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2.1 PURPOSE

This funding opportunity invites grant applications requesting funding for the TTF Program. The purpose of this program is to promote childbirth and pregnancy, and support families by operating a support network statewide that provides community outreach, consultation, and care coordination for women with an unexpected pregnancy, which includes prenatal, perinatal, and postnatal services. In accordance with Texas Health and Safety Code Chapter 54, the TTF Program:

- A. Promotes healthy pregnancy and childbirth;
- B. Promotes childbirth as an alternative to Abortion;
- C. Increases access to resources that promote family and child development;
- D. Encourages family formation;
- E. Helps parents establish and implement successful parenting techniques;
- F. Increases the number of families who achieve economic self-sufficiency; and
- G. Provides a Local Approach and personalized support to pregnant women to promote childbirth in all instances of pregnancy.

2.5 ELIGIBLE ACTIVITIES

This grant program may fund activities and costs as allowed by the laws, regulations, rules, and guidance governing fund use identified in the relevant sections of this RFA. Only grant-funded activities authorized under this RFA are eligible for reimbursement and payment under any Grant Agreement awarded as a result of this RFA.

- A. All Proposed Projects must include the provision of at least one of the following services:
 - 1. Counseling and mentoring on pregnancy, education, parenting skills, adoption services, life skills, and employment readiness topics;
 - 2. Care coordination for prenatal, perinatal, and postnatal services, including connecting Clients to health services;
 - 3. Educational materials and information about pregnancy, parenting, and adoption services;
 - 4. Referrals to governmental and social service programs, including childcare, transportation, housing, and state and federal benefit programs;
 - 5. Classes on life skills, personal finance, parenthood, stress management, job training, job readiness, job placement, and educational attainment;

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6. Provision of supplies for infant care and pregnancy, including car seats, cribs, maternity clothes, infant diapers, and formula; or
 7. Housing services, which includes Housing navigation, Housing advocacy, and Housing through maternity homes.
- B. Grantee or its Service Provider participating in the program is not required to provide all services listed under this section.
 - C. Grantees are required to provide referral services as listed in coordination with any other service provided by the Grantee.
 - D. Grantee or its Service Provider must ensure services are provided directly to Clients in convenient and accessible location(s) or in a manner that best meets the client's needs, including virtual or telephonic methods.
 - E. Grantee or its Service Provider may provide Client services on an individual basis or in a group setting.

Refer to **Section 2.6.6, Delivery of Client Services, and Appendix A, Data Element Guide Thriving Texas Families Program** for complete descriptions of service types.

2.6 PROGRAM REQUIREMENTS

All Grant Projects funded under this RFA must meet the following Program requirements:

- A. Provide at least one of the services identified in **Section 2.5, Eligible Activities**. Services may be provided through a subcontracted service model.
- B. Referrals as a service, is required in addition to any other service selected.
- C. Comply with all Texas Health and Safety Code Chapter 54 requirements.
- D. Use a Local Approach and personalized support for clients served under the project.
- E. Foster a caring and supportive environment that focuses on the needs of the client.
- F. Target at least one of the populations identified in **Section 2.3, Eligible Population**.
- G. Align with the TTF services as described in **Section 2.5, Eligible Activities** with TTF outcomes as described in **Exhibit J, Goals and Outcomes**.
- H. All services provided under the proposed project must be delivered to each client by a qualified care coordinator. Qualified care coordinators may include, but are not limited to, registered nurses, licensed counselors, individuals with degrees in a related social services field, or certified community-health workers, or other individuals with applicable experience. Grantee must determine minimum requirements, including education and experience, and have a policy describing how the Grantee defines a “qualified care coordinator.”

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2.6.1 Assessment Activities

It is HHSC's priority that services are available to clients and that programs prioritize providing services. As part of program assessment and evaluation, HHSC requires that all Grantees and Service Providers perform the following assessment activities. It is always the intention that any assessment data and program data collected is used to improve the services to our clients. To ensure data collection meets this purpose, HHSC always encourages feedback from Grantees on the assessment activities and associated data collection. Grantees must ensure consent of the client prior to any pre or post assessment and must comply with the terms of **Exhibit F, HHS Data Use Agreement v.8.5.**

- A. A standardized Client intake process and tool that assesses the needs of Clients; and includes all required reporting elements as outlined in **Appendix A, Data Element Guide Thriving Texas Families Program.**
 - 1. Intake process and tool must include the collection of the following:
 - a. Client's age at intake;
 - b. Client's marital status at intake;
 - c. Client's income level at intake;
 - d. Client's highest level of education at intake; and
 - e. Client's employment status at intake.
- B. The HHSC standardized non-medical drivers of health screening process requires the TTF Grantees or Service Providers to inform Clients about the type of data that will be collected during the screening, the purposes for which the data will be used, and that the collected data will become part of the Client's medical record or service plan. See **Appendix B, HHSC Approved Non-medical Drivers of Health Assessment Questions.** Additionally, the Grantee must obtain the Client's informed consent before performing the screening and inform the Client that:
 - 1. They have a right to decline the screening or services or choose to discontinue the screening or services at any time; and
 - 2. Declining or discontinuing the screening or services will not result in retaliatory action against the Client in the provision of other services.
- C. Develop a service plan for each Client based on their individual needs. Services must be driven by the Client's self-identified needs and achieve the program's purpose to promote childbirth and pregnancy and support families.
- D. Grantees will be required to collect the following data as Client's are transitioning out of the program:
 - 1. Client's marital status;
 - 2. Client's income level;
 - 3. Client's highest level of education; and

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4. Client's employment status.

The assessment must include all other reporting elements as outlined in **Appendix A, Data Element Guide Thriving Texas Families Program.**

2.6.5 Project Database

- A. Grantee must maintain a secure database for all Project Activities, including, but not limited to, the Clients served, services delivered directly to Clients, outcomes related to Clients, needs assessment, non-medical drivers of health screening questions, post assessments, and related costs by Sub-Grantee. Refer to **Appendix A, Data Element Guide Thriving Texas Families Program; Appendix B, HHS Non-Medical Drivers Health Assessment;** and **Exhibit J, Goals and Outcomes** for additional information on these requirements.
- B. The information included in the Project Database must include at a minimum, the elements required to be reported in **Section 2.7.1, Monthly Reports** and in compliance in a manner required by System Agency.
- C. The Grantee must assign all Clients a unique identifier. The Grantee may collect the Client's social security number, protected health information, or other personally identifiable information; however, it may not be used as the unique identifier.
- D. The Grantee must maintain compliance with the TTF Data Element Guide and the Data Use Agreement, included in this RFA as **Exhibit F, HHS Data Use Agreement v8.5,** along with any subsequent revisions.

2.6.7 Communication and Outreach

- A. Grantees must develop and implement comprehensive communication and Outreach strategies to make the public aware of the program, services provided, and how to access services.
- B. Grantees will be required to submit annual Communication and Outreach plans. All Communication and Outreach activities must be conducted in accordance with the approved plan.
- C. All communication and outreach strategies must meet the following requirements:
 - 1. HHSC's review of any Grantee communication, media (specifically related to the Grant Agreement and/or services only) and outreach materials is to ensure they align with the purpose of the program. Reviews are not intended to result in remedial or corrective actions.
 - 2. Communication and outreach activities that include, but are not limited to:

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- a. Outreach to other county social service programs to enhance awareness and collaboration.
- b. Involvement in community capacity building, such as participation on community coalitions that support services for pregnant women and their families.
- c. Development and maintenance of a Project-specific website.
 - i. Grantee must submit operational links for the Project-specific website for HHSC written approval within 30 Calendar Days of Contract execution and prior to publishing. The approved website must be fully operational (active and accessible to potential Clients) within 90 Calendar Days following Contract execution.
 - ii. Alternatively, Grantee may use Project funds to develop a Project-specific website throughout the duration of the Grant Agreement. Grantee must submit operational links for the Project-specific website to HHSC for review and written approval prior to publishing.
 - iii. Project-specific website must meet federal, state, and local laws for accessibility standards.
 - iv. Grantee may not include any content on the Project-specific website that HHSC has not approved in writing.
 - v. If HHSC declines to approve all or part of the Project-specific website, Grantee must resubmit for approval based on HHSC guidance.
 - vi. Upon termination of the Grant Agreement, Grantee must transfer or dissolve the website domain.
3. All materials developed or used by Grantee as part of this Grant are the property of HHSC.
4. Grantee must submit Project-specific informational or educational materials for HHSC written approval prior to public distribution.
 - a. If HHSC declines to approve all or part of any Project-specific informational or educational materials, Grantee must resubmit for approval based on HHSC guidance.
 - b. Educational and informational materials may not be utilized by the Grantee until such time as it has received written approval.
5. Grantee must ensure that all informational or educational materials are available, at a minimum, in both English and Spanish.
6. Grantee must ensure materials available to Clients with limited English proficiency are available in languages other than English based on the individual need of the Client.
7. Grantee must ensure that informational or educational materials do not contain any prohibited activities as specified in the RFA, such as information promoting Abortions.
8. Grantee and its Service Providers may use HHSC approved social media content to promote the TTF program on social media platforms. Grantee and its Service Providers may not promote the TTF program and its services on TikTok, CamScanner, WeChat,

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WeChat Pay, or any subsequently prohibited platform as determined by HHSC.

D. Client educational and information materials must meet the following requirements:

1. Educational material must include some evaluation, such as pre-test/post-test or other method to measure impact.
2. Educational materials provided must support the purpose of the TTF program and contain content, which is based on gaining knowledge, competencies, and skills.
3. Grantee must provide, at each location where Clients receive services, materials on Medicaid, CHIP, SNAP, TANF, WIC, ECI, NFP, HTW, FPP, FVP, PHC, Title V: Maternal and Child Health Fee for Service Program and the Healthy Marriage Program.
4. Grantee must ensure that all client informational material and grievance policies include the HHSC Office of the Ombudsman's contact information and complaint language listed below:

If you have a complaint that is not resolved to your satisfaction, you can contact the HHS Office of the Ombudsman by calling 1-877-787-8999, selecting a language, and then Option 0, or by making an online submission at <https://hhs.texas.gov/about-hhs/your-rights/office-ombudsman>.

2.6.10 Sub-Contracting Criteria

- A. Grantees must establish policies and procedures that detail continuous collaboration with subcontractors. Policy and procedures must include specific information regarding the responsibility of the Grantee to provide support and oversight to the subcontractor. Subcontractor roles and responsibilities must be clearly defined prior to the subcontractor providing TTF services. Grantees must develop measurable performance metrics or verifiable processes to track subcontractors' quality performance and identify areas for improvement. Grantees must maintain thorough documentation, including comprehensive records that demonstrate effectiveness and compliance with the TTF program throughout the project.
- B. Policies and procedures must address:
 1. **Fiscal and Programmatic Oversight** – Quality control measures.
 2. **Authority** – Clear and concise information on designations of authority for the System Agency, the Grantee, and the subcontractor.
 3. **Reporting** – Timely and accurate reporting of all required data, demographic and fiscal information.
 4. **Monitoring** – Regular inspections to review performance, identify potential issues and rectify those issues promptly and effectively. Onsite monitoring must occur with each subcontractor each fiscal year.

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- C. If Grantee is utilizing a subcontractor model, Grantee must develop and maintain a network of eligible county-based Service Providers. Service Providers, at a minimum, must:
 - 1. Hold nonprofit status;
 - 2. Have a minimum of one year of operational experience providing direct client services for pregnant women and families;
 - 3. Have a demonstrated understanding of the Health and Human Services Commission programs available to pregnant women, families, and their children, and be able to connect Clients to services;
 - 4. Have as a fundamental part of its mission a commitment to promoting childbirth;
 - 5. Have adequate accessible space to ensure private and confidential Client assessment and counseling;
 - 6. Not charge fees for services provided; and
 - 7. Have a documented process for Client intake, the continuum of care, Client satisfaction, and complaints that meets the requirements of this RFA.
- D. Grantee must screen and enroll Service Providers necessary to maintain a qualified service delivery network. Grantee must ensure all Service Provider staff are fully oriented and trained prior to their participation in the project.
- E. Grantee must provide ongoing training and oversight of Service Providers to ensure compliance with program requirements. Specific training requirements are outlined in **Section 2.5, Eligible Activities**.
- F. Grantee must ensure Service Provider meets all the requirements of this RFA. Grantees delivering services through a subcontracted service model may provide services directly, in addition to contracting with Service Providers.

5.5 PAYMENT METHOD

Any Grant Agreement awarded under this RFA, or any subawards/subcontracts made to Service Providers as a result of any Grant Agreement will be funded on a cost reimbursement basis for reasonable, allowable, and allocable Grant Project direct costs.

Under the cost reimbursement payment method, Grantee and its Service Providers are required to finance operations and will only be reimbursed for actual, allowable, and allocable costs incurred monthly and supported by adequate documentation. No additional payments will be rendered unless an advanced payment is approved. Grantee and its Service Providers are required to maintain, and provide to HHSC upon request, which supports the actual costs for expenditures under the grant.

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Under a cost reimbursement model, Grantees and subcontractors are reimbursed for actual and allowable costs related to delivering the program, which may include items such as, staff salary and wages, staff fringe benefits, supplies needed to administer the program and provide services, travel costs related to administering the program and providing services, rent and utilities, equipment such as computers, copiers, and phones, data and financial management systems, and other related costs.

In order to avoid service disruption and prioritize client services, Awarded Grantees may qualify for a Grant Project implementation period of at least one year. During this time, System Agency will work with Awarded Grantees to comply with certain operational requirements under this RFA, such as implementing and complying with a cost reimbursement business model. Grantees will not be subject to remedial or corrective actions for inability to meet operational requirements during the implementation period, provided the Grantee is actively working on implementation of requirements.

10.1 FINAL SELECTION

After initial screening for eligibility and Application completeness, and initial evaluation against the criteria listed in **Section 9.4, Evaluation Criteria**, the System Agency may apply other considerations such as program policy or other selection factors that are essential to the process of selecting Applications that individually or collectively achieve program objectives. In applying these factors, the System Agency may consult with internal and external subject matter experts. The funding methodology for issuing final Grant Agreements will include the following identified factors:

- A. Program design aligns with TTF Services and Outcomes;
- B. Applicant background and experience; and
- C. Proposed client population and services align with Texas Health and Safety Code, Chapter 54.

The System Agency will make final funding decisions based on Applicant eligibility, evaluation rankings, the funding methodology above, geographic distribution across the state, state priorities, reasonableness, availability of funding, cost-effectiveness, and other relevant factors. In accordance with Texas Health and Safety Code, Section 54.002(d), the System Agency shall, to the extent practicable, contract with previous Grantees and subcontractors, who have a history of working with the System Agency in programs similar to the former Alternatives to Abortion Program. Priority may also be given to organizations that operate as a pregnancy support center, adoption assistance provider, or a maternity home.

All funding recommendations will be considered for approval by the HHSC Program Deputy Executive Commissioner, or their designee.