acceptance letter apply to non-current applicants?

Answer 29

PSSA licenses are required of all In-home service providers. If you are a non- current provider, the findings/monitoring report from the licensure agency should be submitted along with your POC to the licensure entity.

Question 30

If applicant is accepted, will AAAD supply charts, grafts, for monitoring according to their SPECS?

Answer 30

If a contract is executed, the AAAD will provide a training to the Provider agency detailing expectations, policies, procedures etc.

Question 31

Please give example of completed scope of work.

Answer 31

I'm sorry, I can't provide an example.

Question 32

What is the normal timeline implementation between the provider and service coordinator?

Answer 32

After receiving a Provider Authorization from the Aging Commission of the Mid-South, the provider agency has five (5) working days to accept or decline the individual case.

Question 33

Please give an example of the proposed service unit reimbursable Rate & Gap.

Answer 33

For OAA funding a 20% match is required. Also, the Family Care Giver program has a required 25% match requirement. If the Unit Cost rate is \$29.95 for that service then the reimbursable amount will be \$22.24. It is the unit cost rate less the match requirement.

Question 34

Please give an example of the proposed training approaches and curriculum.

Answer 34

I'm sorry, we cannot provide examples.

Question 35

If not a current contractor, can a in training proposal be utilized?

Answer 35

If chosen as a provider, it's the provider agency's responsibility to develop a training plan for staff.

Question 36

Does the national caregiver program 1-hour time mean allotted time for each client through AHDD?

Question 36

The Provider Authorization from the Area Agency will note the hour(s) of services to be rendered during each visit.

Question 37

Should the form in the attachment be included in our application as supporting evidence as to why we have no 990s? Additionally, will the bank reference letter, the two vendor reference letters, and our last two years of non-audited income statements suffice as documentation supporting our financial soundness?

Since our inception, for the past 10 years we have operated as a debt free organization. The only debt we ever acquired was in 2017 when the business took out a loan for around \$21,000 to purchase a 2017 Kia for our office manager as a gift for her outstanding contributions to our organization. I thank you for your consideration of these questions.

Answer 37

If the attached document is in the name of the organization you will be applying as, the year is legible and the document is current it will suffice.

The documents listed below are required. If you don't have them you should send what you have and a decision will be made as to whether they are sufficient.

- IRS tax reporting forms/tax return is appropriate for the submitting organization and
- a bank reference in a standard business letter, indicating that the applicant's business relationship with the financial institution is in positive standing received dated bearing a date within the past six months; and
- two current positive credit references in the form of standard business letters bearing a date within the past six months from vendors with which the applicant has done business; or
- documentation of a positive credit rating by accredited credit bureau in the last six months.

Question 38

Should the Cover Letter be on separate attachment or could it be on application under specific number?

Answer 38

The Cover letter is separate. Its's generally the first document in a packet.

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Serving: City of Memphis Shelby County Fayette County
 Lauderdale County Tipton County