



TEXAS

Health and Human Services

Phil Wilson, Interim Executive Commissioner

**Request for Applications
for
Children's Autism Grants Program**

RFA No. HHS0006939

**Date of Release: April 9, 2020
Responses Due: May 11, 2020 by 2:00 P.M. CST**

NIGP Class/Item Codes:

- 948/48 Health Care Services (not otherwise classified)**
- 948/74 Professional Medical Services: Physicians, Pharmacists and All Specialties**
- 948/76 Psychologists, Psychological and Psychiatric Svcs, Including Behavior Mgmt Svcs**
- 952/59 Human Services (Not Otherwise Classified)**
- 952/67 Parenting Intervention Services**
- 952/85 Support Services**

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ARTICLE I. EXECUTIVE SUMMARY, DEFINITIONS, AND AUTHORITY

1.1 EXECUTIVE SUMMARY

The Health and Human Services Commission (**HHSC**), for and on behalf of its Office of Primary and Specialty Health (**OPSH**), seeks to establish grant Contracts in each of the eleven HHSC Regions with Applicants capable of providing Applied Behavior Analysis services through the HHSC Children’s Autism Program (**Program**) to children ages three (3) through fifteen (15) with autism in accordance with the scope of services contained in this Request for Applications (**RFA**).

To be considered for award, Applicants must execute **Exhibit A, Affirmations and Solicitation Acceptance**, of this Solicitation and provide all other required information and documentation as set forth in this Solicitation.

1.2 DEFINITIONS

Refer to **Exhibit B, HHSC Uniform Terms and Conditions - Grant** and **Exhibit D, Draft Children’s Autism Grant Contract (Autism Contract)** for additional definitions. Additionally, as used in this Solicitation, unless the context clearly indicates otherwise, the following terms and conditions have the meanings assigned below:

“**ABA**” means as defined by *Texas Administrative Code (TAC) [Title 40, Part 2, Chapter 105, Subchapter A, §105.105\(3\)](#)* Title 40, Part 2, Chapter 105, Subchapter A, §105.105(3), Applied Behavior Analysis -- “[t]he designs, implementation, and evaluation of systematic environmental changes to produce socially significant change in human behavior through skill acquisition and the reduction of problematic behavior. Applied behavior analysis includes direct observation and measurement of behavior and the identification of functional relations between behavior and the environment. Contextual factors, establishing operations, antecedent stimuli, positive reinforcers, and other consequences are used to produce the desired behavior change.”

“**Addendum**” means a written clarification or revision to this Solicitation issued by HHSC.

“**Apparent Recipient**” means an organization that has been selected to receive a grant award through response to this RFA but has not yet executed a grant agreement or contract. May also be referred to as “**Apparent Grant Awardee**” or “**Apparent Grantee**.”

“**Applicant**” means the entity responding to this Solicitation. May also be referred to as “Respondent.”

“**Autism Spectrum Disorder**” mean as defined by *TAC [Title 40, Part 2, Chapter 105, Subchapter A, §105.105\(4\)](#)*. “The disorders found in the current edition of the Diagnostic and Statistical Manual of Mental Disorders (“**DSM**”) related to autism. An Autism Spectrum Disorder (“**ASD**”) diagnosis of autistic disorder, Asperger's disorder, or pervasive developmental disorder not otherwise specified, made under a previous DSM, is acceptable.”

“BCBA” or “BCBA-D” means a master’s or doctoral level Board Certified Behavior Analyst who is licensed in Texas

“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 a child between the ages of three (3) through fifteen (15) years of age with diagnoses on the autism spectrum or said child’s respective family, which is limited to parents or legal guardians of the child.

“Diagnosis” means the process of identifying a medical condition or disease by its signs, symptoms, and from the results of various diagnostic procedures. The conclusion reached through this process is called a Diagnosis. For the purposes of this RFA, a medical doctor, pediatrician, neurologist, psychologist, or psychiatrist with a background related to diagnosis and treatment may diagnose. Documentation of the diagnosis may include but is not limited to an evaluation or assessment report, a well child check or a prescription.

“Direct costs” means those costs that can be identified specifically with a particular final cost objective, such as a Federal award, 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.

“ESBD” means the Electronic State Business Daily, the electronic marketplace where State of Texas contract opportunities over \$25,000.00 are posted. The ESBD may currently be accessed at <http://www.txsmartbuy.com/sp>

“FERPA” means the Family Educational Rights and Privacy Act of 1974.

“Fiscal Year” – is the state of Texas fiscal year from September 1 through August 31 of each year. This is not to be confused with federal fiscal year or federal grant project periods.

“HHS Grants Website” - the website where HHSC announces the availability of grant funds. The HHS Grants website may currently be accessed at: <https://apps.hhs.texas.gov/pcs/rfa.cfm>.

“Health and Human Services Commission” or “HHSC” means the administrative agency established under *Texas Government Code* Chapter 531 or its designee.

“HIPAA” means the Health Insurance Portability and Accountability Act.

“Indirect Costs” 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 Cost Rate” is a percentage used to apportion indirect costs to all shared cost centers. An indirect cost rate is simply a device for determining fairly and conveniently within the boundaries of sound administrative principles, what proportion of indirect cost each program should bear.

“[Indirect Cost Rate Proposal](#)” is the documentation prepared by an organization requesting an indirect cost rate. This package normally includes the proposal, related audited financial statements, and other detail supports such as general ledger, trial balance, etc. Recipients must use the HHS Indirect Cost Rate Proposal templates when requesting to negotiate an indirect cost rate with HHS.

“[IEP](#)” means Individualized Education Program.

“[Key Personnel](#)” means an Applicant’s project contact, fiscal contact, and executive director and/or any other key stakeholders in the Proposed Project.

“[Project](#)” means the work and activities for which grant funding is awarded and information is provided as part of the response to this Solicitation. During the open application period and before selection of grant recipients are made, the Project will be known as the Proposed Project.

“[RFA](#)” means this Request for Applications including any exhibits, attachments, and/or addenda, if any. Also, may be referred to as “[Solicitation](#)” in this RFA, including any exhibits, attachments, and/or Addenda.

“[State](#)” means the State of Texas and its instrumentalities, including HHSC, the System Agency and any other state agency, its officers, employees, or authorized agents.

“[Successful Applicant](#)” Applicant and/or entity that has been selected for award under this RFA.

“[Texas Health and Human Services agencies](#)” as used in this Solicitation, exhibits, attachments or Addenda, means both HHSC and the Texas Department of State Health Services, separately or combined.

1.3 AUTHORITY

HHSC is soliciting the service listed herein pursuant to *Texas Human Resources Code* §117.082, *TAC* Title 40, Part 2, Chapter 105, and *TAC* Title 1, Part 15, Chapter 392, Subchapter C, and in accordance with *Texas Government Code* Chapter 531, including Sections 531.0055 and 531.065

ARTICLE II. SCOPE OF GRANT AWARD

2.1 PROGRAM BACKGROUND

The Program provides focused ABA services to children, ages three through fifteen residing in Texas with a documented diagnosis on the autism spectrum made by a qualified professional.

Service provided by this program is focused ABA. This service is provided through contracts with for-profit and nonprofit agencies, universities, and hospital districts. The Program is payor of last resort for a Client who is enrolled on any other non-HHSC program that provides payment for the cost of the same Autism service at the time he or she presents for that service. Current program

rules are found in the [TAC Title 40, Part 2, Chapter 105](#) and [TAC Title 1, Part 15, Chapter 392, Subchapter C](#). These rules describe the requirements and eligibility for the Program.

2.2 GRANT AWARD AND TERM

2.2.1 Available Funding

The Program is funded by State general revenue and will be awarded competitively through this RFA. The total amount of state funding available for the FY 2021-2025 Autism Grants is **\$35,942,175.00**, which will be allocated based upon the need of each HHSC region. It is HHSC's intention to make multiple awards through this Solicitation.

There is no matching requirement and a Grantee will be reimbursed for allowable Autism services using established reimbursement rates through this Program. Grantees must bill HHSC on a monthly basis for services delivered using invoice templates provided annually by HHSC. There will be no initial or advance payment.

2.2.2 Grant Term

It is anticipated that the grant funding period awarded under this Solicitation will begin September 1, 2020 and terminate on **August 31, 2021**. Subject to the availability of funds, HHSC, at its sole discretion, may extend this Contract for any period(s) of time, provided the Contract term, including all extensions or renewals, does not exceed five years.

Notwithstanding the limitation in the preceding paragraph, HHSC, at its sole discretion, also may extend the Contract beyond five years as necessary to ensure continuity of service, for purposes of transition, or as otherwise determined by HHSC to serve the best interest of the state of Texas.

Reimbursement will only be made for those actual, allowable, and allocable expenses that occur within the term of the grant. No pre-award costs will be eligible for reimbursement.

2.3 ELIGIBLE APPLICANTS

Applications will be reviewed for minimum qualifications and completeness (**Exhibit F, Response Screening Questions**). Applications with significant errors, omissions, or eligibility issues may not be screened or evaluated at HHSC's sole discretion. All complete Applications meeting the minimum qualifications will move to the evaluation stage.

2.4 PROGRAM REQUIREMENTS

To meet the mission and objectives of the Program, Successful Applicants must be in compliance with all Program requirements as set forth within **Exhibit D, Autism Contract**, which is attached and incorporated by reference hereto.

2.5 SCOPE

HHSC seeks qualified Applicants to provide Program services in all HH SC regions throughout the state of Texas.

The Successful Applicants shall provide services for children with autism ages three (3) through fifteen (15) utilizing ABA as described in **Exhibit D, Autism Contract**. No physically aversive interventions are permitted. The scope of services for any Contract awarded under this RFA shall not include providing services to children younger than three (3) years of age or older than fifteen (15) years of age.

Additionally, Successful Applicants shall provide services that are not included as part of a child's Individualized Educational Program (**IEP**) if such a program exists.

For additional descriptions of contractually required Program services see **Exhibit D, Autism Contract**.

2.6 INDIRECT COST RATES

All Applicants requesting reimbursement for indirect costs are required to complete and submit **Attachment J, Texas Health and Human Services System ICR Questionnaire**, along with the required supporting documentation as referenced in **Attachment J, Texas Health and Human Services System ICR Questionnaire** associated with the Applicant's response. This questionnaire will initiate the acknowledgment or approval of an ICR for use with the HHSC cost-reimbursable contracts.

HHSC will recognize the following pre-approved Indirect Cost Rates:

- A. Federally Approved Indirect Cost Rate Agreement; and
- B. State of Texas Approved Indirect Cost Rate

If the Applicant does not have one of the options listed above, then the Applicant may be eligible for the 10% De Minimis rate or to request to negotiate an ICR with HHSC. For Applicants requesting to negotiate an ICR with HHSC, the HHSC ICR Proposal Package must be completed in conjunction with the "ICR Questionnaire" no later than ninety (90) calendar days after Contract execution.

The HHSC Federal Funds ICR team will outreach to applicable Applicants after contract award to complete the ICR process. Applicants should respond within thirty (30) business days or the request will be cancelled.

Once HHSC acknowledges an existing rate, or approves an ICR, the Grantee will receive one of the three (3) indirect cost approval letters: ICR Acknowledgement Letter, ICR Acknowledgement Letter – Ten Percent De Minimis, or the ICR Agreement Letter.

If an ICR Letter is required but it is not issued at the time of contract execution, the Parties agree to amend the Contract to include the ICR Letter and revise Attachment I of **Exhibit D, Children's Autism Grant Contract**, when the ICR Letter is issued.

If HHSC, at its sole discretion, approves or acknowledges an updated ICR, the new rate, together with the revised ICR Acknowledgement Letter, ICR, ICR Acknowledgement Letter – Ten Percent De Minimis, or the ICR Agreement Letter, will be included in the revised Attachment I, of **Exhibit D, Children's Autism Contract**.

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.

2.7 PERFORMANCE MEASURES

HHSC will monitor the performance of the Contract awarded under this RFA. All services and deliverables under the Contract shall be provided in a manner consistent with acceptable industry standard, custom, and practice. Successful Applicant(s) shall ensure services are provided as outlined in OPSH contract. Successful Applicant(s) shall report on minimum goals and outcomes in accordance with Section II of Attachment A to **Exhibit D, Autism Contract**.

2.8 PROHIBITIONS

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

- A. Inherently religious activities such as prayer, worship, religious instruction, or proselytization;
- B. Lobbying;
- C. Any portion of the salary of, or any other compensation for, an elected or appointed government official;
- D. Vehicles or equipment for government agencies that are for general agency use and/or do not have a clear nexus to terrorism prevention, interdiction, and disruption (i.e. mobile data terminals, body cameras, in-car video systems, or radar units, etc. for officers assigned to routine patrol);
- E. Weapons, ammunition, tracked armored vehicles, weaponized vehicles or explosives (exceptions may be granted when explosives are used for bomb squad training);
- F. Admission fees or tickets to any amusement park, recreational activity or sporting event;
- G. Promotional gifts;
- H. Food, meals, beverages, or other refreshments, except for eligible per diem associated with grant-related travel or where pre-approved for working events;
- I. Membership dues for individuals;
- J. Any expense or service that is readily available at no cost to the grant Project;
- K. Any use of grant funds to replace (supplant) funds that have been budgeted for the same purpose through non-grant sources;
- L. Fundraising;
- M. Statewide Projects;
- N. Any other prohibition imposed by federal, State, or local law; and
- O. The acquisition or construction of facilities.

2.9 STANDARDS

Grantees must comply with the requirements applicable to this funding source cited in the *Uniform Grant Management Standards (UGMS)*, and all statutes, requirements, and guidelines applicable to this funding.

Grantees are required to conduct Project activities in accordance with federal and state laws prohibiting discrimination. Guidance for adhering to non-discrimination requirements can be found on the HHSC Civil Rights Office website at: <https://hhs.texas.gov/about-hhs/your-rights/civil-rights-office>.

Upon request, a Grantee must provide the HHSC Civil Rights Office with copies of all the Grantee's civil rights policies and procedures. Grantees must notify HHSC's Civil Rights Office of any civil rights complaints received relating to performance under the contract no more than ten calendar days after receipt of the complaint. Notice must be directed to:

HHSC Civil Rights Office
701 W. 51st Street, Mail Code W206
Austin, TX 78751
Phone Toll Free (888) 388-6332
Phone: (512) 438-4313
TTY Toll Free (877) 432-7232
Fax: (512) 438-5885

A Grantee must ensure that its policies do not have the effect of excluding or limiting the participation of persons in the Grantee's programs, benefits or activities on the basis of national origin, and must take reasonable steps to provide services and information, both orally and in writing, in appropriate languages other than English, in order to ensure that persons with limited English proficiency are effectively informed and can have meaningful access to programs, benefits, and activities.

2.10 DATA USE AGREEMENT

By entering into a grant agreement with HHSC as a result of this Solicitation, Applicant agrees to be bound by the terms of **Exhibit E, the Texas Health and Human Services System Data Use Agreement (DUA) and Exhibit E-1, Security Privacy Inquiry (SPI) referenced in Section 3.01(B)(10) of the DUA.**

2.11 NO GUARANTEE OF VOLUME, USAGE OR COMPENSATION

HHSC makes no guarantee of volume, usage, or total compensation to be paid to any Applicant under any awarded Grant, if any, resulting from this Solicitation, any awarded Grant is subject to appropriations and the continuing availability of funds.

HHSC reserves the right to cancel, make partial award, or decline to award a Grant under this Solicitation at any time at its sole discretion.

There should be no expectation of additional or continued funding on the part of the Grantee. Any additional funding or future funding may require submission of an application through a subsequent RFA.

ARTICLE III. ADMINISTRATIVE INFORMATION

3.1 SCHEDULE OF EVENTS

EVENT	DATE/TIME
Solicitation Release Date	April 9, 2020
Pre-bid Webinar (optional)	April 16, 2020 at 11:00 AM
Deadline for Submitting Questions	April 22, 2020 by 4:00 PM
Estimated Posting Date for Answers to Questions	April 29, 2020
Deadline for submission of Solicitation Responses [NOTE: Responses must be <u>RECEIVED</u> by HHSC by the deadline.]	May 11, 2020 by 2:00 PM CST
Anticipated Notice of Award	Mid-August 2020
Anticipated Contract Start Date	September 1, 2020

Note: These dates are a tentative schedule of events. HHSC reserves the right to modify these dates at any time upon notice posted to the [ESBD](#), [HHSC Grants](#), and [Texas.gov eGrants](#) websites. Any dates listed after the Solicitation Response deadline will occur at the discretion of HHSC and may occur earlier or later than scheduled without notification on the [ESBD](#), [HHSC Grants](#), and [Texas.gov eGrants](#) websites.

3.2 CHANGES, AMENDMENT OR MODIFICATION TO SOLICITATION

HHSC reserves the right to change, amend or modify any provision of this Solicitation, or to withdraw this Solicitation, at any time prior to award, if it is in the best interest of HHSC and will post such on the [ESBD](#), [HHSC Grants](#), and [Texas.gov eGrants](#) websites. It is the responsibility of the Applicant to periodically check the [ESBD](#) and [HHSC Grants](#) websites to ensure full compliance with the requirements of this Solicitation.

3.3 IRREGULARITIES

Any irregularities or lack of clarity in this Solicitation should be brought to the attention of the Point-of-Contact listed in **Section 3.4.1, Sole Point of Contact**, as soon as possible so corrective addenda may be furnished to prospective Applicants.

3.4 INQUIRIES

3.4.1 Sole Point-of-Contact

All requests, questions, or other communication about this Solicitation shall be made in writing to HHSC's Point-of-Contact addressed to the person listed below. All communications between Applicants and other Texas Health and Human Service agencies' staff members concerning the Solicitation are strictly prohibited, unless noted elsewhere in this RFA. **Failure to comply with these requirements may result in disqualification of Applicant's Solicitation Response.**

Name: Carolyn DeBoer, CTCD, CTCM
Title: PCS Grants Specialist
Address: 1100 W. 49th St., MC 2020, Austin, TX, 78746
Email: carolyn.deboer@hhsc.state.tx.us

However, if expressly directed in writing by the Sole Point of Contact, Respondent may communicate with another designated System Agency representative, e.g., during contract negotiations, if any.

3.4.2 Prohibited Communications

All communications between Applicant and other Texas Health Service agencies' staff members concerning the Solicitation may not be relied upon and responded should send all questions or other communications to the contact listed in **Section 3.4.1, Sole Point of Contact**. This restriction does not preclude discussions between affected Parties for the purposes of conducting business unrelated to this Solicitation. **Failure to comply with these requirements may result in disqualification of Applicant's Solicitation Response.**

3.4.3 Questions

HHSC will allow written questions and requests for clarification of this Solicitation. Questions must be submitted in writing and sent by U.S. First class mail or email to the Point of Contact listed in **Section 3.4.1, Sole Point of Contact**, above. Applicants' names will be removed from questions in any responses released. Questions shall be submitted in the following format. Submissions that deviate from this format may not be accepted:

- A. Identifying Solicitation number;
- B. Section Number;
- C. Paragraph Number;
- D. Page Number;
- E. Text of passage being questioned; and
- F. Question

Note: Questions or other written requests for clarification must be received by the Point-of-Contact by the deadline set forth in Section 3.4.1, Sole Point of Contact, above. However, HHSC, at its sole discretion, may respond to questions or other written requests received

after the deadline. Please provide entity name, address, phone number; fax number, e-mail address, and name of contact person when submitting questions.

3.4.4 Clarification Request Made by Applicant

Applicants must notify the Point-of-Contact of any ambiguity, conflict, discrepancy, exclusionary specifications, omission or other error in the Solicitation in the manner and by the deadline for submitting questions.

3.4.5 Responses

Responses to questions or other written requests for clarification will be posted on the [ESBD](#) and [HHSC Grants](#) websites. HHSC reserves the right to amend answers prior to the deadline for submission of Solicitation Responses. Amended answers will be posted on the [ESBD](#) and [HHSC Grants](#) websites. It is the Applicant's responsibility to check the [ESBD](#) and [HHSC Grants](#) websites. HHSC also reserves the right to provide a single consolidated response of all similar questions in any manner at HHSC's sole discretion.

3.4.6 Applicant Conference

HHSC will conduct an **optional** Pre-Submittal Webinar on **April 16, 2020 at 11:00 AM CST**. Applicants will need to register for the webinar using the following weblink:

<https://attendee.gotowebinar.com/register/8225607421268372237>

3.5 SOLICITATION RESPONSE COMPOSITION

3.5.1 Generally

All Applications must be:

- A. Clearly legible;
- B. Sequentially page-numbered and include the Applicant's name at the top of each page;
- C. Organized in the sequence outlined in **Article IX** - Submission Checklist;
- D. In Arial or Times New Roman font, size 12 or larger for normal text, no less than size 10 for tables, graphs, and appendices;
- E. Blank forms provided in the Attachments must be used (electronic reproduction of the forms is acceptable; however, all forms must be identical to the original form(s) provided); do not change the font used on forms provided;
- F. Correctly identified with the RFA number and submittal deadline;
- G. Responsive to all RFA requirements; and
- H. Signed by an authorized official in each place a signature is needed (copies must be signed but need not bear an original signature).

3.5.2 Submission in Separate Parts

- A. Administrative Information, including all forms;
- B. Narrative Proposal, including all forms;
- C. Budget Proposal; and
- D. Applicable Exhibits and Required Forms.

Electronic submissions must be separated by parts using file names that related to each part and submitted on a USB drive (i.e. flash drive).

The entire Solicitation Response – all electronic copies – must then be submitted in one package to HHSC at the address listed in **Section 3.6.3, Delivery**. The number of copies and directions for submitting an "Original" and "Copies" are outlined in **Article IX - Submission Checklist**.

3.5.3 Page Limit and Supporting Documentation

The Narrative/ Technical Proposal should not exceed **fifty pages** in length, not including appendices, resumes, or attachments, and should be formatted as follows: 8 1/2" x 11" paper and 12 pitch font size. If complete responses cannot be provided without referencing supporting documentation, such documentation must be provided with the Solicitation Response, with specific reference made to the tab, page, section, and/or paragraph where the supporting information can be found.

Unnecessarily elaborate proposals beyond those sufficient to provide a complete and effective response to this Solicitation are not desired and may be construed as an indication of the Applicant's lack of ability to provide efficient work products. HHSC reserves the right not to review information provided in excess of the page limits. Applicants need not feel compelled to submit unnecessary text in order to reach the page limits. Applicants should not submit information or attachments not explicitly requested in the Solicitation. Elaborate artwork, expensive paper and bindings, and expensive visual or other presentation aids are neither necessary nor desired.

3.6 SOLICITATION RESPONSE SUBMISSION AND DELIVERY

3.6.1 Deadline

Solicitation Responses must be received at the address in **Section 3.6.3, Delivery** time-stamped by HHSC no later than the date and time specified in **Section 3.1, Schedule of Events**.

3.6.2 Labeling

Solicitation Responses shall be placed in a sealed box and clearly labeled as follows:

<u>SOLICITATION NO.:</u>	HHS0006939
<u>SOLICITATION NAME:</u>	Children's Autism Program Grants
<u>RESPONSE DEADLINE:</u>	May 11, 2020 by 2:00 P.M. CST
<u>PURCHASER'S NAME:</u>	Carolyn R. DeBoer

APPLICANT'S NAME: _____

HHSC will not be held responsible for any Solicitation Response that is mishandled prior to receipt by HHSC. It is the Applicant's responsibility to mark appropriately and deliver the Solicitation Response to HHSC by the specified date and time.

3.6.3 Delivery

Applicant must deliver Solicitation Responses by one of the methods below to the address noted. Solicitation Responses submitted by any other method (e.g. facsimile, telephone, email) will NOT be considered.

Submission Option #1: Respondent shall submit the following on two USB drives – One (1) labeled "Original" and One (1) labeled "Copy"- to the mailing address identified in this section:

- a. Each USB must contain one file named "Original Proposal" that contains the Respondent's entire proposal in searchable portable document format (PDF).
- b. In accordance with **Section 8.1.3, Public Information Act**, one file named "Public Information Copy" that contains the Respondent's entire proposal in searchable PDF, if applicable.

To be delivered by U.S. Postal Service, overnight or express mail, or hand delivery to:

U.S. Postal Service/Overnight/Express Mail/Hand Delivery
Health and Human Services Commission Procurement and Contracting Services Building Attn: Response Coordinator 1100 W 49th. MC 2020 Austin, Texas 78756

Note: All Solicitation Responses become the property of HHSC after submission and will not be returned to Applicant.

3.6.4 Alterations, Modifications, and Withdrawals

Prior to the Solicitation submission deadline, an Applicant may: (1) withdraw its Solicitation Response by submitting a written request to the Point-of-Contact identified in **Section 3.4.1, Sole Point of Contact**; or (2) modify its Solicitation Response by submitting a written amendment to the Sole Point-of-Contact identified in **Section 3.4.1, Sole Point of Contact**. HHSC may request Solicitation Response Modifications at any time.

ARTICLE IV. SOLICITATION RESPONSE EVALUATION AND AWARD PROCESS

4.1 GENERALLY

A three-step selection process will be used:

- A. Eligibility screening;
- B. Evaluation based upon specific selection criteria; and
- C. Final Selection based upon State of Texas priorities.

4.2 ELIGIBILITY SCREENING

Applications will be reviewed for minimum qualifications and completeness (**Exhibit F, Response Screening Questions**). Applications with significant errors, omissions, or eligibility issues may not be screened or evaluated at HHSC's sole discretion. All complete Applications meeting the minimum qualifications will move to the evaluation stage.

4.3 EVALUATION

Applications will be evaluated and scored in accordance with the factors required by this procurement package using **Exhibit G, Evaluation Score Tool** and other factors deemed relevant by HHSC.

HHSC will evaluate proposals based on the following evaluation criteria:

- A. Narrative Proposal (**Article V**);
- B. Applicant Organization (**Attachment A, Part A**);
- C. Technical Approach (**Attachment A, Part B**);
- D. Reasonableness of Rate Proposal (**Attachment B** and **Attachment C**);

4.3.1 Specific Selection Criteria

Grant applications shall be evaluated by an Evaluation Selection Committee based upon the following criteria and weights. See also, **Exhibit G, Evaluation Score Tool**.

- A. Narrative Proposal (5%);
- B. Applicant Organization (40%);
- C. Technical Approach (50%);
- D. Reasonableness of Rate (10%)

4.4 FINAL SELECTION

HHSC intends on making multiple awards under this Solicitation. After initial screening for eligibility, application completeness, and initial scoring of the elements listed above in **Section 4.3, Evaluation**, an Evaluation Selection Committee will review all eligible Applicants to determine which applications should be awarded in order to most effectively accomplish State of Texas priorities. The Evaluation Selection Committee will recommend Grant contract awards to be made to the HHSC Executive Commissioner, who will make the final award approval.

HHSC will make all final funding decisions based on eligibility, geographic distribution across the state, state priorities, reasonableness, availability of funding, cost-effectiveness, or other relevant factors.

4.5 NEGOTIATION AND AWARD

The specific dollar amount awarded to each Successful Applicant will depend upon the merit and scope of the Application, the recommendation of the Selection Committee, and the decision of the Executive Commissioner. Not all Applicants who are deemed eligible to receive funds are assured of receiving an award.

The negotiation phase will involve direct contact between the Successful Applicant and HHSC representatives via phone and/or email. During negotiations, Successful Applicants may expect:

- A. An in-depth discussion of the submitted proposal and budget; and
- B. Requests from HHSC for clarification or additional detail regarding submitted Application.

The final funding amount and the provisions of the Contract will be determined at the sole discretion of HHSC staff.

HHSC may announce tentative or apparent Grantees once the Executive Commissioner has given approval to initiate negotiation and execute contracts.

Any exceptions to the requirements, terms, conditions, or certifications in the RFA or attachments, addendums, or revisions to the RFA or Additional Provisions, sought by the Applicant must be specifically detailed in writing by the Applicant on Exhibit H, Exceptions Form in this proposal and submitted to HHSC for consideration. HHSC will accept or reject each proposed exception. HHSC will not consider exceptions submitted separately from the Applicant's proposal or at a later date.

HHSC will post to the [ESBD](#) and [HHSC Grants](#) websites, and may publicly announce a list of Applicants whose Applications are selected for final award. This posting does not constitute HHSC's agreement with all the terms of any Applicant's proposal and does not bind HHSC to enter into a contract with any Applicant whose award is posted.

4.6 QUESTIONS OR REQUESTS FOR CLARIFICATION BY THE HHSC

HHSC reserves the right to ask questions or request clarification from any Applicant at any time during the Application process.

ARTICLE V. NARRATIVE PROPOSAL

5.1 NARRATIVE PROPOSAL

5.1.1 Executive Summary

Provide a high-level overview of the Applicant's approach to meeting this RFA's requirements. The summary must demonstrate an understanding of the goals and objectives of the Grant.

5.1.2 Project Work Plan

Utilizing Attachments A, Grant Application, D, Key Personnel, E, Focused ABA Services Treatment Strategies Chart, F, HHSC Regional Coverage Map, G, CAP Texas Counties and Regions and H, Contact Person Information CAP Services of this RFA, Applicants will describe the proposed services, processes, and methodologies for meeting all components described in **Article II, Scope of Grant Award**, including the Applicant's approach to meeting the timeline and associated milestones. Applicant should identify all tasks to be performed, including all project activities, to take place during the grant funding period. Applicant will also include all documents requested as part of completing forms to demonstrate fulfilling **Article II, Scope of Grant Award** requirements.

ARTICLE VI. REQUIRED APPLICANT INFORMATION

6.1 ADMINISTRATIVE ENTITY INFORMATION

Applicant must provide satisfactory evidence of its ability to manage and coordinate the types of activities described in this Solicitation. As a part of the Solicitation Response requested in **Article III, Administrative Information**, Applicant must provide all the required exhibits, attachments and forms in **Article IX, Submission Checklist**.

6.2 LITIGATION AND CONTRACT HISTORY

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

In addition, Applicant must disclose any civil or criminal litigation or investigation pending over the last five 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.

Solicitation Response 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 obligations.

6.3 CONFLICTS

Applicant must certify that it does not have any personal or business interests that present a conflict of interest with respect to the RFA and any resulting contract. Additionally, if applicable, the Applicant must disclose all potential conflicts of interest. Applicant must describe the measures it will take to ensure that there will be no actual conflict of interest and that its fairness, independence and objectivity will be maintained. HHSC will determine to what extent, if any, a potential conflict of interest can be mitigated and managed during the term of the contract. Failure to identify actual and potential conflicts of interest may result in disqualification of a Solicitation Response or termination of a contract.

Please include any activities of affiliated or parent organizations and individuals who may be assigned to this Contract, if any.

Additionally, pursuant to Section 2252.908 of the Texas Government Code, a Successful Applicant awarded a Contract with a value of \$1 million or more or awarded a Contract that would require the Successful Applicant to register as a lobbyist under Texas Government Code Chapter 305, must submit a disclosure of interested parties to HHSC at the time the business entity submits the signed Contract. Rules and filing instructions may be found on the Texas Ethics Commissions public website and additional instructions will be given by HHSC to Successful Applicants.

6.4 GRANT APPLICATION DISCLOSURE

In an effort to maximize State resources and reduce duplication of effort, HHSC, at its discretion, may require the Applicant to disclose information regarding the application for or award of State, federal, and/or local grant funding by the Applicant within the past two (2) years to provide HHSC Program services.

6.5 AFFIRMATIONS AND CERTIFICATIONS

Applicant must complete and return all of the following listed forms and exhibits. Exhibits are listed following **Article IX, Submission Checklist**.

- A. **Exhibit A, Applicant Affirmations and Solicitation Acceptance; and**
- B. **Exhibit H, Exceptions**

ARTICLE VII. RATE PROPOSAL

7.1 RATE PROPOSAL

Attached **Attachments B, Hourly Rate Workbook and C, Hourly Rate Sheet** of this RFA includes the template for submitting the Rate Proposal. Applicants must complete these forms and place it in a separate, sealed package, clearly marked with the Applicant's name, the RFA number, and the RFA submission date.

Applicants must base their Rate Proposal, **Attachments B, Hourly Rate Workbook and C, Hourly Rate Sheet** on the Scope of Work described in **Article II, Scope of Grant Award**. This section should include any business, economic, legal, programmatic, or practical assumptions that underlie the Expenditure Proposal. HHSC reserves the right to accept or reject any assumptions. All assumptions not expressly identified and incorporated into the contract resulting from this RFA are deemed rejected by HHSC.

Applicants must demonstrate that Project costs outlined in the Rate Proposal are reasonable, allowable, allocable, and developed in accordance with applicable state and federal grant requirements.

Applicant must utilize the HHSC template provided: **Attachments B, Hourly Rate workbook and C, Hourly Rate Sheet**, and identify costs to be requested from HHSC. Costs must be broken out to a degree that is sufficient to determine if costs are reasonable, allowable, and necessary for the successful performance of the Project.

HHSC will review Costs for compliance with UGMS, with effect given to whichever provision imposes the more stringent requirement in the event of a conflict.

Applicant will enter costs included in the Rate Proposal into budget tables and supported by narrative descriptions describing the need for the requested cost and a calculation demonstrating how the proposed cost was calculated.

ARTICLE VIII. GENERAL TERMS AND CONDITIONS

8.1 GENERAL CONDITIONS

8.1.1 Costs Incurred

Applicants understand that issuance of this Solicitation in no way constitutes a commitment by HHSC to award a Contract or to pay any costs incurred by an Applicant in the preparation of a response to this Solicitation. HHSC is not liable for any costs incurred by an Applicant prior to issuance of or entering into a formal agreement, contract, or purchase order. Costs of developing Solicitation Responses or any other similar expenses incurred by an Applicant are entirely the responsibility of the Applicant and will not be reimbursed in any manner by the state of Texas.

8.1.2 Contract Responsibility

HHSC will look solely to Applicant for the performance of all contractual obligations that may result from an award based on this Solicitation. Applicant shall not be relieved of its obligations for any nonperformance by its subcontractor.

8.1.3 Public Information Act

Solicitation Responses 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 contracts and proposals 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 an Applicant asserts that information provided in its Solicitation Response is exempt from disclosure under the PIA, Applicant must:

a. Mark Original Application:

1. Mark the Original Application, on the top of the front page, the words “CONTAINS CONFIDENTIAL INFORMATION” in large, bold, capitalized letters (the size of, or equivalent to, 12-point Times New Roman font or larger); and
2. Identify, adjacent to each portion of the Solicitation Response that Applicant claims is exempt from public disclosure, the claimed exemption from disclosure (NOTE: no redactions are to be made in the Original Application);

b. Certify in Original Application - Affirmations and Solicitation Acceptance (attached as Exhibit A to this Solicitation):

Certify, in the designated section of the Affirmations and Solicitation Acceptance, Applicant’s confidential information assertion and the filing of its Public Information Act Copy; and

c. Submit Public Information Act Copy of Proposal:

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 Solicitation). The Public Information Act Copy must meet the following requirements:

1. 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 or larger);
2. Each portion Applicant claims is exempt from public disclosure must be redacted (blacked out); and
3. Applicant must identify, adjacent to each redaction, the claimed exemption from disclosure. Each identification provided as required in Subsection (c) of this section must be identical to those set forth in the Original Application as required in Subsection (a)(2), 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 a response to this Solicitation, Applicant agrees that, if Applicant does not mark the Original Application, provide the required certification in the

Affirmations and Solicitation Acceptance, and submit the Public Information Act Copy, Applicant's proposal 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 and in any solicitation, 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.

Applicant should not 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 proposal, by submitting a proposal, Applicant agrees to reproduction and posting on public websites by the State of Texas, including the System Agency and all other state agencies, without cost or liability.

The System Agency will strictly adhere to the requirements of the PIA regarding the disclosure of public information. As a result, by participating in this solicitation process, Applicant acknowledges that all information, documentation, and other materials submitted in the Application in response to this Solicitation 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>.

8.1.4 News Releases

Prior to final award an Applicant may not issue a press release or provide any information for public consumption regarding its participation in the procurement. Requests should be directed to the HHSC Point of Contact identified in **Article III, Administrative Information**.

8.1.5 Additional Information

By submitting a proposal, the Applicant grants HHSC the right to obtain information from any lawful source regarding the Applicant's and its directors', officers', and employees': (1) past business history, practices, and conduct; (2) ability to supply the goods and services; and (3) ability to comply with contract requirements. By submitting a proposal, an Applicant generally releases from liability and waives all claims against any party providing HHSC information about the Applicant. HHSC may take such information into consideration in evaluating proposals.

8.2 INSURANCE AND BONDING

Grantee shall carry insurance in the types and amounts indicated in **Exhibit I, Insurance Coverage Required** for the duration of the Contract. The insurance shall be evidenced by delivery to HHSC of certificates of insurance executed by the insurer or its authorized agent stating coverages, limits, expiration dates and compliance with all applicable required provisions.

Upon request, HHSC/Owner, and/or its agents, shall be entitled to receive without expense, copies of the policies and all endorsements.

Grantee shall update all expired policies prior to submission for monthly payment. Failure to update policies shall be reason for withholding of payment until renewal is provided to HHSC.

Grantee shall provide and maintain all insurance coverage with the minimum amounts described throughout the life of the contract.

Failure to maintain insurance coverage, as required, is grounds for suspension of work for cause. Grantee shall deliver to HHSC true and complete copies of certificates and corresponding policy endorsements upon award.

Failure of HHSC to demand such certificates or other evidence of Grantee's full compliance with these insurance requirements or failure of HHSC to identify a deficiency in compliance from the evidence provided shall not be construed as a waiver of Grantee's obligation to maintain such insurance.

The insurance and insurance limits required in **Exhibit I, Insurance Coverage Required** shall not be deemed as a limitation on Grantee's liability under the indemnities granted to HHSC in the Contract.

The insurance coverage and limits established in **Exhibit I, Insurance Coverage Required** shall not be interpreted as any representation or warranty that the insurance coverage and limits necessarily will be adequate to protect Grantee.

Coverage shall be written on an occurrence basis by companies authorized and admitted to do business in the state of Texas and rated "A" or better by A.M. Best Company or similar rating company or otherwise acceptable to HHSC.

ARTICLE IX. SUBMISSION CHECKLIST

This checklist is provided for Applicant's convenience only and identifies documents that must be submitted with this Solicitation in order to be considered responsive. Any Solicitation Response received without these requisite documents may be deemed nonresponsive and may not be considered for contract award.

Original Solicitation Response Package

The Solicitation Package must include the "Original" Solicitation Response in **electronic copy** consisting of the documents detail below.

A. Administrative Information

1. Attachment A: RFA Grant Application _____
2. Form A – Face Page (Section 2.3) _____
3. Attachment K: Ceiling Request and Performance Measures _____

B. Narrative Proposal (Executive Summary & Attachments D, G & H-K) (Section 5.1 & Article II)

1. Executive Summary to include:
 - a. Administrative Entity Information (**Section 6.1**) _____
 - b. Litigation & Contract History (**Section 6.2**) _____
 - c. Conflicts (**Section 6.3**) _____
2. Attachment D: Key Personnel _____
3. Attachment E: Focused ABA Services Treatment Strategies Chart _____
4. Attachment F - HHS Regional Coverage Map Service Areas Map _____
5. Attachment G: CAP Counties and Regions _____
6. Attachment H: Contact Person Information CAP Services _____
7. Attachment J: HHS Indirect Cost Rate Questionnaire _____
8. Attachment K: Ceiling Request and Performance Measures _____

C. Rate Proposal (Article VII)

1. Attachment B, Hourly Rate Workbook _____
2. Attachment C, Hourly Rate Sheet _____

D. Applicable Exhibits (to be included in Solicitation Package) (Section 6.5)

1. Exhibit A - Applicant Affirmations and Solicitation Acceptance _____
2. Exhibit E - Data Use Agreement v8.5 _____
3. Exhibit E-1 -Attachment 2 HHSC DUA SPI _____
4. Exhibit E-2 -Data Use Agreement v.8.5, Governmental Entity Version (if applicable) _____

5. Exhibit H -Exceptions Form, if applicable _____

6. Exhibit I - Certificate of Insurance (**Section 8.5**) _____

E. Signed Addendums, if applicable _____

Copies of Solicitation Response Package

Applicant will provide the following number of **electronic** copies (all clearly labeled as "copy") in addition to the hard-copy "Original" Solicitation Response. Electronic copies must be submitted on a USB Drive and separated by folders.

- 1 Electronic copy of **Administrative Information**
- 1 Electronic copy of **Narrative Proposal**
- 1 Electronic copy of **Expenditure Proposal**
- 1 Electronic copy of **Applicable Exhibits & Attachments**

ARTICLE X. ATTACHMENTS, EXHIBITS, & FORMS

Attachment A - Grant Application

Attachment B - Hourly Rate Workbook

Attachment C - Hourly Rate Sheet

Attachment D - Key Personnel

Attachment E - Focused ABA Services Treatment Strategies Chart

Attachment F - HHS Regional Coverage Map Service Areas Map

Attachment G - CAP Texas Counties and Regions

Attachment H - Contact Person Information CAP Services

Attachment I – (Reserved)

Attachment J - HHS Indirect Cost Rate Questionnaire

Attachment K - Ceiling Request and Performance Measures

Exhibit A - Affirmations and Solicitation Acceptance

Exhibit B - HHSC Uniform Terms and Conditions Grant (For informational purposes, not to be returned)

Exhibit C - HHSC Additional Provisions (For informational purposes, not to be returned)

Exhibit D - Draft Children’s Autism Grant Contract

Exhibit E - Data Use Agreement v.8.5 (DUA) (Return a signed only if using subcontractors under this award)

Exhibit E-1 – Attachment 2 HHSC DUA SPI

Exhibit E-2 -Data Use Agreement v.8.5 Governmental Entity Version (if applicable)

Exhibit F – Response Screening Questions

Exhibit G - Evaluation Score Tool (For informational purposes, not to be returned)

Exhibit H - Exceptions Form

Exhibit I - Insurance Coverage Required

Form A - Face Page