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Respondent Conference

**DFPS Community-Based Care Single Source
Continuum Contractor**

Catchment Areas 6A, 6B, 8A and 10

RFA No. HHS0013421

March 8, 2024, at 10:00 A.M. CT

Agenda



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1. Introductions
2. Housekeeping Items
3. Project Overview & Scope
4. Funding Stream Updates & Tracking
5. Grant Term
6. Program Requirements & Allowable Activities
7. Prohibitions
8. Closing Comments

Introductions

Speakers

- **John Norton, Grants Specialist**
Sole Point of Contact for RFA
Health and Human Services Commission (HHSC) Procurement
and Contracting Services (PCS)
- **Dominique Wright, Contract Administration Manager, Office**
of Community-Based Care Transition



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Procurement Roles

Procurement Team

- Health and Human Services Commission (HHSC) Procurement and Contracting Services (PCS) is responsible for all procurement and solicitation activities.
- The Office of Community-Based Care Transition is responsible for contract management activities throughout the life of the Grant Agreements including, contract development, execution, and monitoring.
- The Office of Community-Based Care Transition is responsible for project scope, requirements, performance, results, and monitoring.



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Schedule of Events

Deadline for Submitting Questions

March 15, 2024, by 5:00 P.M. CT

Any questions arising prior to the question deadline must be submitted in writing to John.Norton2@hhs.texas.gov

Tentative Date Answers to Questions Posted

Estimated: *March 29, 2024*

Deadline for Submission of Solicitation Applications

May 1, 2024, by 10:30 A.M CT

Anticipated Grant Agreements Start Date

September 1, 2024



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Solicitation Access

HHSC will post all official communication regarding this RFA on the following website, including the notice of award:

- The HHS Grants website is located at:
<https://resources.hhs.texas.gov/rfa/hhs0013421>

HHSC reserves the right to cancel this RFA, or to make no award if it determines such action is in the best interest of the State.

HHSC may, in its discretion, reject any and all applications or portions thereof.



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Sole Point of Contact

- All communications relating to this RFA must be directed in writing to John Norton, Sole Point of Contact at John.Norton2@hhs.texas.gov.
- All communications between applicants and HHSC staff members, or any other HHS staff members, concerning this RFA are **strictly prohibited**.
- Failure to comply with these requirements may result in application disqualification.



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Community-Based Care (CBC) RFA Overview

1. Background
2. Purpose
3. Eligible Applicants
4. Exhibit I-Statement of Work
5. SSCC Model Assumptions
6. Executive Summary of Program
7. Available Funding
8. Major Deliverables
9. Performance Measures
10. Cost Proposals
11. Grant Term



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Background

1. Current system structure does not encourage establishment of services where they are needed and very few providers offer the full continuum of services.
2. As a result, some children must move to locations (outside of their home communities) and too often must change placements as a result of a change in service needs.
3. In 2010, DFPS joined other stakeholders to develop recommendations for a redesigned foster care system that supports improved outcomes for children, youth and families.
4. The Public Private Partnership (PPP) representing various stakeholders served as the guiding body to develop recommendations for redesigned foster care system.



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Background Cont.

1. Change the way DFPS procures
 - A. From open enrollment to competitive procurement.
 - B. Not all current DFPS contractors will continue to serve children in DFPS conservatorship and their families in the redesigned system.
2. Change the way DFPS contracts
 - A. From effort-based contracts to performance-based contracts.
 - B. Financial incentives and disincentives for permanency.
 - C. Additional performance measures for well-being.
 - D. A single contract to provide all substitute care and case management services for children, youth and families in a designated catchment area.
3. Change the way DFPS pays the provider of services
 - A. From multiple rates to a single blended rate.
 - B. De-link service levels from rates.
 - C. Separate allotment of funds for other services to children in foster care and their parents and families.



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Purpose

1. PCS will contract for Community-Based Care which is a new way of providing foster care and case management services. It is a community-based approach to meeting the individual and unique needs of Children, Youth, and Families.
2. Within a Designated Catchment Area (DCA), a single contractor (officially a Single Source Continuum Contractor or SSCC) is responsible for finding foster homes or other living arrangements for children in state care and providing them a full continuum of services.



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Eligible Applicants

Section 2.5 Eligible Applicants

2.5.1 Minimum Qualifications of the SSCC (Stages I-III):

The Applicant must have the following licensing and service experience:

1. Contractor must obtain and maintain a separate HHS Child Placing Agency (CPA) license for its SSCC Contract within the proposed community, if awarded this Contract;
2. The SSCC must have experience in delivering residential child-care and treatment services to Children and Youth in Foster Care; and
3. The SSCC must be licensed as a Child Placing Agency (CPA) to provide Foster Care services by HHSC Residential Childcare Regulation and must not be on probation under its CPA license as of the Proposal due date.



Eligible Applicants

Section 2.5 Eligible Applicants

2.5.2 Entity Qualifications:

1. The SSCC must be a nonprofit entity that has an organizational mission focused on child welfare or a governmental entity;
2. The SSCC may be an in-state or out-of-state entity; however, the SSCC must be an HHS licensed CPA with a majority of the entity's board members residing in Texas. In accordance with Texas Family Code 264.154; DFPS will consider the extent to which an SSCC Applicant has experience providing services to Children, Youth, and Families in the proposed community;
3. The SSCC may be a single entity or submit a proposal through the formation of a consortium of providers, which may include itself. If a consortium applies proposal under this RFA, one provider must act as the consortium's lead in directly contracting with DFPS; and
4. DFPS will not contract with any provider for more than two (2) SSCC Contracts, except in instances where DFPS requires an SSCC to implement a Turnover plan.



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Eligible Applicants

Section 2.5 Eligible Applicants

2.5.3 Non-profit and Governmental Entities:

Governmental entities or community-based nonprofit that have an organizational mission focused on child welfare services, and that meet the qualifications in Section 2.5.1, Minimum Qualifications of the SSCC (Stages I-III), and Section 2.5.2 Entity Qualifications, are eligible to apply and must complete **Form B-1, Governmental Entity, Authorized Officials**, or **Form B-2, Nonprofit or Nonprofit Entity, Board of Directors and Principal Officers**, if applicable.



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SSCC Model Assumptions

The SSCC may deliver all services outlined in Stages I-III as a single entity or through the formation of a network or consortium of providers, which may include itself. DFPS will only contract with the SSCC. The SSCC must establish and maintain any network or consortium of services in the identified Designated Catchment Area through subcontracts, community resources and/or service agreements.

The SSCC cannot subcontract out any child welfare legal case management duties described in this contract. All legal case management requirements must be performed by casework employees of the SSCC.

All SSCC and DFPS decisions will be made based on the best interests of the individual child.



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Available Funding

- DFPS expects to award one (1) Contract for each Designated Catchment Area listed under this RFA for Region 6A, 6B, 8A and 10 as DFPS funding allows. DFPS Regions as listed in **Section 2.2, Community Service Areas**.
- Funding information is based on legislative appropriations and service areas. This information will be provided in **Exhibit C-1** through **C-4, Funding Matrix** for each catchment area as an estimate.
- DFPS may adjust and prorate actual award amounts at the time of execution based on start dates. For additional funding information please see Section 6.1.2 of this RFA.



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Executive Summary of Program

Department of Family and Protective Services (DFPS) has identified the need to provide community-based care services in a proposed community that includes support services to all children and families that support safety, permanency, and well-being of children in its legal conservatorship.

DFPS sees a service delivery model that fully engages communities in serving children, youth, and families provided through a performance-based Single Source Continuum Contract (SSCC) as the approach that can most effectively meet this need in a manner that achieves improved outcomes for children in its conservatorship.

The SSCC provider must ensure the full continuum of substitute care (foster and kinship care), purchased services, case management and reunification services for children and youth in DFPS legal conservatorship from the designated geographic proposed community, those placed in the proposed community through the Interstate Compact on the Placement of Children (ICPC), and through interregional agreements.



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Exhibit I: Statement of Work

DFPS views a service delivery model that fully engages communities in serving children, youth, and families and that is provided through a performance-based Single Source Continuum Contract (SSCC), as an approach that can most effectively meet this need in a manner that achieves better outcomes for children in its conservatorship.



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Exhibit I: Statement of Work

Section 2.03-2.06 Staged Implementation

1. Outlines three stages of implementation including anticipated time frames for progression between stages.
2. Includes requirements of the SSCC and explanation of how DFPS will reimburse (paid foster care services), pay (purchased client services allocation) and negotiate with (case management) the SSCC in each Stage of Implementation.



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Exhibit I: Statement of Work

Section 2.09 Eligible Population

In Stages I - III, the SSCC must ensure the full continuum of paid Foster Care and services for Children, Youth, and Young Adults referred by DFPS. In Stages II - III, the SSCC must ensure the full continuum of Substitute Care (paid Foster Care and Kinship Care), Case Management, Family Reunification and Purchased Client Services for the Children, Youth, Young Adults, Family members and Caregivers referred by DFPS.



Exhibit I: Major Deliverable #1

Section 2.13 Major Deliverable # 1 - Achievement of Service Objectives/Quality Indicators:

The SSCC must perform the development, operation, oversight, and provision of the full continuum of Substitute care, Case Management and Purchased Client Services in a manner that provides services in the least restrictive, most family-like setting appropriate for the child or youth, which reduces the number of moves a child or youth must make while in care, and engages communities to assist children and youth in achieving safety, permanency, and well-being, specifically, the service objectives inherent in the following quality indicators.



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Exhibit I: Major Deliverable #1

Section 2.13 Quality Indicators:

1. The safety of children in their placements;
2. The placement of children in each child's home community;
3. The provision of services to children in the least restrictive environment possible and, if possible, in a Family home environment;
4. Minimal Placement Changes for children;
5. The maintenance of contact between children and their families and other important persons;
6. The placement of children with siblings;



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Exhibit I: Major Deliverable #1

Section 2.13 Quality Indicators:

7. The provision of services that protect each child's culture;
8. The preparation of children and youth in foster care for adulthood;
9. The provision of opportunities, experiences, and activities for children and youth in foster care that are available to children and youth who are not in foster care;
10. The participation by children and youth in making decisions relating to their own lives;
11. The reunification of children with the biological parents of the children when possible; and
12. The promotion of the placement of children with relative or Kinship Caregivers if reunification is not possible.



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Exhibit I: Major Deliverable #2

Section 2.14 Major Deliverable #2 - Development and Management of a Continuum of Care and Service Delivery Model

This section includes minimum requirements related to:

- 1.SSCC model and staged implementation;
- 2.Start-up period in Stage I and II;
- 3.Administrative Management of continuum of care;



Exhibit I: Major Deliverable #2

- 4.SSCC Management Plan;
- 5.SSCC Community Engagement Plan (CEP);
- 6.Joint Operations and Operations Manual development;
and
- 7.SSCC Provider Manual.



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Exhibit I: Major Deliverable #2

Section 2.15 Continuum of Substitute Care and Purchased Client Services.

The SSCC must build and maintain the infrastructure necessary to support the full continuum of substitute care and purchased client services for all children originating from the designated geographic Catchment area, including at a minimum:

1. Joint SSCC and Legacy Placement (Stage I);
2. Coordinated Purchased Client Services (Stage II – III); and
3. Case Management Services (Stage II – III).



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Exhibit I: Major Deliverable #2

Section 2.16 Foster Care Placement Capacity

The SSCC must have the ability to build and manage available foster care capacity in the Catchment area to increase the likelihood that children are placed in their home communities.

This section outlines the:

1. Population of children/youth who will be referred to the SSCC during Stages I and II; and
2. Negotiation process to preserve placement capacity in the Designated Community Area.



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Exhibit I: Major Deliverable #3

Section 2.17 Major Deliverable #3 Compliance with General Requirements of the SSCC:

1. Accountability standards for the SSCC; and
2. Legal and regulatory requirements of the SSCC.

Section 2.18 Cultural Competency

Outlines SSCC cultural competency requirements related to service provision, composition of SSCC workforce and efforts to address disparities in the catchment area.



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Exhibit I: Major Deliverable #4

Section 2.19 Major Deliverable #4 - Placement Services and Services to Children /Youth/ Young Adults

Includes SSCC and DFPS roles, time frames and requirements associated with SSCC provision of substitute care placement and services (Stages I-III), including:

1. SSCC parameters for recommending a medical consenter (Chart 1);
2. Applicable requirements and best practice considerations when recommending placements;
3. Placement Referral Types;
4. Child/Youth sexual behavior problems, victimization, and aggression considerations;
5. Required Notifications related to the Child;
6. No-Pay Placement Providers; and
7. Sub-acute and Exceptional Care.



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Exhibit I: Major Deliverable #4

Chart 2: Placement Referrals Stage I-II

During Stage II and Stage III DFPS will continue to make referrals for emergency placements and the SSCC will assume all substitute care placement (kinship, reunification, non-DFPS paid and paid foster care) and service planning, coordination and delivery duties as a part of case management responsibilities.

Please note: Continuous 24-hour supervision requirements.



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Exhibit I: Major Deliverable #4

Section 2.21 Child/Youth Assessment/Service Planning Section (Stage I-III) includes:

1. DFPS and SSCC responsibilities, timeframes, documentation and sharing of information;
2. SSCC requirements related to the implementation of CANS assessment, complaint process for children, youth and families, and documentation; and
3. Service planning model assumptions (Stage I).



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Exhibit I: Major Deliverable #4

Section 2.21 Child and Youth Service Planning Chart 3 Section describes DFPS and SSCC roles, responsibilities, & documentation requirements (Chart 3):

1. At Referral
2. ICM Meeting
3. Service Planning
4. Visitation Planning
5. Audit Monitoring
6. Discharge Planning
7. During Stage II and Stage III, DFPS will continue to provide oversight and monitoring functions and the SSCC will assume all planning, coordination and delivery duties as a part of case management responsibilities.



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Exhibit I: Major Deliverable # 4

Section 2.22 Child's Physical & Behavioral Health Needs (Stage I):

1. The Chart 4 Section describes DFPS and SSCC roles, responsibilities, & documentation requirements related to ensuring children and youth's physical & behavioral health needs are met. Please Note: standard medical screening for each child at removal within 3 business days – does not replace TX Health Steps check-up or CANS within 30 days of removal; and
2. During Stage II and Stage III DFPS will continue to provide oversight and monitoring functions and the SSCC will assume responsibility for all duties related to meeting the children's (kinship and paid foster care) physical & behavioral health needs as a part of case management responsibilities.



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Exhibit I: Major Deliverable #4

Section 2.23 Transitional Living Services (Stages I-III):

1. Chart 5—Describes DFPS and SSCC roles, responsibilities, & documentation requirements related to providing Transitional Living Services to youth.

Please Note: new standards for the annual independent living skills assessment; and

2. During Stage II and Stage III, DFPS will continue to provide oversight and monitoring functions and the SSCC will assume responsibility for all duties related to transitional living services, including, but not limited to, coordination and provision of the Education Training Voucher to eligible youth and young adults as a part of case management responsibilities.



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Exhibit I: Major Deliverable #4

Section 2.24 Adoption (Stages I-III):

Chart 6—Section describes DFPS and SSCC roles, responsibilities, & documentation requirements related to providing adoption services to children and youth.

During Stage II and Stage III, DFPS will continue to provide oversight and monitoring functions and the SSCC will assume responsibility for all duties related to adoption services, including, but not limited to the provision of post-adoption services as a part of case management responsibilities.



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Exhibit I: Major Deliverable #4

Sections 2.26 Stages I-II: Outlines the DFPS and SSCC court requirements in each stage of implementation.

Chart 7—describes Stage I DFPS and SSCC roles, responsibilities & documentation requirements related to court activities.

Chart 8—describes Stage II DFPS and SSCC roles, responsibilities & documentation requirements related to court activities.



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Exhibit I: Major Deliverable #5

Section 2.27 Major Deliverable #5 – Case Management (Stages II-III):

The SSCC will assume responsibilities for all Stage I activities, as well as provide case management services, including any that are legally required by courts or provide input as required by the courts, to a child, or to the child's family, a young adult in extended foster care, a relative or kinship caregiver, those placed in the Catchment area through Interstate Compact on the Placement of Children (ICPC) and through inter-regional agreements.



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Exhibit I: Major Deliverable #5

Chart 9—DFPS and SSCC roles, responsibilities & documentation requirements related to referring a child and family for case management services.

Chart 10—DFPS and SSCC roles, responsibilities & documentation requirements related to kinship services:

1. SSCC providing case management of children, kinship caregivers, and families.
2. DFPS providing necessary oversight measures and review processes to maintain compliance with federal and state requirements.
3. SSCC promoting placement of children with relative or kinship caregivers.



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Exhibit I: Major Deliverable #5

Chart 11—SSCC responsibilities for conducting and documenting visits with the child, caregiver and family:

1. Contacting parents who are incarcerated; and
2. Courtesy supervision for children and family members residing in the catchment area when legal case is in another area.



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Exhibit I: Major Deliverable #5

Chart 12—DFPS and SSCC roles, responsibilities & documentation requirements related to child and family services planning.

DFPS monitoring and assessing services to ensure compliance with federal and state requirements:

1. SSCC assumption of all court duties; and
2. SSCC coordinating and facilitating all service & permanency planning meetings



Exhibit I: Major Deliverable #5

Section 2.32 Sample Array for Family Services

Chart 13—provides examples of services previously delivered to families served by DFPS.

The SSCC will not be limited to providing only the services listed below and inclusion of this table is not meant to imply the availability of funds for each of these services.



Exhibit I: Major Deliverable #5

Chart 14—DFPS and SSCC roles, responsibilities & documentation requirements related to family reunification services:

1. DFPS providing necessary oversight measures and review processes to maintain compliance with federal and state requirements;
2. SSCC reunifying children with their parents when possible; and
3. SSCC providing family reunification support services after a child is returned to his/her family.



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Exhibit I: Major Deliverable #5

Section 2.34 SSCC Fiscal Requirements Outlines:

1. Financial policy, procedures, system and audit requirements of the SSCC;
2. Includes time frames for SSCC submission of financial information;
3. Lists state and federal laws, restrictions and regulations the SSCC must follow when providing services as a part of the contract; and
4. Requires and lists information to be included in SSCC accounting policy manual.



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Exhibit I: Major Deliverable #5

Section 2.35 Required Reports: The SSCC must ensure compliance with report requirements outlined in the SSCC contract and HHSC Residential Child-Care Minimum Standards.

Within each deliverable there are multiple plans, processes and procedures that must be addressed in the response to the RFA.



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Exhibit I: Article III Utilization and Compensation

Sections 3.01 – 3.15 Utilization and payment methodologies are outlined in this section and Exhibit C for each Stage and type of service:

1. Much of the funding is contingent on legislative appropriations, and are currently listed in Exhibit C; and
2. SSCC must ensure that services offered as a part of purchased client services allocation meet federal guidelines.



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Exhibit I: Article IV Start-Up Requirements

Sections 4.01 – 4.06 Start-Up Requirements:

1. The scope of work for the Startup Period of the Contract, which includes those activities that must take place between the time of Contract award and the Operational Start Date; and
2. The Startup Period will include a Readiness Review of the SSCC, which must be completed successfully prior to the SSCC's Operational Start Date.



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Exhibit I: Article V Operations Readiness

Sections 5.01 – 5.03 Operations Readiness:

1. SSCC clearly defining and documenting the policies and procedures that will be followed to support day-to-day business activities, including coordination with subcontractors and/or other network providers;
2. SSCC responsibility for developing and documenting its approach to quality assurance; and
3. DFPS or its designee will conduct a Readiness Review prior to the Operational Start Date for Stage I and again prior to implementation of Stage II and case management services.



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Exhibit I: Article V Operations Readiness

Section 5.02 Capacity Sharing Plan

As part of readiness and implementation, the SSCC must maintain a revised, DFPS approved, plan titled as Capacity Sharing Plan that includes but not limited to the following information:

1. Provide your organization's assessment of the current paid foster care capacity in the Designated Catchment Area. Provide the method used for any assessment and/or engagement activities. Include the assessment methods used, or that may be used, to evaluate the quantity and quality of capacity currently available statewide;
2. Provide your organizations assessment of any gaps in paid foster care capacity in the Designated Catchment Area and statewide, that includes all methods used for the assessment and/or engagement activities;



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Exhibit I: Article V Operations Readiness

Section 5.02 Capacity Sharing Plan (cont.)

3. Provide the method used for maintaining the ability to share capacity statewide amongst the SSCCs and to accept referrals from DFPS, for paid foster care every single day of the year, including nights and holidays;
4. Describe the plan to accept all referrals for paid foster care (No Reject) made by DFPS and continue to meet the individual needs of Children referred (No Eject) until DFPS determines the individual is no longer eligible for the SSCC services (Stage I); and
5. The plan must be made readily available to DFPS upon request for review, modifications and/or approval.



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Exhibit I: Article VI Turnover Requirements

Sections 6.01 – 6.05 Turnover Requirements

Definition of Turnover: activities that the SSCC is required to perform prior to or upon termination of the Contract, in situations where the SSCC will transition data and documentation to DFPS or a subsequent contractor.

SSCC Turnover Plan:

1. SSCC Transfer of Data and Information to DFPS;
2. Turnover Services; and
3. Post-Turnover Services.



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Exhibit H - Performance Measures

Goal	Performance Measure
Safety in Paid Care	Children/youth are safe from abuse and neglect.
Placement Stability	Children/youth have stability in their placements.
Home Setting	Children/youth are placed in the least restrictive environment.
Maintaining Connections (Proximity, Siblings, Kin at 60 Days)	Children/youth are placed in their home communities.
	Children/youth are placed with their siblings.
	Children/youth are placed with kin.*
Preparation for Adulthood (ID / Driver's License, PAL at 18 years old)	Youth aged 16 and older obtain a driver's license or Texas identification card.
	Youth turning 18 complete Preparation for Adult Living (PAL) training.
CPS Reinvolvement *	Children who exit to permanency and have a new CPS intervention with 12 months from exit.
Timely Exits to Permanency*	Children exit to permanency within 12 months of entering care.
	Children exit to permanency within 18 months of entering substitute care.



RFA: Cost Proposal

Stage I and Stage II Operation Budget Proposal

Respondent must develop and submit a budget proposal for a daily per diem case management rate and methodology in support of its proposed Stage I & II services associated with child placement, conservatorship services, kinship home development and maintenance, reunification and case management services. Respondent must include sufficient documentation to support the proposed daily case management rate. The case management days are forecasted for each fiscal year by Designated Community Area. Respondent must label the cost proposal for a daily per diem case management rate as "Exhibit F" and included with Respondent's application. See Exhibit I, Statement of Work, Section 3.05.



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RFA: Cost Proposal

Cost Proposal Purchased Client Services

Respondent must develop and submit a cost proposal for purchased client services (PCS) that includes payment methodologies and applicable fee schedules for services offered through the use of PCS funding allocations. Fees charged to DFPS must be reasonable and comparable to those for similar services in the ordinary course of business within the Designated Community Area. Respondent must label the cost proposal for purchased client services as "Exhibit G" and include with Respondent's application. See Exhibit I, Statement of Work, Sections 3.05 and 3.14 (C) and Chart 13 Sample Service Array.



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Grant Term

RFA Section 2.4.2-Term: DFPS will make one grant award for each designated catchment area as DFPS funding allows and implemented in the order determined by DFPS. The initial Contract period will begin upon contract signature and last sixty (60) months. At its sole discretion, DFPS retains an option to renew for one (1) additional sixty (60) month term. Additionally, DFPS reserves the right to extend the Contract as necessary to complete the mission of the grant.

1. Anticipated Project Start Date: September 1, 2024
2. Project End Date: August 31, 2029



Submission of Forms

Applicants must complete and submit the Narrative Proposal, Forms A through B-2 and Exhibits listed in Article IX, Submission Checklist of the RFA.



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Evaluation Process

A four-step selection process will be used:

1. Eligibility screening based upon RFA Section 4.2;
2. Initial Compliance Screening based upon RFA Section 4.3;
3. Evaluation is based on RFA Section 4.4; and
4. Final Selection is based upon RFA Section 4.5



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Specific Selection Criteria

All eligible applications will be evaluated based upon:

1. Major Deliverable #1: Achievement of Service Objectives and Quality Indicators;
2. Major Deliverable #2: Development and Management of Continuum of Care and Service Delivery Model;
3. Major Deliverable #3: Compliance and General Requirements of SSCC;
4. Major Deliverable #4: Placement Services and Services to Children/Youth/Young Adults;
5. Major Deliverable #5: Case Management;
6. Administrative Entity Information - SSCC History and Experience; and
7. Administrative Entity Information - SSCC Financial Capacity, Stability and Structure.



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Submission of Exhibits

Applicants must complete and submit the Exhibits in accordance with the RFA, Article IX, Submission Checklist.



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Delivery for Submission Option

Section 3.7.3 Applicant must correctly deliver Solicitation Responses by one of the methods below:

- **Submission Option #1:** Applicant shall submit the application through the HHS Online Bid Room utilizing the procedures identified in Exhibit Q, HHS Online Bid Room instructions; or
- **Submission Option #2 with USB Drives:** Applicant may submit responsive applications via USB on two USB drives, one labeled "Original" and one labeled "Copy", to the correct mailing address as determined by the mailing method identified in Section 3.7.3 Delivery for Individual Submission Options.



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Questions and Answers

All questions **must** be submitted in writing to the Sole Point of Contact using the formatting below from the RFA, Section 3.5 Questions:

1. Identifying Solicitation number
2. Section number
3. Paragraph number
4. Page number
5. Text of passage being questioned
6. Question

Submit via email to: John.Norton2@hhs.texas.gov **by 5:00 p.m. CT on March 15, 2024.**



Question Deadline

1. Questions are due by **March 15, 2024 by 5:00 p.m. CT;**
2. Questions received after this deadline cannot be responded to; and
3. Tentative dates for answers to questions are posted on HHS Grants website as addendum to HHS0013421 is **March 29, 2024.**



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Closing Comments

- Applicants are responsible for meeting the RFA requirements, including any addendums.
- All Addendums must be signed and submitted with the original application.
- Applicants must check the HHS Grants website frequently for any addendums that may have been added to this solicitation.



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HHS Grants Website

The link is: <https://resources.hhs.texas.gov/rfa/hhs0013421>



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Thank you!

Request for Applications No. HHS0013421