



# TEXAS

## Health and Human Services

*Cecile E. Young, Executive Commissioner*

*Request for Applications (RFA)*

*Grant for*

*Children and Youth with Special Health Care Needs (CYSHCN)*

*Case Management*

*RFA No. HHS0013921*

**APPLICATION SUBMISSION DEADLINE**

*February 6, 2024, by 10:30 a.m. Central Time*

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**Section I. Executive Summary, Definitions, and Statutory Authority**

**1.1 EXECUTIVE SUMMARY**

The Texas Health and Human Services Commission (HHSC) is accepting Applications on behalf of the Texas Department of State Health Services (DSHS) for the Children with Special Health Care Needs Systems Development Group grant program (“Grant Program”). HHSC and DSHS are collectively referred to as the “System Agency”.

The purpose of the Grant Program is to provide leadership in assessing, prioritizing, and addressing the health needs of children/youth with special health care needs in Texas, to promote the health of families through advocacy and education and to ensure access to high-quality, community-based, preventive, primary and specialty health care within the specifications contained in this Request for Applications (RFA).

Applicants should reference **Section II, Scope of Grant Project**, for further detailed information regarding the purpose, background, eligible population, eligible activities and requirements.

Grant Name:	Children and Youth with Special Health Care Needs (CYSHCN) Case Management
RFA No.:	HHS0013921
Deadline for Applications:	February 6, 2024, by 10:30 a.m. Central Time
Deadline for Submitting Questions or Requests for Clarifications:	January 5, 2024, by 5:00 p.m. Central Time
Estimated Total Available Funding:	\$6,750,000.00
Estimated Total Number of Grant Agreement Awards:	Eight (8)
Estimated Max Award Amount:	\$1,870,000.00
Anticipated Project Start Date:	September 1, 2024
Length of Project Period:	5 years
Eligible Applicants:	See Section 3.2, Application Screening Requirements

To be considered for screening, evaluation and award, Applicants must provide and submit all required information and documentation as set forth in **Section VIII, Application Organization and Submission Requirements** and **Section XIII, Submission Checklist** by the Deadline for Submission of Applications established in **Section 7.1, Schedule of Events**, or subsequent Addenda. See **Section 9.2, Initial Compliance Screening for Applications**, for further details.

## 1.2 DEFINITIONS AND ACRONYMS

Unless a different definition is specified, or the context clearly indicates otherwise, the definitions and acronyms given to a term below apply whenever the term appears in this RFA. All other terms have their ordinary and common meaning.

Refer to all exhibits to this RFA for additional definitions.

[“Addendum”](#) means a written clarification or revision to this RFA, including exhibits, forms, and attachments, as issued and posted by HHSC to the HHS Grants RFA website.

[“Applicant”](#) means any person or legal entity that submits an Application in response to this RFA. The term includes the individual submitting the Application who is authorized to sign the Application on behalf of the Applicant and to bind the Applicant under any Grant Agreement that may result from the submission of the Application. May also be referred to in this RFA or its exhibits as [“Respondent”](#).

[“Application”](#) means all documents the Applicant submits in response to this RFA, including all required forms and exhibits. May also be referred to in this RFA as solicitation response.

[“Budget”](#) means the financial plan for carrying out the Grant Project, as formalized in the Grant Agreement, including awarded funds and any required Match, submitted as part of the Application in response to this RFA. An Applicant’s requested Budget may differ from the System Agency-approved Budget executed in the final Grant Agreement.

[“Business Day”](#) means any day (24-hour period) in which normal business operations of HHSC/DSHS are conducted (e.g., excludes weekends and the national holidays specified in Section 662.003(a) of the Texas Government Code).

[“Calendar Day”](#) is each day shown on the calendar beginning at 12:00 Midnight, including Saturdays, Sundays, and holidays.

[“Case Management”](#) means services that will assist individuals in gaining access to needed medical, social, educational, and other services. Supporting documentation of case management activities include documentation of a visit with the case manager and completed intake for enrollment in case management services, needs assessment, individual service plan and updated progress notes. For children/youth and families who have had a case management assessment in the previous State Fiscal Year, supporting documentation includes an annual update to the individual service plan and ongoing progress notes updates.

“CFR” means the Code of Federal Regulations which is the codification of the general and permanent rules published in the Federal Register by the executive departments and agencies of the federal government.

“Children/Youth with Special Health Care Needs (CYSHCN)” means children/youth who have or are at risk for chronic physical, developmental, behavioral, or emotional conditions and who also require health and related services of a type or amount beyond that generally required by children/youth.

“Client” means a member of the target population to be served by the Applicant's organization. For the purposes of this grant, a client is Children/youth with special health care needs up to age 21, their families, and individuals of any age with cystic fibrosis.

“Community-based” means being responsive to identified needs in the community and providing services as near to the child’s/family’s home as possible.

“Cost Reimbursement” means a payment mechanism by which Grantees are reimbursed for allowable costs incurred up to the total award amount specified in the Contract. Costs must be incurred in carrying out approved activities and must be based on an approved eight -category line-item (categorical) budget. Amounts expended in support of providing services and goods, if any, in accordance with the Contract terms and conditions must be billed on a monthly basis for reimbursement unless otherwise specified in the Contract. Reimbursement is based on actual allowable costs incurred that comply with the cost principles applicable to the grant.

“DSHS” means the Department of State Health Services.

“Direct Cost” means those costs that can be identified specifically with a particular final cost objective under the Grant Project responsive to this RFA or other internally or externally funded activity, or that can be directly assigned to such activities relatively easily with a high degree of accuracy. Costs incurred for the same purpose in like circumstances must be treated consistently as either direct or indirect costs. Direct Costs include, but are not limited to, salaries, travel, Equipment, and supplies directly benefiting the grant-supported Project or activity.

“Family-centered” means the recognition of the importance of the family as the focus of planning and service delivery; the promotion of parent and professional collaboration; a response to family needs; the recognition of individual and family strengths; respect for diversity of families and the promotion of family choice.

“Grant Agreement” means the agreement entered into by the System Agency and the Grantee as a result of this RFA, including the Signature Document and all attachments and amendments. May also be referred to in this RFA or its exhibits as “Contract”.

“Grantee” means the Party receiving funds under any Grant Agreement awarded under this RFA. May also be referred to in this RFA or its exhibits as “subrecipient” or “contractor”.

“HHS” includes both the Health and Human Services Commission (HHSC) and the Department of State Health Services (DSHS).

“HHSC” means the Health and Human Services Commission.

“Inclusive” means settings in which all children/youth, some of whom are children/youth with special health care needs, may participate in activities together with the necessary accommodations and supports. Activities are intended to provide a means of promoting involvement of all children/youth and their families.

“Indirect Cost” means those costs incurred for a common or joint purpose benefitting more than one cost objective, and not readily assignable to the cost objectives specifically benefitted, without effort disproportionate to the results achieved. Indirect Costs represent the expenses of doing business that are not readily identified with the Grant Project responsive to this RFA but are necessary for the general operation of the organization and the conduct of activities it performs.

“Indirect Cost Rate” is a device for determining in a reasonable manner the proportion of Indirect Costs each program should bear. It is the ratio (expressed as a percentage) of the Grantee’s Indirect Costs to a Direct Cost base.

“Project” or “Grant Project” means the specific work and activities that are supported by the funds provided under the Grant Agreement as a result of this RFA.

“Project Period” is the initial period of time set forth in the Grant Agreement during which Grantees may perform approved grant-funded activities to be eligible for reimbursement or payment. Unless otherwise specified, the Project Period begins on the Grant Agreement effective date and ends on the Grant Agreement termination or expiration date, and represents the base Project Period, not including extensions or renewals. When referring to the base Project Period plus anticipated renewal or extension periods, “grant term” is used.

“Respite Services” means a temporary break that provides short-term relief for families and primary caregivers to restore and strengthen their abilities to provide care for children/youth with special health care needs. Respite Services may be provided in “in-home” or “out-of-home” settings.

“RFA” means this Request for Applications, including all parts, exhibits, forms, attachments and Addenda posted on the HHS Grants RFA website. May also be referred to herein as “solicitation.”

“Solicitation” means this Request for Applications including any Exhibits and Addenda, if any.

“State” means the State of Texas and its instrumentalities, including System Agency and any other State agency, its officers, employees, or authorized agents.

“System Agency” means HHSC, DSHS, or both, that will be a party to any Grant Agreement resulting from the RFA.

“Successful Applicant” means an organization that receives a grant award as a result of this RFA. May also be referred to as “Grantee,” “Awarded Applicant,” “Subrecipient” or “Grant Recipient.”

“Transition” means a person-directed or family-directed, outcome-oriented process that facilitates coordinated activities and supports for a child or youth with special health care needs; a process that leads to successful movement from pediatric to adult health care and

may also assist in moving from school to work, and/or from living with family to living independently.

“TxGMS” means the Texas Grant Management Standards published by the Texas Comptroller of Public Accounts.

### 1.3 STATUTORY AUTHORITY

DSHS is requesting Applications under and governed by [Title V of the Social Security Act](#), CFDA 93.994 from the Maternal and Child Health Services Block Grant, and Texas Systems Development Group for Children with Special Health Care Needs authorized by the *Texas Health and Safety Code* Chapter 35.

Federal Grant Program:	Maternal and Child Health Services Block Grant to the States
Federal Awarding Agency:	Department of Health and Human Services Health Resources and Services Administration
Funding Opportunity No.:	BO447448
Assistance Listing Number and Program Title:	93.994 Maternal and Child Health Services Block Grant

### 1.4 STANDARDS

Awards made as a result of this RFA are subject to all policies, terms, and conditions set forth in or included with this RFA as well as applicable statutes, requirements, and guidelines including, but not limited to applicable provisions of the Texas Grant Management Standards (TxGMS) and the Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards (2 CFR Part 200).

## Section II. Scope of Grant Project

### 2.1 PURPOSE

This funding opportunity invites grant Applications requesting funding for the Children with Special Health Care Needs Systems Development Group. The purpose of this program is to provide leadership in assessing, prioritizing, and addressing the health needs of children/youth with special health care needs in Texas, to promote the health of families through advocacy and education and to ensure access to high-quality, community-based, preventive, primary and specialty health care within the specifications contained in this Request for Applications (RFA).

## 2.2 PROGRAM BACKGROUND

The DSHS Maternal and Child Health Section seeks Grantees to implement Case Management Services for Children and Youth with Special Health Care Needs (CYSHCN) and their families. Case Management are services provided through in-depth assessment and planning, in partnership with families. Case management Grantees will provide family-centered, comprehensive case management across systems, ongoing support, and follow-up to families of CYSHCN in identifying and accessing needed services.

The DSHS MCH Section in the 2020 Title V Needs Assessment identifies the following State of Texas priority needs related to CYSHCN:

1. Implement health disparity strategies across all maternal and child health populations.
2. Improve nutrition across the life course.
3. Improve the cognitive, behavioral, physical, and mental health and development of all Maternal and Child Health populations.
4. Increase family support and ensure integration of family engagement across all Maternal and Child Health programming.
5. Support health education and resources for families and providers.
6. Promote safe, stable, nurturing environments to reduce violence and the risk of injury.
7. Improve transition planning and support services for children, adolescents, and young adults, including those with special health care needs.
8. Support comprehensive, family-centered, coordinated care within a medical home model for all Maternal and Child Health populations.

In addition to the above, State of Texas priority needs, the DSHS MCH Section selected the following Title V National and State Performance Measures based on the results of the 2020 Title V Needs Assessment:

1. Percent of CYSHCN and their families who received the supports and services necessary to be included into their communities.
2. Percent of children with and without special health care needs having a medical home.
3. Percent of adolescents with and without special health care needs who received services necessary to make transitions to adult health care.

### 2.3 ELIGIBLE POPULATION

The eligible population to be served under this RFA consists of CYSHCN, up to age 21, and their families.

System Agency reserves the right to alter eligibility criteria during the Project Period. System Agency will notify Grantee in writing within sixty (60) days of any change to eligibility criteria.

### 2.4 ELIGIBLE SERVICE AREAS

All service areas within the State of Texas are eligible for Project funding.

### 2.5 ELIGIBLE ACTIVITIES

The 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.

Applicant must provide a project design describing its proposed Project completing **Form C, Executive Summary, Form D, Applicant Background, and Exhibit J, Requested Budget Template.**

The proposed Project must:

1. Enhance systems and local processes to make it easier for families to navigate services within their community;
2. Provide culturally effective services that address community drivers of health. Activities **must** include but are not limited to:
  - a. 100% of Grantee staff funded through the CYSHCN Systems Development Group shall complete the online course “Culturally Effective Health Care” through Texas Health Steps;
  - b. Grantee must meet with organizations serving populations that experience additional disparities due to community drivers of health at least once per quarter to exchange information and plan collaborative activities;
  - c. Notify all Clients about the availability of translation/interpretation services;

- d. Provide 100% of Clients with a translator/interpreter upon request for written communications and in-person meetings or events in their preferred language; and
  - e. 100% of families will report staff provide services that respect their culture and traditions when working with their family.
3. Families are engaged in programming and are satisfied with the services provided. Activities **must** include, but are not limited to:
- a. 100% of families served shall have the opportunity to give feedback on the services provided through the DSHS-developed family experience survey, at least once per State Fiscal Year;
  - b. Submit a program self-assessment on family engagement within the first 3 months of the Contract Effective Date and annually thereafter in a format as directed by DSHS; and
  - c. Annually identify at least two (2) improvements based on the self-assessment results and identify activities to implement in response to the findings outlined in its work plan. Goals will be in a S.M.A.R.T format.
4. Comprehensive case management services shall be provided to or on behalf of children/youth with special health care needs.
- a. 100% of children/youth shall have, or be assisted in finding, a primary care provider (*i.e.*, a physician or nurse practitioner for both preventive care (*e.g.*, checkups and immunizations) and for when the child/youth is sick) within 60 days of implementation of the Individual Service Plan;
  - b. 100% of youth aged 12 years and older who are served shall have a written transition plan developed in partnership with the family. The written transition plan may be a part of the child/youth's Individual Service Plan or a standalone document and shall address key areas of transition including, but not limited to, transition to adult health care, plans for post-secondary education, development of vocational/employment skills, living arrangements and housing, and leisure activities; and
  - c. Case management services shall demonstrate fidelity to the CYSHCN Case Management Practice Model.

## 2.6 PROGRAM REQUIREMENTS

This RFA contains the requirements that all Applicants must meet to be considered for a Contract under this RFA. All Grantees must comply with the following service requirements.

1. Grantee shall submit an annual work plan. The work plan shall:
  - a. Demonstrate and document progress in all components and must be approved by DSHS;
  - b. If progress on activities is delayed, an explanation must be provided in the appropriate reports to DSHS; and
  - c. If there is a significant delay in submitting the required documentation, DSHS may adjust the amount of the allocation at any point in the State Fiscal Year.
2. Grantee shall review the workplan to ensure demonstration and meet with DSHS to review progress toward workplan.
3. Grantee shall meet quarterly with the DSHS Regional Manager of Specialized Health and Social Services or his/her designee to exchange information on project activities and discuss collaborative opportunities.
4. Grantee shall attend and participate in all CYSHCN Systems Development Group's quarterly Grantee meetings, including the annual training. If the primary contact cannot participate in a call, DSHS shall be notified with the name of who will attend the quarterly meeting in their place.
5. Grantee shall provide services in compliance with all applicable federal and state laws, rules, regulations, standards and guidelines including, but not limited to, the following:
  - a. The RFA and the Applicant's response.
  - b. DSHS On-Site Monitoring Visits.
6. Grantee shall follow the principles and best practices imparted in the CYSHCN SDG training at all times, as directed by CYSHCN Systems Development Group.
7. Grantee shall accept technical assistance with DSHS staff to apply policy, coordinate services, and assure quality.
8. DSHS shall serve as the payor of last resort, Children/youth eligible through Medicaid must be served with those resources first.
9. No one shall be denied services based on inability to pay.

All Grantees must comply with the following service requirements.

1. In the event of staff vacancies, Grantee shall notify DSHS program in writing within ten (10) Business Days of the position(s) becoming vacant.
2. Grantee shall notify DSHS within ten (10) Business Days in writing of any change affecting contractor's identity, ownership or control, name, governing board, vendors, medical or program director, or address.
3. Grantee shall establish, maintain, and keep current program and personnel policies, procedures and staff development/training for employees and volunteers.
4. Grantee policy and procedures additional requirements include, but are not limited to:
  - a. Policies regarding selection and dismissal of staff, volunteers, and others delivering or coordinating services under the Grantee's direction;
  - b. Procedures for verifying staff/volunteer qualifications;
  - c. Policies which forbid abuse, neglect, or exploitation of children/youth; and
  - d. Policies that inform all personnel of the legal requirement to report witnessed or suspected abuse, neglect, or exploitation.
5. Program and personnel policies and procedures shall be well organized and easily accessible to DSHS staff upon request.
6. Grantee Personnel Requirements.
  - a. The Grantee Program Director shall have the following qualifications:
    - i. A master's degree in social work, nursing, education or related field and two (2) years of experience in case management services within community programs serving the maternal, child and adolescent population; or
    - ii. A bachelor's degree in social work, nursing, education or related field and four (4) years of experience in case management services within community programs serving the maternal, child, and adolescent population.
  - b. The Grantee Case Manager shall have the following qualifications:
    - i. Social Worker or Registered Nurse with a master's/or bachelor's degree in social work or nursing with licensure appropriate for their practice and one year of experience providing case management

services within community programs serving the maternal, child, and adolescent population;

- ii. Family member of a CYSHCN with successful and extensive experience serving as their child/youth’s case manager and documented appropriate education or training related to case management; or
  - iii. Other qualified individuals with extensive and documented successful experience working in community programs serving CYSHCN. Qualifications must be specific to the job description and will be reviewed. DSHS will have final authority whether someone under this Subsection is qualified as a case manager.
- c. All Grantee staff shall hold a current certificate of completion for the CYSHCN Case Management Practice Model within 60 days of hire or Contract Effective Date.

**2.7 REQUIRED REPORTS**

System Agency will monitor Grantee’s performance, including, but not limited to, thorough review of financial and programmatic reports and performance measures, under any Grant Agreement awarded as a result of this RFA. Each Grantee awarded a Grant Agreement as a result of this RFA must submit the following reports by the noted due dates:

REPORT	DUE DATE
Financial Status Report – Biannually	The 15 <sup>th</sup> of each month following the period being reported
Performance Report – Quarterly	The 15 <sup>th</sup> calendar day following the end of the quarter being reported
Inventory Report - Annually	The 15 <sup>th</sup> of October following the end of the year being reported

Grantee shall provide all applicable reports in the format specified by System Agency in an accurate, complete, and timely manner and shall maintain appropriate supporting backup documentation. Failure to comply with submission deadlines for required reports, Financial Status Reports (FSRs) or other requested information may result in System Agency, in its sole discretion, placing the Grantee on financial hold without first requiring a corrective action plan in addition to pursuing any other corrective or remedial actions under the Grant Agreement.

## **2.8 PERFORMANCE MEASURES AND MONITORING**

System Agency will look solely to Grantee for the performance of all Grantee obligations and requirements in a Grant Agreement resulting from this RFA. Grantee shall not be relieved of its obligations for any nonperformance by its subgrantees or subcontractors, if any.

Grant Agreement(s) awarded as a result of this RFA are subject to the System Agency's performance monitoring activities throughout the duration of the Grant Project Period. This evaluation may include a reassessment of project activities and services to determine whether they continue to be effective throughout the grant term.

Grantees must regularly collect and maintain data that measures the performance and effectiveness of activities under a Grant Agreement resulting from this RFA in the manner, and within the timeframes specified in this RFA and resulting Grant Agreement, or as otherwise specified by System Agency. Grantees must submit the necessary information and documentation regarding all requirements, including reports and other Deliverables and will be expected to report quarterly on the following measures:

1. Progress toward achieving program-specific performance measures;
2. Work Plan; and
3. Data as required by the CYSHCN Services Program.

If requested by System Agency, the Grantee shall report on the progress towards completion of the grant project and other relevant information as determined by System Agency during the Grant Project Period. To remain eligible for renewal funding, if any, the Grantee must be able to show the scope of services provided and their impact, quality, and levels of performance against approved goals, and that Grantee's activities and services effectively address and achieve the project's stated purpose.

## **2.9 FINANCIAL STATUS REPORTS (FSRs)**

Except as otherwise provided, for Grant Agreements with categorical budgets, Grantee shall submit quarterly FSRs to System Agency by the last Business Day of the month following the end of each State fiscal quarter for System Agency review and financial assessment. Through submission of a FSR, Grantee certifies that (1) any applicable invoices have been reviewed to ensure all grant-funded purchases of goods or services have been completed, performed or delivered in accordance with Grant Agreement requirements; (2) all Grantee-performed services have been completed in compliance with the terms of the Grant Agreement; (3) that the amount of the FSR added to all previous approved FSRs does not exceed the maximum liability of the Grant Award; and (4) all expenses shown on the FSR are allocable, allowable, actual, reasonable, and necessary to fulfill the purposes of the Grant Agreement.

## **2.10 FINAL BILLING SUBMISSION**

Unless otherwise directed by System Agency, Grantee shall submit a reimbursement or payment request as a final close-out invoice not later than forty-five (45) calendar days following the end of the term of the Grant Agreement. Reimbursement or payment requests received after the deadline may not be paid.

## **2.11 LIMITATIONS ON GRANTS TO UNITS OF LOCAL GOVERNMENT**

Pursuant to the General Appropriations Act, Article IX, Section 4.04,

In each Grant Agreement with a unit of local government, grant funds appropriated under the General Appropriations Act will be expended subject to limitations and reporting requirements similar to those provided by:

- (1) Parts 2, 3, and 5 of Article IX of the General Appropriations Act (except there is no requirement for increased salaries for local government employees);
- (2) §§556.004, 556.005, and 556.006, Texas Government Code; and
- (3) §§2113.012 and 2113.101, Texas Government Code.

(b) In this section, "unit of local government" means:

- (1) a council of governments, a regional planning commission, or a similar regional planning agency created under Chapter 391, Local Government Code;
- (2) a local workforce development board; or
- (3) a community center as defined by Texas Health and Safety Code, §534.001(b).

## **Section III. Applicant Eligibility Requirements**

### **3.1 LEGAL AUTHORITY TO APPLY**

By submitting an Application in response to this RFA, Applicant certifies that it has legal authority to apply for the Grant Agreement that is the subject of this RFA and is eligible to receive awards. Further, Applicant certifies it will continue to maintain any required legal authority and eligibility throughout the entire duration of the grant term, if awarded. All requirements apply with equal force to Applicant and, if the recipient of an award, Grantee and its subgrantees or subcontractors, if any.

Each applicant may only submit one Application.

### **3.2 APPLICATION SCREENING REQUIREMENTS**

In order to be considered an Applicant eligible for evaluations, Applicant must meet the following minimum requirements:

1. Applicant must be a governmental entity, non-profit, clinic, or hospital.
2. If applicable, organizations submitting a request for Application must agree that they are in compliance with [Title V of the Social Security Act](#), CFDA 93.994 from the Maternal and Child Health Services Block grant, and Texas Systems Development Group for Children with Special Health Care Needs authorized by the Texas Health and Safety Code Chapter 35.
3. Applicant must have a Texas business address. A post office box may be used when the Application is submitted, but the Applicant must conduct business at a physical location in Texas prior to the date that the Contract is awarded.
4. Applicant must be in good standing with the U.S. Internal Revenue Service.
5. Applicant may not be eligible for Contract award if audit reports or financial statements submitted with the Application identify concerns regarding the future viability of the Grantee, material non-compliance or material weaknesses that are not satisfactorily addressed, as determined by DSHS.
6. In compliance with Comptroller of Public Accounts and Statewide Procurement Division rules, a name search will be conducted using the websites listed in this section prior to the development of a Contract:
  - a. The General Services Administration's (GSA) System for Award Management (SAM) for parties excluded from receiving federal Contracts, certain subcontracts and from certain types of federal financial and non-financial assistance and benefits. <https://www.sam.gov/SAM/>
  - b. The Office of Inspector General (OIG) List of Excluded Individuals/Entities Search– State– <https://oig.hhsc.state.tx.us/Exclusions/search.aspx>; and
  - c. Texas Comptroller of Public Accounts (CPA) Debarment List located at <https://comptroller.texas.gov/purchasing/programs/vendor-performance-tracking/debarred-vendors.php>. If this web link does not open, copy and paste to your internet browser window.
6. Applicants **must be** listed on the following list if they are Professional Corporations, Professional Associations, Texas Corporations, and/or Texas Limited Partnership Companies. Secretary of State (SOS) at <https://direct.sos.state.tx.us/acct/acct-login.asp>.
7. Contractor must have access to or maintain a computer, e-mail, and the internet throughout the Contract period.

Applicant is not considered eligible to apply unless the Applicant meets the eligibility conditions to the stated criteria listed above at the time the Application is submitted. Applicant must continue to meet these conditions throughout the selection and funding process. DSHS expressly reserves the right to review and analyze the documentation

submitted and to request additional documentation and determine the Applicant's eligibility to compete for the Contract award.

### **3.3 GRANT AWARD ELIGIBILITY**

By submitting an Application in response to this RFA, Applicant certifies that:

1. Applicant and all of its identified subsidiaries intending to participate in the Grant Agreement are eligible to perform grant-funded activities, if awarded, and are not subject to suspension, debarment, or a similar ineligibility determined by any state or federal entity;
2. Applicant is in good standing under the laws of Texas and has provided HHS with any requested or required supporting documentation in connection with this certification;
3. Applicant shall remain in good standing and eligible to conduct its business in Texas and shall comply with all applicable requirements of the Texas Secretary of State and the Texas Comptroller of Public Accounts;
4. Applicant is currently in good standing with all licensing, permitting, or regulatory bodies that regulate any or all aspects of Applicant's operations; and
5. Applicant is not delinquent in taxes owed to any taxing authority of the State of Texas as of the effective date of this Grant Agreement.

### **3.4 GRANTS FOR POLITICAL POLLING PROHIBITED**

Pursuant to the General Appropriations Act, Article IX, Section 4.03, none of the funds appropriated by the General Appropriations Act may be granted to or expended by any entity which performs political polling. This prohibition does not apply to a poll conducted by an academic institution as part of the institution's academic mission that is not conducted for the benefit of a particular candidate or party. By submitting a response to this RFA, Applicant certifies that it is not ineligible for a Grant Agreement pursuant to this prohibition.

## **Section IV. Project Period**

### **4.1 PROJECT PERIOD**

The Project Period is anticipated to be **September 1, 2024** through **August 31, 2029**.

**Extension of Project Period:** The System Agency may, at its sole discretion, extend the Project Period for up to one (1) year to allow for the full expenditure of awarded funding and completion of Grant Program activities.

## 4.2 PROJECT CLOSEOUT

System Agency will programmatically and financially close the grant award and end the Grant Agreement when System Agency determines Grantee has completed all applicable actions and work in accordance with Grant Agreement requirements. The Grantee must submit all required financial, performance, and other reports as required in the Grant Agreement. The project close-out date is 90 Calendar Days after the end of Grant term, unless otherwise noted in the original or amended Grant Agreement. Funds not obligated by Grantee by the end of the Grant Agreement term and not expended by the project close-out date will revert to System Agency.

## Section V. Grant Funding and Reimbursement Information

### 5.1 GRANT FUNDING SOURCE AND AVAILABLE FUNDING

The total amount of State funding available for the Children with Special Health Care Needs Case Management grant program is **\$6,750,000.00** for the entire Grant term. It is System Agency's intention to make multiple awards to applicants that successfully demonstrate family-centered, comprehensive case management across systems, ongoing support, and follow-up to families of children/youth with special health care needs in identifying and accessing needed services.

Applicants are strongly cautioned to only apply for the amount of grant funding they can responsibly expend during the Project Period to avoid lapsed funding at the end of the grant term. Successful Applications may not be funded to the full extent of Applicant's requested budgets in order to ensure grant funds are available for the broadest possible array of communities and programs.

Funds will be used only for case management where other appropriate funding resources are not available to the child/youth and family. Children/youth eligible for case management directly through other funding sources or Medicaid, Medicaid Waivers such as Community Living Assistance and Support Services (CLASS), Early Childhood Intervention (ECI) or other State programs must be served first with those funding resources. Grantees will also be required to provide services to children/youth referred by the DSHS Regional Manager of Specialized Health and Social Services.

Reimbursement will only be made for actual, allowable, and allocable expenses that occur within the Project Period. No spending or costs incurred prior to the Effective Date of the Contract will be eligible for reimbursement.

### 5.2 NO GUARANTEE OF REIMBURSEMENT AMOUNTS

There is no guarantee of total reimbursements to be paid to any Grantee under any Grant Agreement, if any, resulting from this RFA. Grantees should not expect to receive additional or continued funding under future RFA opportunities and should maintain sustainability plans in case of discontinued grant funding. Any additional funding or future funding may require submission of a new Application through a subsequent RFA.

Receipt of an Application in response to this RFA does not constitute an obligation or expectation of any award of a Grant Agreement or funding of a grant award at any level under this RFA.

### **5.3 GRANT FUNDING PROHIBITIONS**

Grant funds may not be used to support the following services, activities, and costs:

1. Any use of grant funds to replace (supplant) funds that have been budgeted for the same purpose through non-grant sources;
2. Inherently religious activities such as prayer, worship, religious instruction, or proselytization;
3. Lobbying or advocacy activities with respect to legislation or to administrative changes to regulations or administrative policy (cf. 18 U.S.C. § 1913), whether conducted directly or indirectly;
4. Any portion of the salary of, or any other compensation for, an elected or appointed government official;
5. Vehicles for general agency use; to be allowable, vehicles must have a specific use related to Project objectives or activities;
6. Entertainment, amusement, or social activities and any associated costs including but not limited to admission fees or tickets to any amusement park, recreational activity or sporting event unless such costs are incurred for components of a program approved by the grantor agency and are directly related to the program's purpose;
7. Costs of promotional items, and memorabilia, including models, gifts, and souvenirs;
8. Food, meals, beverages, or other refreshments, except for eligible per diem associated with grant-related travel, where pre-approved for working events, or where such costs are incurred for components of a program approved by the grantor agency and are directly related to the program's purpose;
9. Membership dues for individuals;
10. Any expense or service that is readily available at no cost to the grant Project;
11. Any activities related to fundraising;
12. Equipment and other capital expenditures such as capital improvements, property losses and expenses, real estate purchases, mortgage payments, remodeling, the acquisition or construction of facilities, or other items that are unallowable pursuant to 2 CFR 200.439;

13. Any other prohibition imposed by federal, state, or local law; and
14. Other unallowable costs as listed under TxGMS, Appendix 7, Selected Items of Cost Supplement Chart and/or 2 CFR 200, Subpart E – Cost Principles, General Provisions for Selected Items of Cost, where applicable.

## **5.4 PAYMENT METHOD**

Grant Agreement(s) awarded under this RFA will be funded on a cost reimbursement basis for reasonable, allowable and allocable Grant Project direct costs. Under the cost reimbursement payment method, Grantee is 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.

## **Section VI. Application Forms and Exhibits for Submission**

**Note:** Applicants must refer to **Section XIII, Submission Checklist**, for the complete checklist of documents that must be submitted with an Application under this RFA.

## **6.1 NARRATIVE PROPOSAL**

Using **Forms C** through **H** attached to this RFA, Applicants shall provide an executive summary and describe their proposed activities, processes, and methodologies to satisfy all objectives described in **Article II, Scope of Grant Project**, including the Applicant's primary purpose of the proposed Project, supporting data, project approach and activities, organizational capacity, performance management, and target population. Applicants should identify all proposed tasks to be performed, including all Project activities, during the Grant Project Period. Applicants must complete and submit all required attachments.

1. **Form C, Executive Summary**
2. **Form D, Applicant Background**
3. **Form E-1, Case Management Work Plan**
4. **Form E-2, Program Evaluation**
5. **Form E-3, Case Management Required and Proposed Performance Measures**
6. **Form F, Assessment and Project Development**
7. **Form G, Financial Management and Administrative Questionnaire**
8. **Form H, Texas Health and Human Services System Indirect Costs Rate (ICR)**

## Questionnaire

### 6.2 REQUESTED BUDGET

Attached **Exhibit J, Requested Budget Template**, of this RFA is the template for submitting the requested Budget. Applicants must develop the requested Budget to support their Proposed Project and in alignment with the requirements described in this RFA.

Applicants must ensure that Project costs outlined in the requested Budget are reasonable, allowable, allocable, and developed in accordance with applicable State and federal grant requirements. Reasonable costs are those if, in nature and amount, do not exceed that which would be incurred by a prudent person under the circumstances prevailing at the time the decision was made to incur the cost. A cost is allocable to a particular cost objective if the cost is chargeable or assignable to such cost objective in accordance with relative benefits received. See 2 CFR § 200.403 or TxGMS Cost Principles, Basic Considerations (pgs. 32-33), for additional information related to factors affecting allowability of costs.

Applicants must utilize the Budget template provided, **Exhibit J, Requested Budget Template**, and identify all Budget line items for 12 months. Budget categories must be broken out into specific Budget line items that allow System Agency to determine if proposed costs are reasonable, allowable, and necessary for the successful performance of the Project. Applicants must enter all costs in the Budget tables and explain why the cost is necessary and how the cost was established. Matching funds must also be identified in the requested Budget.

If selected for a grant award under this RFA, only System Agency-approved Budget items in the requested Budget may be considered eligible for reimbursement.

**Submission of Exhibit J, Requested Budget Template, is mandatory. Applicants that fail to submit a requested Budget as set forth in this RFA with their Application will be disqualified.**

### 6.3 INDIRECT COSTS

Applicants must have an approved Indirect Cost Rate (ICR) or request the de minimis rate to recover Indirect Costs. All Applicants are required to complete and submit **Form H, HHS System Indirect Cost Rate (ICR) Questionnaire**, with required supporting documentation. The questionnaire initiates the acknowledgment or approval of an ICR for use with the System Agency cost-reimbursable Grant Agreements. Entities declining the use of Indirect Cost cannot recover Indirect Costs on any System Agency award or use unrecovered Indirect Costs as Match.

HHS typically accepts the following approved ICRs:

1. Federally Approved Indirect Cost Rate Agreement
2. State of Texas Approved Indirect Cost Rate

The System Agency, at its discretion, may request additional information to support any approved ICR agreement.

If the Applicant does not have an approved ICR agreement, the Applicant may be eligible for the ten percent (10%) de minimis rate or may request to negotiate an ICR with HHS.

For Applicants requesting to negotiate an ICR with HHS, the ICR Proposal Package will be provided by the HHS Federal Funds Indirect Cost Rate Group to successful Grantees. The ICR Proposal Package must be completed and returned to the HHS Federal Funds Indirect Cost Rate Group no later than three (3) months post-award.

The HHS Federal Funds Indirect Cost Rate Group will contact applicable Grantees after Grant Agreement execution to initiate and complete the ICR process. Grantees should respond within thirty (30) Business Days or the request will be cancelled, and Indirect Costs may be disallowed.

Once HHS acknowledges an existing rate or approves an ICR, the Grantee will receive one of the three Indirect Cost approval letters: ICR Acknowledgement Letter, ICR Acknowledgement Letter – Ten Percent De Minimis, or the ICR Agreement Letter.

If an Indirect Cost Rate Letter is required but it is not issued at the time of Grant Agreement execution, the Grant Agreement will be amended to include the Indirect Cost Rate Letter after the ICR Letter is issued.

Approval or acceptance of an ICR will not result in an increase in the amount awarded or affect the agreed-upon service or performance levels throughout the life of the award.

## **6.4 ADMINISTRATIVE APPLICANT INFORMATION**

Using **Forms A** through **B-2** attached to this RFA, Applicant must provide satisfactory evidence of its ability as an organization to manage and coordinate the types of activities described in this RFA.

### **1. Litigation and Contract History**

Applicant must include in its Application a complete disclosure of any alleged or significant contractual or grant failures.

In addition, Applicant must disclose any civil or criminal litigation or investigation pending over the last five (5) years that involves Applicant or in which Applicant

has been judged guilty or liable. Failure to comply with the terms of this provision may disqualify Applicant. See **Exhibit A, HHS Solicitation Affirmations**. Applicant certifies it does not have any existing claims against or unresolved audit exceptions with the State of Texas or any agency of the State of Texas.

Application may be rejected based upon Applicant's prior history with the State of Texas or with any other party that demonstrates, without limitation, unsatisfactory performance, adversarial or contentious demeanor, or significant failure(s) to meet contractual or grant obligations.

**2. Financial Management and Administrative Questionnaire**

Applicant must complete **Form G, Financial Management and Administrative Questionnaire** and submit with its Application.

**Section VII. RFA Administrative Information and Inquiries**

**7.1 SCHEDULE OF EVENTS**

EVENT	DATE/TIME
Funding Announcement Posting Date  Posted to HHS Grants RFA and Texas eGrants websites	December 20, 2024
Deadline for Submitting Questions or Requests for Clarification	January 5, 2024, at 5:00 p.m. Central Time
Date Answers to Questions or Requests for Clarification Posted	January 19, 2024, at 5:00 p.m. Central Time
<b>Deadline for Submission of Applications</b>  <b>NOTE: Applications must be <u>RECEIVED</u> by HHSC by this deadline if not changed by subsequent Addenda to be considered eligible.</b>	<b>February 6, 2024, by 10:30 a.m. Central Time</b>
Anticipated Notice of Awards	August 1, 2024
Anticipated Project Start Date	September 1, 2024

Applicants must ensure their Applications are received by HHSC in accordance with the Deadline for Submission of Applications (date and time) indicated in this Schedule of Events or as changed by subsequent Addenda posted to the [HHS Grants RFA](#) website.

All dates are tentative and HHSC and/or DSHS reserve the right to change these dates at any time. At the sole discretion of HHSC and/or DSHS, events listed in the Schedule of Events are subject to scheduling changes and cancellation. Scheduling changes or cancellation determinations made prior to the Deadline for Submission of Applications will be published by posting an Addendum to the [HHS Grants RFA](#) website. After the Deadline for Submission of Applications, if there are delays that significantly impact the anticipated award date, HHSC, at its sole discretion, may post updates regarding the anticipated award date to the [Procurement Forecast](#) on the HHS Procurement Opportunities [website](#). Each Applicant is responsible for checking the HHS Grants RFA website and Procurement Forecast for updates.

## 7.2 SOLE POINT OF CONTACT

All requests, questions or other communication about this RFA shall be made by email **only** to the Grant Specialist designated as HHSC's Sole Point of Contact listed below:

<b>Name</b>	Dedra Williams
<b>Title</b>	Grant Specialist, HHSC Procurement and Contracting Services
<b>Address</b>	Procurement and Contracting Services Building 1100 W 49th St. MC: 2020 Austin, TX 78756
<b>Phone</b>	512-406-2412
<b>Email</b>	<a href="mailto:dedra.williams@hhs.texas.gov">dedra.williams@hhs.texas.gov</a>

**Applicants shall not use this e-mail address for submission of an Application. Follow the instructions for submission as outlined in Section VIII, Application Organization and Submission Requirements.**

However, if expressly directed in writing by the Sole Point of Contact, Applicant may communicate with another designated HHS representative, e.g., during grant negotiations as part of the normal grant review process, if any.

**Prohibited Communications:** Applicants and their representatives shall not contact other HHS personnel regarding this RFA.

This restriction (on only communicating in writing by email with the sole point of contact identified above) does not preclude discussions between Applicant and agency personnel for the purposes of conducting business unrelated to this RFA.

Failure of an Applicant or its representatives to comply with these requirements may result in disqualification of the Application.

### **7.3 RFA QUESTIONS AND REQUESTS FOR CLARIFICATION**

Written questions and requests for clarification of this RFA are permitted if submitted by email to the Sole Point of Contact by the deadline established in **Section 7.1, Schedule of Events**, or as may be amended in Addenda, if any, posted to the HHS Grants RFA websites.

Applicants' names will be removed from questions in any responses released. All questions and requests for clarification must include the following information. Submissions that do not include this information may not be accepted:

1. RFA Number;
2. Section or Paragraph number from this Solicitation;
3. Page Number of this Solicitation;
4. Exhibit or other Attachment and Section or Paragraph number from the Exhibit or other Attachment;
5. Page Number of the Exhibit;
6. Language, Topic, Section Heading being questioned; and
7. Question.

The following contact information must be included in the e-mail submitted with questions or requests for clarification:

1. Name of individual submitting question or request for clarification;
2. Organization name;
3. Phone number; and
4. E-mail address.

**Questions or other written requests for clarification must be received by the Sole Point of Contact by the deadline set forth in this Section 7.1, Schedule of Events, or as may be amended in Addenda, if any, posted to the HHS Grants RFA website.**

**DSHS may review and, at its sole discretion, may respond to questions or other written requests received after the deadline.**

#### **7.4 AMBIGUITY, CONFLICT, DISCREPANCY, CLARIFICATIONS**

Applicants must notify the Sole Point of Contact of any ambiguity, conflict, discrepancy, exclusionary specification, omission or other error in the RFA in the manner and by the deadline for submitting questions. Each Applicant submits its Application at its own risk.

If Applicant fails to properly and timely notify the Sole Point of Contact of any ambiguity, conflict, discrepancy, exclusionary specification, omission or other error in the RFA, Applicant, whether awarded a Grant Agreement or not:

1. Shall have waived any claim of error or ambiguity in the RFA and any resulting Grant Agreement;
2. Shall not contest the interpretation by the DSHS of such provision(s); and
3. Shall not be entitled to additional reimbursement, relief, or time by reason of any ambiguity, conflict, discrepancy, exclusionary specification, omission, or other error or its later correction.

#### **7.5 RESPONSES TO QUESTIONS OR REQUEST FOR CLARIFICATIONS**

Responses to questions or other written requests for clarification will be consolidated and HHSC will post responses in one or more Addenda on the [HHS Grants RFA](#) website. Responses will not be provided individually to requestors.

DSHS reserves the right to amend answers previously posted at any time prior to the deadline for submission of Applications. Amended answers will be posted on the [HHS Grants RFA](#) website in a separate, new Addendum or Addenda. It is Applicant's responsibility to check the [HHS Grants RFA](#) website or contact the Sole Point of Contact for a copy of the Addendum with the amended answers.

#### **7.6 CHANGES, AMENDMENT OR MODIFICATION TO RFA**

DSHS reserves the right to change, amend, modify or cancel this RFA. All changes, amendments and modifications or cancellation will be posted by Addendum on the HHS Grants RFA website.

It is the responsibility of each Applicant to periodically check the HHS Grants RFA website for any additional information regarding this RFA. Failure to check the posting website will in no way release any Applicant or awarded Grantee from the requirements of posted Addenda or additional information. No HHS agency will be responsible or liable in any regard for the failure of any individual or entity to receive notification of any posting to the websites or for the failure of any Applicant or awarded Grantee to stay informed of all postings to these websites. If the Applicant fails to monitor these websites

for any changes or modifications to this RFA, such failure will not relieve the Applicant of its obligation to fulfill the requirements as posted.

## **7.7 EXCEPTIONS**

Applicants are highly encouraged, in lieu of including exceptions in their Applications, to address all issues that might be advanced by way of exception by submitting questions or requests for clarification pursuant to **Section 7.3, RFA Questions and Requests for Clarification**.

No exception, nor any other term, condition, or provision in an Application that differs, varies from, or contradicts this RFA, will be considered to be part of any Grant Agreement resulting from this RFA unless expressly made a part of the Grant Agreement in writing by System Agency.

## **Section VIII. Application Organization and Submission Requirements**

### **8.1 APPLICATION RECEIPT**

Applications must be received by HHSC by the Deadline for Submission of Applications specified in **Section 7.1, Schedule of Events**, or subsequent Addenda. HHSC will date and time stamp all Applications upon receipt. Applications received after the Deadline for Submission of Applications may be ruled ineligible. Applicants should allow for adequate time for submission before the posted Deadline for Submission.

No HHS agency will be held responsible for any Application that is mishandled prior to receipt by HHSC. It is the Applicant's responsibility to ensure its Application is received by HHSC before the Deadline for Submission of Applications. No HHS agency will be responsible for any technical issues that result in late delivery, non-receipt of an Application, inappropriately identified documents, or other submission issue that may lead to disqualification.

**Note: All Applications become the property of DSHS after submission and receipt and will not be returned to Applicant.**

Applicants understand and acknowledge that issuance of this RFA or retention of Applications received in response to this RFA in no way constitutes a commitment to award Grant Agreement(s) as a result of this RFA.

### **8.2 APPLICATION SUBMISSION**

By submitting an Application in response to this Solicitation, Applicant represents and warrants that the individual submitting the Application and any related documents on behalf of the Applicant is authorized to do so and to binds the Applicant under any Grant Agreement that may result from the submission of an Application.

### 8.3 REQUIRED SUBMISSION METHOD

Applicants must submit their completed Applications by the Deadline for Submission of Applications provided in the **Section 7.1, Schedule of Events**, or subsequent Addenda, using the approved method identified below. Applications submitted by any other method (e.g. facsimile, email) will not be considered and will be disqualified.

**HHS Online Bid Room:** Applicants shall upload the following documents to the Online Bid Room utilizing the procedures in **Exhibit G, HHS Online Bid Room Instructions**.

**File Size Limitation:** Restriction to 250MB per file attachment.

1. One (1) copy marked as “Original Application” that contains the Applicant’s entire Application in a Portable Document Format (“.pdf”) file.
2. One (1) copy of the completed **Exhibit J, Requested Budget Template**, in its original Excel format.

One (1) copy of the complete Application marked as “Public Information Act Copy,” if applicable, in accordance with **Section 12.1, Texas Public Information Act**, in a Portable Document Format (“.pdf”) file.

### 8.4 COSTS INCURRED FOR APPLICATION

All costs and expenses incurred in preparing and submitting an Application in response to this RFA and participating in the RFA selection process are entirely the responsibility of the Applicant.

### 8.5 APPLICATION COMPOSITION

All Applications must:

1. Be responsive to all RFA requirements;
2. Be clearly legible;
3. Be presented using font type Verdana, Arial, or Times New Roman, font size 12 pt., with one (1) inch margins and 1.5 line spacing; the sole 12-point font size exception is no less than size 10 pt. for tables, graphs, and appendices;
4. Include page numbering for each section of the proposal; and
5. Include signature of Applicant’s authorized representative on all exhibits and forms requiring a signature. Copies of the Application documents should be made after signature.

## 8.6 APPLICATION ORGANIZATION

The complete Application file .pdf must:

1. Be organized in the order outlined in the **Section XIII, Submission Checklist**, and include all required sections (e.g., “Administrative Information,” “Narrative Proposal,” “Exhibits to be Submitted with Application,” and “Addenda”)
  - a. **Exhibit J, Requested Budget Template**, is to be submitted in its original Excel format.
  - b. Each Application section must have a cover page with the Applicant’s legal name, RFA number, and Name of Grant identified.
2. Include all required documentation, exhibits, and forms completed and signed, as applicable. Copies of forms are acceptable, but all copies must be identical to the original. All exhibits must be submitted and obtained directly from the posted RFA package; previous versions and copies are not allowed or acceptable.

## 8.7 APPLICATION WITHDRAWALS OR MODIFICATIONS

Prior to the Deadline for Submission of Applications set forth in **Section 7.1, Schedule of Events**, or subsequent Addenda, an Applicant may:

1. Withdraw its Application by submitting a written request to the Sole Point of Contact; or
2. Modify its Application by submitting an entirely new submission, complete in all respects, using the method of submission set forth in this RFA. The modification must be received by HHSC by the Deadline for Submission of Applications set forth in **Section 7.1, Schedule of Events**, or subsequent Addenda.

No withdrawal or modification request received after the Deadline for Submission of Applications, set forth in **Section 7.1, Schedule of Events**, or subsequent Addenda, will be considered. Additionally, in the event of multiple Applications received, the most timely received and/or modified Application will replace the Applicant’s original and all prior submission(s) in its entirety and the original submission(s) will not be considered.

## Section IX. Application Screening and Evaluation

### 9.1 OVERVIEW

A three-step selection process will be used:

1. Application screening to determine whether the Applicant meets the minimum requirements of this RFA;
2. Evaluation based upon specific criteria; and

3. Final selection based upon State priorities and other relevant factors, as outlined in **Section 10.1, Final Selection.**

## 9.2 INITIAL COMPLIANCE SCREENING OF APPLICATIONS

All Applications received by the Deadline for Submission of Applications as outlined in **Section 7.1, Schedule of Events**, or subsequent Addenda, will be screened by HHSC to determine which Applications meet all the minimum requirements of this RFA and are deemed responsive and qualified for further consideration. See **Section 3.2, Application Screening Requirements.**

At the sole discretion of HHSC, in coordination with System Agency, Applications with errors, omissions, or compliance issues may be considered non-responsive and may not be considered. The remaining Applications will continue to the evaluation stage and will be considered in the manner and form as which they are received. HHSC reserves the right to waive minor informalities in an Application. A “minor informality” is an omission or error that, in the determination of HHSC if waived or modified, would not give an Applicant an unfair advantage over other Applicants or result in a material change in the Application or RFA requirements. **Note:** Any disqualifying factor set forth in this RFA does not constitute an informality (e.g., **Exhibit A, HHS Solicitation Affirmations v. 2.4**, or **Exhibit J, Requested Budget Template**).

HHSC, at its sole discretion, may give an Applicant the opportunity to submit missing information or make corrections at any point after receipt of Application. The missing information or corrections must be submitted to the Sole Point of Contact e-mail address in **Section 7.2, Sole Point of Contact**, by the deadline set by HHSC. Failure to respond by the deadline may result in the rejection of the Application and the Applicant’s not being considered for award.

## 9.3 QUESTIONS OR REQUESTS FOR CLARIFICATION FOR APPLICATIONS

System Agency reserves the right to ask questions or request clarification or revised documents for a submitted Application from any Applicant at any time prior to award. System Agency reserves the right to select qualified Applications received in response to this RFA without discussion of the Applications with Applicants.

## 9.4 EVALUATION CRITERIA

Applications will be evaluated and scored in accordance with the following scoring criteria using **Exhibit I, Evaluation Tool.**

**Scoring Criteria:** Qualified Applications shall be evaluated based upon:

1. Narrative Information (40%);
2. Case Management Work Plan & Performance Evaluation (45%); and
3. Expenditure Information (15%).

## 9.5 PAST PERFORMANCE

System Agency reserves the right to request additional information and conduct investigations as necessary to evaluate any Application. By submitting an Application, the Applicant generally releases from liability and waives all claims against any party providing information about the Applicant at the request of System Agency.

System Agency may examine Applicant's past performance which may include, but is not limited to, information about Applicant provided by any governmental entity, whether an agency or political subdivision of the State of Texas, another state, or the Federal government.

System Agency, at its sole discretion, may also initiate investigations or examinations of Applicant performance based upon media reports. Any negative findings, as determined by System Agency in its sole discretion, may result in System Agency removing the Applicant from further consideration for award.

Past performance information regarding Applicants may include, but is not limited to:

1. Notices of termination;
2. Cure notices;
3. Assessments of liquidated damages;
4. Litigation;
5. Audit reports; and
6. Non-renewals of grants or Contracts based on Applicant's unsatisfactory performance.

Applicants also may be rejected as a result of unsatisfactory past performance under any grant(s) or Contract(s) as reflected in vendor performance reports, reference checks, or other sources. An Applicant's past performance may be considered in the initial screening process and prior to making an award determination.

Reasons for which an Applicant may be denied a Grant Agreement at any point after Application submission include, but are not limited to:

1. If applicable, Applicant has an unfavorable report or grade on the CPA Vendor Performance Tracking System (VPTS). VPTS may be accessed at: <https://comptroller.texas.gov/purchasing/programs/vendor-performance-tracking/>, OR,
2. Applicant is currently under a corrective action plan through HHSC or DSHS, OR,

3. Applicant has had repeated, negative vendor performance reports for the same reason, OR,
4. Applicant has a record of repeated non-responsiveness to vendor performance issues, OR,
5. Applicant has Contracts or purchase orders that have been cancelled in the previous 12 months for non-performance or substandard performance, OR
6. Any other performance issue that demonstrates that awarding a Grant Agreement to Applicant would not be in the best interest of the State.

## **9.6 COMPLIANCE FOR PARTICIPATION IN STATE CONTRACTS**

Prior to award of a Grant Agreement as a result of this RFA and in addition to the initial screening of Applications, all required verification checks will be conducted.

The information (e.g., legal name and, if applicable, assumed name (d/b/a), tax identification number, DUNS number) provided by Applicant will be used to conduct these checks. At System Agency's sole discretion, applicants found to be barred, prohibited, or otherwise excluded from award of a Grant Agreement may be disqualified from further consideration under this solicitation, pending satisfactory resolution of all compliance issues.

Checks include:

### **1. State of Texas Debarment and Warrant Hold**

Applicant must not be debarred from doing business with the State of Texas (<https://comptroller.texas.gov/purchasing/programs/vendor-performance-tracking/debarred-vendors.php>) or have an active warrant or payee hold placed by the Comptroller of Public Accounts (CPA).

### **2. U.S. System of Award Management (SAM) Exclusions List**

Applicant must not be excluded from Contract participation at the federal level. This verification is conducted through SAM, the official website of the U.S. Government which may be accessed at:  
<https://www.sam.gov/SAM/pages/public/searchRecords/search.jsf>

### **3. Divestment Statute Lists**

Applicant must not be listed on the Divestment Statute Lists provided by CPA, which may be accessed at:  
<https://comptroller.texas.gov/purchasing/publications/divestment.php>

- a. Companies that boycott Israel;

- b. Companies with Ties to Sudan;
- c. Companies with Ties to Iran;
- d. Foreign Terrorist Organizations; and
- e. Companies with Ties to Foreign Terrorist Organizations.

#### **4. HHS Office of Inspector General**

Applicant must not be listed on the HHS Office of Inspector General Texas Exclusions List for people or businesses excluded from participating as a provider: <https://oig.hhsc.texas.gov/exclusions>

#### **5. U.S. Department of Health and Human Services**

Applicant must not be listed on the U.S. Department of Health and Human Services Office of Inspector General's List of Excluded Individuals/Entities (LEIE), excluded from participation as a provider, unless a valid waiver is currently in effect: <https://exclusions.oig.hhs.gov/>.

Additionally, if a subrecipient under a federal award, the Grantee shall comply with requirements regarding registration with the U.S. Government's System for Award Management (SAM). This requirement includes maintaining an active SAM registration and the accuracy of the information in SAM. The Grantee shall review and update information at least annually after initial SAM registration and more frequently as required by 2 CFR Part 25.

For grantees that may make procurements using grant funds awarded under the Grant Agreement, Grantee must check SAM Exclusions that contain the names of ineligible, debarred, and/or suspended parties. Grantee certifies through acceptance of a Grant Agreement it will not conduct business with any entity that is an excluded entity under SAM.

HHSC and System Agency reserve the right to conduct additional checks to determine eligibility to receive a Grant Agreement.

### **Section X. Award of Grant Agreement Process**

#### **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**, 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, System Agency may consult with internal and external subject matter experts. The funding methodology for issuing final Grant Agreements will depend on the availability of funding.

The System Agency will make final funding decisions based on Applicant eligibility, evaluation rankings, the funding methodology above, availability of funding and other relevant factors.

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

## **10.2 NEGOTIATIONS**

After selecting Applicants for award, System Agency may engage in negotiations with selected Applicants. As determined by System Agency, the negotiation phase may involve direct contact between the selected Applicant and HHS representatives by virtual meeting, by phone and/or by email. Negotiations should not be interpreted as a preliminary intent to award funding unless explicitly stated in writing by System Agency and is considered a step to finalize the Application to a state of approval and discuss proposed grant activities. During negotiations, selected Applicants may expect:

1. An in-depth discussion of the submitted Application and Requested Budget; and
2. Requests from System Agency for revised documents, clarification or additional detail regarding the Applicant's submitted Application. These clarifications and additional details, as required, must be submitted in writing by Applicant as finalized during the negotiation.

## **10.3 DISCLOSURE OF INTERESTED PARTIES**

Subject to certain specified exceptions, Section 2252.908 of the Texas Government Code, Disclosure of Interested Parties, applies to a Contract of a state agency that has a value of \$1 million or more; requires an action or vote by the governing body of the entity or agency before the Contract may be signed; or is for services that would require a person to register as a lobbyist under Chapter 305 of the Texas Government Code.

One of the requirements of Section 2252.908 is that a business entity (defined as "any entity recognized by law through which business is conducted, including a sole proprietorship, partnership, or corporation") must submit a Form 1295, Certificate of Interested Parties, to System Agency at the time the business entity submits the signed Contract.

Applicant represents and warrants that, if selected for award of a Grant Agreement as a result of this RFA, Applicant will submit to System Agency a completed, certified and signed Form 1295, Certificate of Interested Parties, at the time the potential Grantee submits the signed Grant Agreement.

The Form 1295 involves an electronic process through the Texas Ethics Commission (TEC). The on-line process for completing the Form 1295 may be found on the TEC public website at: [https://www.ethics.state.tx.us/whatsnew/elf\\_info\\_form1295.htm](https://www.ethics.state.tx.us/whatsnew/elf_info_form1295.htm).

Additional instructions and information to be used to process the Form 1295 will be provided by System Agency to the potential Grantee(s). Grantee may contact Sole Point of Contact or designated Contract Manager for information needed to complete Form 1295.

If the potential Grantee does not submit a completed, certified and signed TEC Form 1295 to System Agency with the signed Grant Agreement, System Agency is prohibited by law from executing a Contract, even if the potential Grantee is otherwise eligible for award. The System Agency, as determined in its sole discretion, may award the Grant Agreement to the next qualified Applicant, who will then be subject to this procedure.

#### **10.4 EXECUTION AND ANNOUNCEMENT OF GRANT AGREEMENT(S)**

The System Agency intends to award multiple Grant Agreements as a result of this RFA. However, not all Applicants who are deemed eligible to receive funds are assured of receiving a Grant Agreement.

At any time and at its sole discretion, System Agency reserves the right to cancel this RFA, make partial award, or decline to award any Grant Agreement(s) as a result of this RFA.

The final funding amount and the provisions of the grant will be determined at the sole discretion of System Agency.

HHSC may announce tentative funding awards through an “Intent to Award Letter” once the HHSC Program Deputy Executive Commissioner and/or DSHS Deputy Commissioner and relevant HHSC approval authorities have given approval to initiate and/or execute grants. Receipt of an “Intent to Award Letter” does not authorize the recipient to incur expenditures or begin project activities, nor does it guarantee current or future funding.

Upon execution of a Grant Agreement(s) as a result of this RFA, HHSC will post a notification of all grants awarded to the [HHS Grants RFA](#) website.

### **Section XI. General Terms and Conditions**

#### **11.1 GRANT APPLICATION DISCLOSURE**

In an effort to maximize state resources and reduce duplication of effort, System Agency, at its discretion, may require the Applicant to disclose information regarding the Application for or award of state, federal, and/or local grant funding to the Applicant or subgrantee or subcontractor (*i.e.*, organization who will participate, in part, in the operation of the Project) within the past two (2) years to provide case management services for CYSHCN.

## 11.2 TEXAS HISTORICALLY UNDERUTILIZED BUSINESSES (HUBS)

In procuring goods and services using funding awarded under this RFA, Grantee must use HUBs or other designated businesses as required by law or the terms of the state or federal grant under which this RFA has been issued. See, e.g., 2 CFR 200.321. If there are no such requirements, System Agency encourages Applicant to use HUBs to provide goods and services.

For information regarding the Texas HUB program, refer to CPA's website:  
<https://comptroller.texas.gov/purchasing/vendor/hub/>.

## Section XII. Application Confidential or Proprietary Information

### 12.1 TEXAS PUBLIC INFORMATION ACT – APPLICATION DISCLOSURE REQUIREMENTS

Applications and resulting Grant Agreements are subject to the Texas Public Information Act (PIA), Texas Government Code Chapter 552, and may be disclosed to the public upon request. Other legal authority also requires System Agency to post grants and applications on its public website and to provide such information to the Legislative Budget Board for posting on its public website.

Under the PIA, certain information is protected from public release. If Applicant asserts that information provided in its Application is exempt from disclosure under the PIA, Applicant must:

1. **Mark Original Application:**
  - a. Mark the Original Application, at the top of the front page, with the words “CONTAINS CONFIDENTIAL INFORMATION” in large, bold, capitalized letters (the size of, or equivalent to, 12-point Times New Roman font); and
  - b. Identify, adjacent to each portion of the Application that Applicant claims is exempt from public disclosure, the claimed exemption from disclosure (NOTE: no redactions are to be made in the Original Application);
2. **Certify in Original Application – HHS Solicitation:** Certify, in the designated section of the **Exhibit A, HHS Solicitation Affirmations**, Applicant's confidential information assertion and the filing of its Public Information Act Copy; and
3. **Submit Public Information Act Copy of Application:** Submit a separate “Public Information Act Copy” of the Original Application (in addition to the original and all copies otherwise required under the provisions of this RFA). The Public Information Act Copy must meet the following requirements:

- a. The copy must be clearly marked as “Public Information Act Copy” on the front page in large, bold, capitalized letters (the size of, or equivalent to, 12-point Times New Roman font);
- b. Each portion Applicant claims is exempt from public disclosure must be redacted (blacked out); and
- c. Applicant must identify, adjacent to each redaction, the claimed exemption from disclosure. Each identification provided as required in **Subsection (3) of this section** must be identical to those set forth in the Original Application as required in **Subsection 1(b)**, above. The only difference in required markings and information between the Original Application and the “Public Information Act Copy” of the Application will be redactions – which can only be included in the “Public Information Act Copy.” There must be no redactions in the Original Application.

**By submitting an Application under this RFA, Applicant agrees that, if Applicant does not mark the Original Application, provide the required certification in Exhibit A, HHS Solicitation Affirmations, and submit the Public Information Act Copy, the Application will be considered to be public information that may be released to the public in any manner including, but not limited to, in accordance with the Public Information Act, posted on the System Agency’s public website, and posted on the Legislative Budget Board’s public website.**

**If any or all Applicants submit partial, but not complete, information suggesting inclusion of confidential information and failure to comply with the requirements set forth in this section, System Agency, in its sole discretion, reserves the right to (1) disqualify all Applicants that fail to fully comply with the requirements set forth in this section, or (2) to offer all Applicants that fail to fully comply with the requirements set forth in this section additional time to comply.**

No Applicant should submit a Public Information Act Copy indicating that the entire Application is exempt from disclosure. Merely making a blanket claim that the entire Application is protected from disclosure because it contains any amount of confidential, proprietary, trade secret, or privileged information is not acceptable, and may make the entire Application subject to release under the PIA.

Applications should not be marked or asserted as copyrighted material. If Applicant asserts a copyright to any portion of its Application, by submitting an Application, Applicant agrees to reproduction and posting on public websites by the State of Texas, including System Agency and all other state agencies, without cost or liability.

System Agency will strictly adhere to the requirements of the PIA regarding the disclosure of public information. As a result, by participating in this RFA, Applicant acknowledges that all information, documentation, and other materials submitted in its Application may be subject to public disclosure under the PIA. The System Agency does not have authority to agree that any information submitted will not be subject to

disclosure. Disclosure is governed by the PIA and by rulings of the Office of the Texas Attorney General. Applicants are advised to consult with their legal counsel concerning disclosure issues resulting from this process and to take precautions to safeguard trade secrets and proprietary or otherwise confidential information. The System Agency assumes no obligation or responsibility relating to the disclosure or nondisclosure of information submitted by Applicants.

For more information concerning the types of information that may be withheld under the PIA or questions about the PIA, please refer to the Public Information Act Handbook published by the Office of the Texas Attorney General or contact the attorney general's Open Government Hotline at (512) 478-OPEN (6736) or toll-free at (877) 673-6839 (877-OPEN TEX). To access the Public Information Act Handbook, please visit the attorney general's website at <http://www.texasattorneygeneral.gov>.

## **12.2 APPLICANT WAIVER – INTELLECTUAL PROPERTY**

**SUBMISSION OF ANY DOCUMENT TO ANY HHS AGENCY IN RESPONSE TO THIS SOLICITATION CONSTITUTES AN IRREVOCABLE WAIVER, AND AGREEMENT BY THE SUBMITTING PARTY TO FULLY INDEMNIFY THE STATE OF TEXAS AND HHS FROM ANY CLAIM OF INFRINGEMENT REGARDING THE INTELLECTUAL PROPERTY RIGHTS OF THE SUBMITTING PARTY OR ANY THIRD PARTY FOR ANY MATERIALS SUBMITTED TO HHS BY THE SUBMITTING PARTY.**

### **Section XIII. Submission Checklist**

**HHSC, in its sole discretion, will review all Applications received and will determine if any or all Applications which do not include complete, signed copies of these exhibits and/or addenda, will be disqualified or whether additional time will be permitted for submission of the incomplete or missing exhibits. If additional time is permitted, Applicants will be notified in writing of the opportunity to provide the missing documentation by a specified deadline. Failure by an Applicant to submit the requested documentation by the deadline WILL result in disqualification. Applications that do not include Exhibit A, HHS Solicitation Affirmations v. 2.4 (completed and signed), and Exhibit J, Requested Budget Template(completed), will be disqualified. See Section 9.2, Initial Compliance Screening of Applications for further detail.**

This Submission Checklist identifies the documentation, forms and exhibits that are required to be submitted as part of the Application.

The Application must be organized in the order below and include each required section and the forms and exhibits identified within a section:

#### **1. Administrative Information**

a. Form A: Face Page \_\_\_\_\_

b. Form B: Administrative Information \_\_\_\_\_

- c. Form B-1: Governmental Entity, if applicable \_\_\_\_\_
- d. Form B-2: Non-Governmental Entity, if applicable \_\_\_\_\_

**2. Narrative Proposal [The Narrative Proposal must be titled “Narrative Proposal” and include the Applicant’s Legal Name, the RFA No., and the name of the Grant Program. Use the titles below for each required section.]**

- a. Form C, Executive Summary \_\_\_\_\_
- b. Form D, Applicant Background \_\_\_\_\_
- c. Form E-1, Case Management Work Plan \_\_\_\_\_
- d. Form E-2, Program Evaluation \_\_\_\_\_
- e. Form E-3, Case Management Required and Proposed Performance Measures \_\_\_\_\_
- f. Form F, Assessment and Project Development \_\_\_\_\_
- g. Form G, Financial Management and Administrative Questionnaire \_\_\_\_\_
- h. Form H, HHS System Indirect Cost Rate (ICR) Questionnaire \_\_\_\_\_

**3. Exhibits to be Completed, Signed, and Submitted with Application**

- a. Exhibit A, HHS Solicitation Affirmations \_\_\_\_\_

**Per Section 3.2, Application Screening Requirements, Exhibit A is mandatory and must be completed, signed and submitted for the Application to be considered responsive. Applications received without Exhibit A or with an unsigned Exhibit A will be disqualified.**

- b. Exhibit D, Certification Regarding Lobbying \_\_\_\_\_
- c. Exhibit E, Federal Funding Accountability and Transparency Act (FFATA) Certification Form \_\_\_\_\_
- d. Exhibit F, Assurances – Non-Construction Programs \_\_\_\_\_
- e. Exhibit H, Exceptions \_\_\_\_\_
- f. Exhibit J, Requested Budget Template (Excel) \_\_\_\_\_

**This Requested Budget Template is mandatory and must be submitted with the Application, in the original format (Excel), for the Application to be considered responsive. Applications received**

**without the completed Requested Budget Template will be disqualified.**

- 4. Addenda:** Each Addendum, if any, must be signed and submitted with the Application.

## **Section XIV. List of Exhibits and Forms Attached to RFA**

### **Exhibits**

Exhibit A, HHS Solicitation Affirmations v. 2.4

Exhibit B, HHS Uniform Terms and Conditions – Grant v. 3.3

Exhibit C, HHS Additional Provisions – Grant Funding v. 1.0

Exhibit D, Certification Regarding Lobbying

Exhibit E, Federal Funding Accountability and Transparency Act (FFATA) Certification Form

Exhibit F, Assurances – Non-Construction Programs

Exhibit G, HHS Online Bid Room Instructions

Exhibit H, Exceptions

Exhibit I, Evaluation Tool

Exhibit J, Requested Budget Template

### **Forms**

Form A, Applicant Information

Form B, Administrative Information

Form B-1, Governmental Entity, if applicable

Form B-2, Non-Governmental Entity, if applicable

Form C, Executive Summary

Form D, Applicant Background

Form E-1, Case Management Work Plan

Form E-2, Program Evaluation

Form E-3, Case Management Required and Proposed Performance Measures

Form F, Assessment and Project Development

Form G, Financial Management and Administrative Questionnaire

Form H, HHS System Indirect Cost Rate (ICR) Questionnaire