ADDENDUM #2

April 1, 2025

RFA # 20563 / SFS # CAPBLE2025 SFS Event Name: RFA#20563 Community Aging in Place – Advancing Better Living

New York State Department of Health

Office of Aging and Long Term Care
Center for Aging and Long Term Care Policy and
Financial Initiatives

Request for Applications

Community Aging in Place - Advancing Better Living for Elders (CAPABLE)

RFA Modification

The following are official modifications hereby incorporated into RFA # 20563 Community Aging in Place - Advancing Better Living for Elders (CAPABLE). Deleted language appears in strikethrough ("***x*") and added language appears in red text. The information contained in this amendment prevails over the original RFA language. Applicants should review all documents in their entirety to ensure all amended language is incorporated into their applications.

The RFA due date has been extended. The following change has been made to the Applications Due date on the Cover Page of the RFA:

Applications Due: April 8, 2025, by 4:00 PM April 15, 2025, by 4:00 PM

The following changes have been made to the RFA:

Section II. Who May Apply

All Applicants must meet the following Minimum Eligibility Requirements:

1. Applicant must be prequalified in the New York State Statewide Financial System (SFS), if not exempt, on the date and time Applications in response to this Request for

Applications (RFA) are due as specified in the "Key Dates" set forth on the Cover Page of this RFA.

- 2. Applicant must be a 501(c)(3) not-for-profit organization, or a for-profit organization, either of which provides or arranges services for aging individuals with a functional need for assistance or chronic health conditions. Applicants eligible to apply for funding may include but are not limited to Certified Home Health Agencies (CHHAs), regionally governed health systems, or Area Agencies on Aging (AAAs).
- 3. Applicant must be authorized to do business in New York State. If the Applicant is located outside of New York State, they must have a brick-and-mortar location in New York State.
- 4. Applicant must submit **Attachment 2 Application Cover Page and Minimum Eligibility Attestation** signed by the Chief Executive Officer (CEO), or another authorized individual designated to sign on behalf of the organization, to certify the Applicant meets all minimum qualifications.
- 5. Applicant must either be an entity licensed under Article 36 of the Public Health Law or contracted with an entity licensed under Article 36 of the Public Health Law to provide nursing and occupational therapy services in participants' homes. All applicants must provide Article 36 licensure information on **Attachment 2 Application Cover Page and Attestation** for nursing and occupational therapy services to be provided for the CAPABLE program.

Section V.A.6. Work Plan

INSTRUCTIONS: Applicants may not enter or remove or enter additional Objectives, Tasks, and Performance Measures in the SFS Work Plan at the time of application. However, applicants are instructed to add one (1) Performance Measure under each of the Tasks listed in the below table. For each of these Performance Measures, applicants are instructed to enter "TBD" in the "Name" and "Description" fields, then click on the "More Details" tab, select "Text/Comment" in the "Performance Measure Response Type" field, and enter "TBD" in the corresponding "Text/Comment" field.

SFS Row	Task#
3	1.1
3	1.2
11	3.1
17	4.1
18	4.2
24	5.1
25	5.2
26	5.3
27	5.4
34	7.1
35	7.2
41	8.1
45	8.3

for For the SFS Work Plan Project Summary, applicants are instructed to insert the Project Summary as it is listed in **Attachment 9 – Work Plan**. Any additional Project Summary entered in the Project Summary area will not be considered or scored by reviewers of your application.

The Grantee will be held to the Objectives, Tasks, and Performance Measures as listed in **Attachment 9 – Work Plan**—and will be required to enter the performance measures into the SFS if funding is awarded.

The following Attachment has been modified:

Attachment 2 – Application Cover Page and Attestation (see below)

The following modification has been made to the attestation below:

•	Applicant must either be an entity licensed under Article 36 of the	Yes
	Public Health Law or contracted with an entity licensed under Article 36 of the Public Health Law to provide nursing and	No
	occupational therapy services in participants' homes. Each applicant must provide Article 36 licensure information in the table below for nursing and occupational therapy services to be provided for the CAPABLE program.	

ARTICLE 36 LICENSURE INFORMATION					
APPLICANT INFORMA	ATION				
Applicant Name					
Applicant License					
Number, if					
applicable					
Counties the					
Applicant Proposes					
to Serve					
SUBCONTRACTOR IN	VFORMATI	ON, IF APPLICABLE			
(for nursing and occu	pational th	erapy services only)			
Subcontractor Name	County				
	License				
	Number				
	Services				
	(RN, OT,				
	Both)				

Subcontractor Name	County	
	License Number	
	Services (RN, OT, Both)	

Attachment 2

Application Cover Page and Minimum Eligibility Attestation

RFA 20563 - Community Aging in Place - Advancing Better Living for Elders (CAPABLE)

Application to	Application to Implement CAPABLE: Community Aging in Place – Advancing Better Lives for Elders						
	_						
Applicant Organization:							
Address:							
City, State, Zip:							
Region for which Applicant is applying*:							
*Applicants may region.	apply to multi	ple regions but	must submit one	applicati	on pe	r eac	h
SPONSOR AGE	NCY DOCUM	MENTATION					
NYS SFS Vendo Identification #:	r						
INDIVIDUAL TO	CONTACT	REGARDING T	HIS APPLICATION	ON			
Name:							
Title:				Phone:			
Email:				Fax:			
MINIMUM ELIGIBILITY ATTESTATION							
			k State Statewid				Yes
System (SFS), if not exempt, on the date and time Applications in response to this Request for Applications (RFA) are due.			No				
Applicant is a 501(c)(3) not-for-profit organization, or a for-profit			_		Yes		
aging indiv	organization, either of which provides or arranges for services for aging individuals with a functional need for assistance or chronic No health conditions.					No	
Applicant is authorized to do business in New York State. If located outside of New York State, the applicant has a brick-and-mortar.				ed		Yes	
ouiside oi	INCOLUCION SI	are the aboucat	u uas a onck-anc	1-111011741			

location in New York State.

No

• Applicant submits this Attachment 2. Application Cover Page and -		Yes	
 Applicant submits this Attachment 2 – Application Cover Page and Minimum Eligibility Attestation signed by the Chief Executive Officer 		No	
(CEO), or another authorized individual designated to sign on behalf of the organization, to certify they meet all minimum qualifications of the RFA.			
Applicant must either be an entity licensed under Article 26 of the		Yes	
 Applicant must either be an entity licensed under Article 36 of the Public Health Law or contracts with an entity licensed under Article 36 		No	
of the Public Health Law to provide nursing and occupational therapy services in participants' homes. Each applicant must provide Article 36 licensure information in the table below for nursing and occupational services to be provided for the CAPABLE program.			

ARTICLE 36 LICENSURE INFORMATION				
APPLICANT INFORMA	ATION			
Applicant Name				
Applicant License				
Number, if				
applicable				
Counties the				
Applicant Proposes				
to Serve				
SUBCONTRACTOR IN		•		
(for nursing and occu		erapy services only)		
Subcontractor Name	County			
	License			
	Number			
	Services			
	(RN, OT,			
	Both)			
Subcontractor Name	County			
	License			
	Number			
	Italiiboi			
	Services			
	(RN, OT,			
	Both)			
	,	i		

AUTHORIZED APPLICANT AGENCY ADMINISTRATION

AGENCY C	EO, EXECUTIVE DIRECTOR OR ADMINISTRATOR		
Name:			
Title:			
Email:			
AGENCY F	ISCAL OFFICER		
Name:			
Title:			
Email:			
AUTHORIZ	ED SIGNATORY		
Name:			
Title:			
Email:			
Signature:		Date:	

By signing above the Applicant certifies that all information provided is true and correct and acknowledges its role with respect to the implementation of the CAPABLE program as described in the RFA. The Applicant understands, and hereby agrees, that submission of a complete Application, and the subsequent execution of a contract to implement the CAPABLE program, carries with it the obligation to provide CAPABLE services and perform all required Program Tasks. These include, but are not limited to, those listed in the RFA.

ADDENDUM #1

March 21, 2025

RFA # 20563 / SFS # CAPBLE2025 SFS Event Name: RFA#20563 Community Aging in Place – Advancing Better Living

New York State Department of Health

Office of Aging and Long Term Care
Center for Aging and Long Term Care Policy and
Financial Initiatives

Request for Applications

Community Aging in Place - Advancing Better Living for Elders (CAPABLE)

RFA Modification

The following are official modifications hereby incorporated into RFA # 20563 Community Aging in Place - Advancing Better Living for Elders (CAPABLE). Deleted language appears in strikethrough ("xxx") and added language appears in red text. The information contained in this amendment prevails over the original RFA language. Applicants should review all documents in their entirety to ensure all amended language is incorporated into their applications.

The following changes have been made to the RFA:

II. Who May Apply

All Applicants must meet the following Minimum Eligibility Requirements:

- 1. Applicant must be prequalified in the New York State Statewide Financial System (SFS), if not exempt, on the date and time Applications in response to this Request for Applications (RFA) are due as specified in the "Key Dates" set forth on the Cover Page of this RFA.
- 2. Applicant must be a 501(c)(3) not-for-profit organization, or a for-profit organization, either of which provides or arranges services for aging individuals with a functional need for assistance or chronic health conditions. Applicants eligible to apply for funding may include but are not limited to Certified Home Health Agencies (CHHAs), regionally

governed health systems, or Area Agencies on Aging (AAAs).

- 3. Applicant must be authorized to do business in New York State. If the Applicant is located outside of New York State, they must have a brick-and-mortar location in New York State.
- 4. Applicant must submit **Attachment 2 Application Cover Page and Minimum Eligibility Attestation** signed by the Chief Executive Officer (CEO), or another authorized individual designated to sign on behalf of the organization, to certify the Applicant meets all minimum qualifications.
- 5. Applicant must either be an entity licensed under Article 36 of the Public Health Law or contracted with an entity licensed under Article 36 of the Public Health Law to provide nursing and occupational therapy services in participants' homes.

Section III. Project Narrative/Work Plan Outcomes

For this RFA, CAPABLE participants must meet the following eligibility criteria:

- Older adult (over 60 years of age).
- Cognitively intact, or only have mild cognitive impairment and willing to participate in goal developing goals and action planning processes.
- Have difficulty completing at least one Activity of Daily Living (ADL) or two or more Instrumental Activity of Daily Living (IADLs).
- Medicaid eligible or falls below 150% of the federal poverty line (FPL) for their household size based on the current FPL calendar year determinations.
- Not currently receiving personal care or consumer directed personal care services through Medicaid or Expanded In Home Services for the Elderly (EISEP) or other paid assistance to address their functional needs. Not currently receiving any other paid services that are duplicative in nature of the CAPABLE services.

The following Attachments have been modified:

Attachment 2 – Application Cover Page and Attestation (see below)

The following attestation was added:

	Yes
 Applicant must either be an entity licensed under Article 36 of the Public Health Law or contracted with an entity licensed under Article 36 of the Public Health Law to provide nursing and occupational therapy services in participants' homes. 	No

Attachment 3 – Monthly Progress Report Template (see below)

Program Data:	
Number of Participants Screened, Invited, and Refused.	
Number of Participants Started.	
Number of Completions (Defined as a least eight visits,	
OT+RN).	
Program Data:	
Number of individuals screened:	
Number of individuals accepted:	
Number of individuals refused:	
Number of individuals that did not meet eligibility criteria:	
Reason individual did not meet eligibility criteria:	Select reason from drop-down
Number of individuals started:	
Number of completions (defined as a least eight visits,	

Attachment 2

Application Cover Page and Minimum Eligibility Attestation

RFA 20563 - Community Aging in Place - Advancing Better Living for Elders (CAPABLE)

Application to Implement CAPABLE: Community Aging in Place – Advancing Better Lives for Elders						
	T					
Applicant Agency:						
Address:						
City, State, Zip:						
Region for						
which Applicant is						
applying:						
	NOV DO 011					
SPONSOR AGE NYS Vendor Ide #:		MENTATION				
_			-			
	CONTACT	REGARDING THIS APPLICATION	ON			
Name:						
Title:			Phone:			
Email:			Fax:			
	MINI	MUM ELIGIBILITY ATTESTATI	ON			
		I in the New York State Statewide				Yes
•	,	empt, on the date and time Applic st for Applications (RFA) are due		•		No
• •	 Applicant is a 501(c)(3) not-for-profit organization, or a for-profit organization, either of which provides or arranges for services for 					Yes
	ndividuals with a functional need for assistance or chronic No			No		
			16.1			Yes
		to do business in New York State the applicant has a brick-and		ed -		
	e of New York State, the applicant has a brick-and-mortar on in New York State.					No

 Applicant submits this Attachment 2 – Application Cover Page and 			Yes				
	um Eligibility Attestation signed by the Chief Executive Officer		No				
` `), or another authorized individual designated to sign on behalf of ganization, to certify they meet all minimum qualifications of the	of					
Applic	ant must either be an entity licensed under Article 36 of the		Yes				
	Health Law or contracted with an entity licensed under Article		No				
	36 of the Public Health Law to provide nursing and occupational therapy services in participants' homes.						
	AUTHORIZED SPONSOR AGENCY OFFICERS						
AGENCY CE	EO, EXECUTIVE DIRECTOR OR ADMINISTRATOR						
Name:							
Title:							
Email:							
AGENCY FIS	SCAL OFFICER						
Name:							
Title:							
Email:							
AUTUODIZE							
I	ED SIGNATORY						
Name:							
Title:							
Email:	D-4						
Signature:	Date:						

By signing above the Applicant certifies that all information provided is true and correct and acknowledges its role with respect to the implementation of the CAPABLE program as described in the RFA. The Applicant understands, and hereby agrees, that submission of a complete Application, and the subsequent execution of a contract to implement the CAPABLE program, carries with it the obligation to provide CAPABLE services and perform all required Program Tasks. These include, but are not limited to, those listed in the RFA.

Attachment 3 - OALTC Monthly Progress Report Template RFA # 20563 Community Aging in Place - Advancing Better Living for Elders (CAPABLE)

Program Data:	
Number of individuals screened:	
Number of individuals accepted:	
Number of individuals refused:	
Number of individuals that did not meet eligibility criteria:	
Reason individual did not meet eligibility criteria:	Select reason from drop-down
Number of individuals started:	
Number of completions (defined as a least eight visits, OT+RN):	

·	
Narrative Data:	
Please list any education or outreach you completed this month to but	illd awareness of opportunities for community living. (This may include trainings, stake holder engagement, etc.)
Please list any activities completed this month that support access to	and streamlining services and support.
Please highlight any achievements or key successes from this month	L.
Please outline any challenges or obstacles you encountered this more	nth.
, ,	
Is there anything else you would like to share about your progress thi	s month? If yes, please use the space below.
I	

RFA # 20563 / SFS # CAPBLE2025

New York State Department of Health

Office of Aging and Long Term Care Center for Aging and Long Term Care Policy and Financial Initiatives

Request for Applications

Community Aging in Place - Advancing Better Living for Elders (CAPABLE)

KEY DATES:

Release Date: February 20, 2025

Questions Due: March 6, 2025

Questions, Answers and

Updates Posted (on or about): March 20, 2025

Applications Due: April 8, 2025, by 4:00 PM

NYSDOH Contact Name & Address: Amy Hegener

Telephone: 518-474-9844

Email: CAPABLE@health.ny.gov

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I. Introduction

Purpose/Intent:

The New York State Department of Health (the "Department"), Office of Aging and Long Term Care (OALTC) announces the availability of \$6,300,000 annually in New York State (NYS) funding to support the implementation of the Community Aging in Place - Advancing Better Living for Elders (CAPABLE) pilot initiative which aims to improve the health and functioning of older adults with low income, enabling them to age in place safely and independently. This Request for Applications (RFA) is seeking applications from qualified organizations to implement and manage the CAPABLE initiative within their communities.

As the number of older adults continues to rise, many face challenges related to mobility, daily living activities, and chronic health conditions that can jeopardize their ability to live safely at home. People with functional limitations and chronic conditions are more likely than the general population to be among the costliest users of the health care system. Traditional approaches have often focused on medical interventions alone, neglecting the environmental and functional aspects that are crucial for aging in place. Addressing the medical and environmental factors that impact older adults can deter the need for more intensive home and community-based services, or placement in more restrictive settings. The provision of innovative programs that support individuals in their preferred living environment can defer or delay the need for more costly services.

Program Background:

CAPABLE is an evidence-based program that combines nursing, occupational therapy, and handy worker services to help older adults live independently in their home environments. This can be inclusive of homes of relatives with whom the older adult lives, condos or townhomes (pursuant to association rules), or apartment buildings (with landlord clearance). By addressing the home environment and personal health, CAPABLE has been shown to improve the functionality of participants and reduce healthcare costs. Moreover, the program has been tested in numerous small and large trials showing a benefit toward better functioning, decreased hospitalizations, and decreased nursing home admissions. Research has shown that the CAPABLE program offers a significant return on investment. Roughly \$3,000 in program costs per participant yielded more than \$30,000 in savings in medical costs through reductions in inpatient and outpatient expenditures.² Participants are empowered to perform daily activities independently and remain in their homes longer. CAPABLE breaks down the functional barriers between service providers, allowing a multidisciplinary approach that best addresses participant needs. Importantly, CAPABLE is participant-driven in that the participant chooses the goals he or she wants to meet through participation in the program, and together the interdisciplinary team and the participant work toward achieving these goals. This process is critical to empowering the participant to take control of their own health and functional capacity.

Program Components:

1. **Nursing Services:** A Registered Nurse (RN) conducts comprehensive health

¹ https://nursing.jhu.edu/faculty-research/research/projects/capable/

^{2 .}https://capablenationalcenter.org/

- assessments, provides medication management, and educates participants on managing chronic conditions.
- 2. **Occupational Therapy:** A licensed, registered Occupational Therapist (OT) evaluates the participant's ability to perform daily activities and develops action plans with the participant for each participant-identified goal.
- 3. **Home Modifications:** Handy worker services address home repair needs, such as installing grab bars, improving lighting, and fixing potential hazards. It is recommended that the handy worker be licensed, insured, and bonded according to the rules of their region.

For more information on the CAPABLE initiative, for which this RFA seeks grantees that will partner with the CAPABLE National Center to implement this model in communities across New York State, please visit this website: <u>CAPABLE</u>, <u>Community Aging in Place</u>, <u>Better Living for Elders</u> (capablenationalcenter.org).

This grant opportunity will fully fund the implementation and delivery of CAPABLE services in up to twenty sites across four (4) New York State regions. The intention is to include four (4) sites in the Capital District Region, three (3) sites in the Central New York Region, nine (9) sites in the Metropolitan Area Region, and four (4) sites in the Western Region. These regions are based on the DOH Regional offices and grantees can be anywhere within their jurisdiction. Please refer to **Attachment 1 - DOH Regions by County** for a list of counties per region.

Funding and Regional Distribution of Anticipated Awards:

Approximately \$6,300,000 in New York State funding is available annually over a period of three (3) years to fund up to 20 awards across four (4) designated New York State regions. Grantees will receive up to \$315,000 for each year of the three-year contract period.

Table 1: Annual Funding Amounts Available by Region

Region	Maximum Number of Awards	Maximum Per-Year Award Amount Per Grantee
Region 1: Capital District Region	4	\$315,000
Region 2: Central NY	3	\$315,000
Region 3: Metropolitan Area Region	9	\$315,000
Region 4: Western Region	4	\$315,000

Applicants may submit one (1) application per region in response to this RFA. If multiple applications are received for one (1) region, the first application received will be accepted and

scored. Additional applications for that region will be disqualified and not reviewed. Applicants may submit multiple applications, provided that each application is for a different region and submitted separately. If multiple applications are submitted by the same applicant for different regions, the Applicant must include an explanation in each application detailing how the submission interacts with or complements other submissions.

Any contract(s) resulting from this RFA will be effective only upon approval by the New York State Office of the Comptroller.

II. Who May Apply

All Applicants must meet the following Minimum Eligibility Requirements:

- 1. Applicant must be prequalified in the New York State Statewide Financial System (SFS), if not exempt, on the date and time Applications in response to this Request for Applications (RFA) are due as specified in the "Key Dates" set forth on the Cover Page of this RFA.
- Applicant must be a 501(c)(3) not-for-profit organization, or a for-profit organization, either
 of which provides or arranges services for aging individuals with a functional need for
 assistance or chronic health conditions. Applicants eligible to apply for funding may
 include but are not limited to Certified Home Health Agencies (CHHAs), regionally
 governed health systems, or Area Agencies on Aging (AAAs).
- 3. Applicant must be authorized to do business in New York State. If the Applicant is located outside of New York State, they must have a brick-and-mortar location in New York State.
- 4. Applicant must submit Attachment 2 Application Cover Page and Minimum Eligiblity Attestation signed by the Chief Executive Officer (CEO), or another authorized individual designated to sign on behalf of the organization, to certify the Applicant meets all minimum qualifications.

III. Project Narrative/Work Plan Outcomes

Service Delivery Overview:

CAPABLE involves up to ten in-home sessions over five (5) months between the participant and a CAPABLE team comprised of an RN, OT, and handy worker. The RN and the OT receive individualized training in motivational interviewing and person-centered care, which builds on their baseline professional training. They follow a specialty-specific outline to perform assessments, provide education, and encourage interactive problem-solving skills. The RN and OT operate under a common employer to provide ongoing care coordination. The handy worker is contracted, oriented to CAPABLE and works directly with the OT to perform home repairs identified by the OT during their assessments. Throughout visits, the participant and the CAPABLE team discuss and accomplish up to six person-centered goals to gain greater independence in their home and community.

For this RFA, CAPABLE participants must meet the following eligibility criteria:

Older adult (over 60 years of age).

- Cognitively intact, or only have mild cognitive impairment and willing to participate in goal developing goals and action planning processes.
- Have difficulty completing at least one Activity of Daily Living (ADL) or two or more Instrumental Activity of Daily Living (IADLs).
- Medicaid eligible or falls below 150% of the federal poverty line (FPL) for their household size based on the current FPL calendar year determinations.
- Not currently receiving personal care or consumer-directed personal care services through Medicaid or Expanded In-Home Services for the Elderly (EISEP) or other paid assistance to address their functional needs.

Grantee Requirements:

Grantees will be expected to provide the prescribed CAPABLE program to eligible individuals in their specified region.

Administrative Accountability: Grantees must complete the required training and obtain a license from the CAPABLE National Center, which administers the CAPABLE program developed by Johns Hopkins School of Nursing, before enrolling participants. CAPABLE licenses are renewable and are valid for two years. Grantees must sign a written agreement with Johns Hopkins University that outlines expectations. More information is available by contacting <a href="mailto:CAPABLEinfo@CAPABLEInfo

Grantees will be responsible for oversight and management of all CAPABLE operations, including establishing internal controls and quality assurance procedures to ensure program integrity. All contractors must also adhere to training, program monitoring, and data collection requirements for CAPABLE grant-funded staff in compliance with OALTC direction.

Financial Accountability: Grantees will maintain a financial management system that ensures accountability for all CAPABLE grant funds received. This will include:

- An annual proposed budget and related cost allocations, with the submission of budget modifications as necessary.
- Submission of six-month spending reports in compliance with OALTC direction.
- Provision of supporting documentation for all financial claims submitted to OALTC.
- Demonstration of how the organization will ensure that activities funded by grants are tracked, including staff activities in the field.
- Provision of in-kind services and support to maintain CAPABLE operations as needed.
 This grant will not cover the costs of training more than six clinicians in the first year but may support part of a project manager or coordinator salary.
- Grantees should plan to use any savings generated to sustain participation in CAPABLE after the pilot period..

Data Collection and Reporting: Grantees must adhere to all CAPABLE National Center's CAPABLE program evaluation tools and methods. Grantees are also responsible for adhering to State requirements regarding monitoring and reporting on the administration of this grant. Completed evaluations should be provided to the CAPABLE National Center and OALTC according to the established timeline by the CAPABLE National Center. All records and reports of CAPABLE grant-funded activities must be maintained following New York

State Department of Health and CAPABLE requirements. Please refer to **Attachment 3 – OALTC Monthly Progress Report Template** to report on monthly grant-funded activities.

Staffing: Grantees are responsible for recruiting, hiring, and maintaining required program staffing, which includes:

- Up to three (3) full or part-time RNs to staff up to three CAPABLE teams comprised of one (1) RN, one (1) OT, and one (1) handy worker to implement the CAPABLE program annually.
- Up to three (3) full or part-time OTs to staff up to three CAPABLE teams comprised of one (1) RN, one (1) OT, and one (1) handy worker to implement the CAPABLE program annually.
- Up to three (3) handy workers to staff up to three (3) part-time CAPABLE teams comprised of one (1) RN, one (1) OT, and one (1) handy worker to implement the CAPABLE program annually.
- One (1) part-time Project Coordinator to manage all aspects of program administration.

Project Timeline:

- A. **Training and Planning:** The Grantees' CAPABLE clinicians (RNs and OTs) will begin training in August 2025. The CAPABLE National Center will provide ongoing program implementation support to the grantee throughout the two-year licensure.
- B. **Project Implementation:** During the three-year contract trained clinicians will provide participants with in-home consultations and services to assist with self-identified goals related to remaining independent and engaging in community activities. Each participant receives up to ten visits throughout the program (six (6) OT, four (4) RN, and one (1) handy worker visit to complete environmental modifications). It is expected that each grantee will serve at least 200 participants over the contract.

C. Project Coordination:

- The Referral Process: The Grantee is responsible for arranging with healthcare partners a referral system that best fits the needs of their community. The Project Coordinator will maintain records of all referrals and determinations, whether eligible or ineligible, and the grantee will make available these records for review by OALTC upon request.
- 2. Maintaining a Participant Waiting List: The Project Coordinator is responsible for maintaining a waiting list of CAPABLE eligible participants. Eligible participants on the waiting list will be kept in successive order. The Project Coordinator is responsible for keeping a record of the waiting list and all decisions made regarding eligible individuals on the waiting list. The Grantee will make available all waiting list records to OALTC upon request.
- 3. <u>Program Evaluation</u>: The Project Coordinator, OT or RN is responsible for meeting with participants in their homes to complete a pre-service evaluation and once following services to complete a post-services evaluation.
- 4. <u>Data Collection and Reporting</u>: The Project Coordinator keeps records of all CAPABLE evaluations and grant management-related documents. The Grantee is responsible for compiling and submitting CAPABLE program reports and

grant management-related reports in a manner agreed upon by the CAPABLE National Center and OALTC.

D. CAPABLE Team Minimum Qualifications:

- Registered Nurse: Each CAPABLE team must include an RN licensed in New York State and in good standing with the New York State Department of Education requirements. They must complete the CAPABLE training administered by the CAPABLE National Center before the start of CAPABLE services.
- Occupational Therapist: Each CAPABLE team must include an OT licensed in New York State and in good standing with the New York State Department of Education requirements. They must complete the CAPABLE training administered by the CAPABLE National Center before the start of CAPABLE services.
- 3. <u>Handy Worker</u>: Grantees must employ or contract with up to three (3) handy workers to carry out environmental modifications between up to three (3) CAPABLE teams. If the handy worker is not an employee of the Grantee, the Grantee must hold a business confidentiality agreement with them. Handy workers are required to have an orientation on the CAPABLE program, and basic skills in working with older adults, as well as a background check and other New York State clearances to ensure the individual has the necessary credentials and does not pose a risk to the older adult.

E. Costs Covered by the Grant:

- 1. Two-year CAPABLE license.
- 2. Training through the CAPABLE National Center for up to three (3) RNs and three (3)OTs.
- 3. Ten clinician visits and associated services per participant in year one; and ten visits and associated services per participant in year two (2) of the contract. Participants in year one are not the same as those in year two.
- 4. Project coordination including two (2) additional visits to each participant to gather data for a program evaluation (one (1) pre-service and one (1) post-service).
- 5. Low-cost (up to \$1,800 per participant) home modifications by a handy worker.

F. <u>Detailed Timeline of Three-Year CAPABLE Project:</u>

First Year

- Grantee enters into a two-year licensing agreement with CAPABLE National Center.
- CAPABLE team members at licensed sites begin training.
- Staff at licensed sites are assigned to project management/supervisory roles.
- Participant recruitment begins and the Grantee establishes and manages a waiting list for the CAPABLE pilot. When managing the waiting list, the Grantee must prioritize participants eligible for the CAPABLE pilot but not currently receiving personal care services, as outlined in Section III of this RFA.
- Participants must need assistance with at least one (1) ADL or two (2) IADLs, desire help developing and meeting goals, be cognitively capable of participating in the goal

development process, and fall under 150% of the FPL or be Medicaid eligible, as outlined in Section III of this RFA.

- Trained teams begin implementing CAPABLE.
- The first participant visit, completed by the OT, includes a survey of the environment under the CAPABLE guidelines and provides the initial CAPABLE evaluation.
- The second visit will involve a person-centered process in which the participant sets goals and, together with the RN and OT, develops a plan to meet them.
- Over the next nine (9) visits (three (3) RN visits, five (5) OT visits, and one (1) handy worker visit, any environmental modifications (low-cost adjustments such as grab bars, threshold leveling, lowering of kitchen cabinets, etc.) will be made and the participant will continue to work on their goals with support from the clinicians.
- The final visit, completed by the Project Coordinator, will include a survey for the CAPABLE evaluation.

Second-Third Year

- Department Staff work with the CAPABLE National Center to evaluate the first year of the CAPABLE initiative.
- The Grantee continues to expand participation in CAPABLE.
- The Grantee submits program reports to OALTC every six (6) months from the contract start date until the end of the contract term.
- The Grantee develops a sustainability plan to continue the program beyond the expiration of the grant and applies lessons learned across the identified broader population from their application.
- OALTC staff work with the CAPABLE National Center to evaluate the full CAPABLE pilot program.

A Grantee may subcontract components of the Work Plan to be performed by the Grantee pursuant to the terms of its Application. If known, the Applicant is expected to state in their Application the specific components to be performed through subcontracts as well as the names of the subcontractors. Grantees will need to name the subcontractors prior to reimbursement. Applicants should note that the lead organization (that is, the successful Grantee, as Contractor) will have overall responsibility for all Contract activities, including those performed by subcontractors, and will be the primary contact for DOH. All subcontractors and subcontracts will be required to be approved by the Department of Health. When a subcontract equals or exceeds \$100,000, the subcontractor shall submit a Vendor Responsibility Questionnaire.

IV. Administrative Requirements

A. Issuing Agency

This RFA is issued by the New York State Department of Health, Office of Aging and Long Term Care. The Department is responsible for the requirements specified herein and for the evaluation of all Applications. *See,* Section V.C. (Review and Award Process).

B. Question and Answer Phase

All substantive questions by Applicants with respect to any aspect of the RFA must be submitted in writing to the following email address: CAPABLE@health.ny.gov. This includes Minority and Woman Owned Business Enterprise (MWBE) Requirements questions and related forms. See, Section IV.K. (Minority & Woman-Owned Business Enterprise Requirements). Questions of a technical nature related to formatting or other minor details related to the preparation of an application may also be addressed in writing to the email address noted above. Questions are of a technical nature if they are limited to how to prepare your application (e.g., formatting) rather than relating to the substance of the Application.

To the degree possible, each question submitted by a potential Applicant pursuant to the terms of this RFA should cite the RFA section and paragraph to which it refers. Written questions will be accepted until the date posted on the Cover Page of this RFA.

Some helpful links for questions of a technical nature are below. Questions regarding specific opportunities or Applications should be directed to the Department contact listed on the cover of this RFA.

- On-Demand Statewide Financial System Training Videos: On-demand training focused on using the new grants management features in SFS is available by logging in to the SFS Vendor Portal and clicking the SFS Coach icon available on the homepage. Additional questions? Contact the SFS Help Desk listed below:
- Statewide Financial System Technical Support Help Desk Phone: 1-877-737-4185 toll-free / 518-457-7737

Hours: Monday through Friday 8 am to 8 pm

Email: helpdesk@sfs.ny.gov

Prospective Applicants must submit all requests for clarifications of, or exceptions or changes to, the terms, conditions, or provisions of this RFA or the Master Contract for Grants during the Question-and-Answer Phase, which will end on the "Questions Due" date specified on the Cover Page of this RFA. An Applicant must clearly indicate the clarification, exception, or change in the RFA or the Master Contract for Grants the Applicant is requesting. All questions, answers, and requests for clarification, exception, or change will be published by the Department at SFS Public Portal Homepage to ensure equal access and knowledge by all prospective Applicants, on or about the date specified on the Cover Page of this RFA.

This RFA has been posted on the NYS Statewide Financial System website at the SFS Public Portal Homepage and additionally via a link provided on the Department's public website at: https://www.health.ny.gov/funding/.

Questions and answers, as well as any updates, addendums to, and/or other modifications of this RFA, will be posted on these websites. All such questions and answers, updates, addenda, and other modifications to this RFA will be posted by the date identified on the Cover Page of this RFA under "Key Dates."

All Questions must be received by the date and time specified on the Cover Page of this RFA, under "Key Dates," opposite the heading "Questions Due."

All questions submitted by email should state the RFA Title and Number set forth on the Cover Page RFA# 20563, Community Aging in Place - Advancing Better Living for Elders (CAPABLE) in the subject line of the email.

C. Letter of Interest

A Letter of Interest is not requested for this project.

D. Applicant Conference

An Applicant Conference WILL NOT be held for this project.

E. How to File an Application

Applications must be submitted online via the Statewide Financial System by the date and time posted on the Cover Page of this RFA under the heading "Key Dates."

Reference materials and videos are available for Grantees applying to funding opportunities on the NYS Statewide Financial System. Please visit the Statewide Financial System website at the following web address: SFS Public Portal Homepage and click the "Search for Grant Opportunities" tile. There is also a more detailed "Statewide Financial System: Vendor User Guide" available in the documents section under Training & Guidance; For Grant Applicants located in SFS Coach. Training webinars are also provided by the Grants Management Team. Dates and times for webinar instruction can be located at the following web address: Live Webinars | Grants Management (ny.gov).

To submit an Application an Applicant must:

- 1. Log into the Statewide Financial System Vendor Portal.
- 2. Click the Grant Management Tile. Next, Click the Bid Event Search tile.
- 3. Enter the applicable search criteria in the Search Criteria Fields. Locate an opportunity; search by Funding Agency (DOH01) or enter the Grant Opportunity name into the Search by Grant Opportunity field: **Community Aging in Place Advancing Better Living for Elders (CAPABLE)** You can also filter search by Status such as "available" which filters to include only the bid events that are published and open for potential bid response.
- 4. Click on "Search" button to initiate the search.
- 5. Click on Event ID link to initiate a bid response.
- 6. Please review the Grantee User Manual found in SFS Coach for additional steps on how to respond to various types of Bid Events.

Once the Application is complete, a prospective Applicant is **strongly encouraged** to submit their application at least **48 hours prior to the** Application's due date and time specified on the Cover Page of this RFA. This will allow sufficient opportunity for the Applicant to obtain

assistance and take corrective action should there be a technical issue with the submission process. Failure to leave adequate time to address issues identified during this process may jeopardize an Applicant's ability to submit their application. New York State Department of Health, SFS, and Grants Management staff are available to answer an Applicant's technical questions and provide technical assistance prior to the Application due date and time. Contact information for the Grants Management Staff and SFS is available under Section IV.B. (Question and Answer Phase) of this RFA.

<u>PLEASE NOTE:</u> Although New York State Department of Health and the Grants Management staff will do their best to address concerns that are identified less than 48 hours prior to the due date and time for the submission of an Application, there is no guarantee that they will be resolved in time for the Application to be submitted on time and, therefore, considered for funding.

During the Application process, please pay particular attention to the following:

- Not-for-profit Applicants must be prequalified, if not exempt, on the date and time Applications in response to this Request for Applications (RFA) are due as specified in the "Key Dates" set forth on the Cover Page of this RFA. Be sure to maintain prequalification status between funding opportunities. NOTE: Three of a not-for-profit's essential financial documents the IRS990, its Financial Statement, and its Charities Bureau filing expire on an annual basis. If these documents are allowed to expire, the not-for-profit's prequalification status expires as well, and it will not be eligible for State grant funding until its documentation is updated and approved, and prequalified status is reinstated.
- Only individuals with the role of "Bid Response Submitter" can submit an application on behalf of an Applicant.
- Prior to submission, the Statewide Financial System will automatically initiate a global error checking process to protect against an incomplete Application. An Applicant may need to attend to certain parts of the Application prior to being able to submit the Application successfully. An Applicant must be sure to allow time after pressing the submit button to clean up any global errors that may arise. (Vendor User Guide).
- Applicants should use numbers, letters, and underscores when naming their uploaded files. There cannot be any special characters in the uploaded file name. Also, be aware of the restriction on file size (20 MB) when uploading documents. Applicants should ensure that any attachments uploaded with their application are not "protected" or "pass-worded" documents.

The Applicant's Delegated Administrator is able to assign, modify, remove roles for the applicant in SFS. Please see SFS Vendor Portal Access Reference Guide, SFS Vendor Portal Access Reference Guide.pdf (ny.gov), for additional information on roles. Bid Response Initiator and Bid Response Submitter are the necessary roles for applying to a Bid Event in SFS. If you are a not-for-profit you will also need Prequalification Processor for Prequalification purposes.

PLEASE NOTE: Waiting until the last several days to complete your application online can be dangerous, as you may have technical questions. Beginning the process of applying as soon as possible will produce the best results.

Applications will not be accepted via fax, e-mail, paper copy or hand delivery.

LATE APPLICATIONS WILL NOT BE ACCEPTED.

F. Department of Health's Reserved Rights

The Department of Health reserves the right to:

- 1. Reject any or all Applications received in response to this RFA.
- 2. Withdraw the RFA at any time, at the Department's sole discretion.
- 3. Make an award under the RFA in whole or in part.
- 4. Disqualify any Applicant whose conduct and/or Application fails to conform to the requirements of the RFA.
- 5. Seek clarifications and revisions of Applications, in the Department's sole discretion.
- 6. Use Application information obtained through site visits, management interviews, and the State's investigation of an Applicant's qualifications, experience, ability, or financial standing, and any material or information submitted by the Applicant in response to the Department's request for clarifying information in the course of evaluation and/or selection under the RFA.
- 7. Prior to Application opening, amend the RFA specifications to correct errors or oversights, or to supply additional information, as it becomes available.
- 8. Prior to Application opening, direct Applicants to submit proposal modifications addressing subsequent RFA amendments.
- 9. Change any of the scheduled dates.
- 10. Waive any requirements that are not material.
- 11. Award more than one contract resulting from this RFA.
- 12. Negotiate with successful Applicants within the scope of the RFA in the best interests of the State.
- 13. Conduct contract negotiations with the next responsible Applicant, should the Department be unsuccessful in negotiating with the selected Applicant.
- 14. Utilize any and all ideas submitted with the Applications received, at the Department's sole discretion.
- 15. Unless otherwise specified in the RFA, every offer in an Applicant's Application is firm and not revocable for a period of 60 days from the Application opening.

- 16. Waive or modify minor irregularities in Applications received after prior notification to the Applicant.
- 17. Require clarification at any time during the procurement process and/or require correction of arithmetic or other apparent errors for the purpose of assuring a full and complete understanding of an Applicant's Application and/or to determine an Applicant's compliance with the requirements of the RFA.
- 18. Eliminate any term of this RFA that can be complied with by none of the Applicants.
- 19. Award grants based on geographic or regional considerations to serve the best interests of the State.

G. Term of Contract

Any Contract resulting from this RFA will be effective only upon approval by the New York State Office of the Comptroller.

It is expected that contracts resulting from this RFA will have the following time period: August 1, 2025 – July 31, 2028.

Continued funding throughout this 3-year period is contingent upon the availability of funding and state budget appropriations and the Grantee's continued satisfactory performance of its obligations under the Contract. The Department also reserves the right to revise the award amount as necessary due to changes in the availability of funding.

A sample New York State Master Contract for Grants can be found at https://grantsmanagement.ny.gov/system/files/documents/2025/01/mcg_tandc_january_2025.pdf

H. Payment & Reporting Requirements of Grant Awardees

- 1. The Department may, at its discretion, make an advance payment to a successful not-for-profit grant Applicant under this RFA (a "Grantee") in an amount not to exceed 25 percent of the annual grant provided for under the Grantee's Contract.
- 2. The Grantee will be required to submit invoices and required reports of expenditures based upon the terms for payment set forth in Attachment A-1 to its Grant Contract to the State's designated payment office (below) or, if requested by the Department, through the Statewide Financial System:

Office of Aging and Long Term Care New York State Department of Health 99 Washington Ave, Suite 1624 Albany, NY 12210 A Grantee must provide complete and accurate billing invoices in order to receive payment of the grant funding provided for under the terms of its Grant Contract. Invoices submitted to the Department must contain all information and supporting documentation required by the Contract, the Department, and the Office of the State Comptroller (OSC). Payment for invoices submitted by the Grantee shall only be rendered electronically unless payment by paper check is expressly authorized by the Commissioner of Health, in the Commissioner's sole discretion, due to extenuating circumstances. Such electronic payment shall be made in accordance with OSC's procedures and practices to authorize electronic payments. Authorization forms are available at OSC's website at: http://www.osc.state.ny.us/epay/index.htm, by email at: epayments@osc.state.ny.us or by telephone at 855-233-8363. Each Grantee acknowledges that it will not receive payment on any claims for reimbursement submitted under its Grant Contract if it does not comply with OSC's electronic payment procedures, except where the Commissioner has expressly authorized payment by paper check as set forth above.

Payment of claims for reimbursement by the State (Department) shall be made in accordance with Article XI-A of the New York State Finance Law. Payment terms will be as follows: Applicant will receive an advancement of 25 percent of year one grant funding to assist with start-up costs including CAPABLE national training and licensure. The grantee will be reimbursed for all other actual expenses incurred as allowed in the Contract Budget and Workplan.

3. The Grantee will be required to submit the following reports to the Department of Health at the address above or, if requested by the Department, through the Statewide Financial System:

Six (6) program reports are to be submitted every six (6) months from the contract start date to the end of the contract term. All payment and reporting requirements will be detailed in "Attachment D: Payment and Reporting", of the final State of New York Master Contract For Grants.

I. Procurement Requirements

1. General Requirements

The Grantee may procure various goods and services in connection with the grant-funded project ranging from routinely purchased goods or services to those that involve substantive programmatic work. The procurement of such goods or services, however, must be conducted in an equitable and competitive manner to promote equal treatment, efficiency, and economy in grant-funded activities.

Any Grantee that is a State entity (i.e., a State agency or political subdivision of the State) must follow the same policies and procedures it uses for procurements from its general funds. All other Grantees (private companies, not-for-profit organizations, etc.) must have a sufficient and documented procurement process that maintains records to detail the history of procurements associated with any awarded grant project. These records shall include but are not limited to, the rationale for the method of procurement (e.g., micro-purchase, small

purchases, sealed bids, request for proposals, noncompetitive/sole source), the selection of a contract type, contractor selection, and/or rejection, and the basis of a contract price.

The Grantee's documented procurement process must conform with any applicable federal, State, and local laws and regulations. As part of the required procurement procedures, a Grantee must maintain written standards of conduct covering conflict of interest and governing the actions of its employees engaged in the selection, award, and administration of contracts. The standards of conduct must provide for disciplinary actions to be applied for violations by officers, employees, or agents of the Grantee. Such standards shall provide, at a minimum, that no employee, officer, or agent of the Grantee will participate in the selection, award, or administration of a contract supported by grant funds if a conflict of interest, real or actual, is involved. Such conflicts may arise when:

- The employee, officer, or agent, or
- · Any member of such individual's immediate family, or
- Such individual's partner, or
- Any organization that employs, or is about to employ the selected contractor, has a financial or other interest in or receives or stands to receive a tangible personal benefit from a firm being considered for a contract.

The standards of conduct shall also cover organizational conflicts of interest. Organizational conflicts of interest arise where an entity is or appears to be unable to conduct an impartial procurement action due to relationships with a parent company, affiliate, or subsidiary organization.

2. Bid Protest Procedures

Any contractor, subcontractor, or aggrieved party has the right to protest actions before or after the award of a contract utilizing grant funds. The Grantee alone will be responsible, in accordance with good administrative practice and sound business judgment, for the settlement of all contractual and administrative issues arising out of procurement contract solicitations and awards.

Grantees shall have written protest procedures, which may be analogous to those set forth in Part 24 of Title 2 of the New York Codes, Rules and Regulations, in order for effective due process to be achieved. A Grantee's specific protest procedures shall be outlined in all bid requests, requests for proposals, requests for applications, etc. issued by or on behalf of the Grantee concerning any grant-funded projects. In summary, Grantees are responsible for handling all contract activity protests. Except in matters of direct State or possibly Federal concern (in cases involving federally funded grants), the Department of Health will not substitute its judgment for that of the Grantee.

3. Procurement Contract Language

Any contract concerning a grant-funded project must be a written agreement between the Grantee and the third party providing specific goods and/or services. Whether with a contractor, subcontractor, consultant, or vendor, the contract must, as appropriate, state the activities to be performed; the time schedule; the policies and requirements that apply to the contractor, subcontractor consultant, or vendor, including the above procurement requirements; and any other terms and conditions of the grant and the master grant contract.

J. Assurances of No Conflicts of Interest and/or Other Detrimental Effects

The Grantee as well as any subgrantees, contractors, subcontractors, or consultants engaged by the Grantee to provide goods or services in connection with the grant-funded project shall attest that their performance of any contracted services does not and will not create a conflict of interest with nor position the Grantee to breach any other contract it currently has in force with the State of New York.

The Grantee, as well as any subgrantees, contractors, subcontractors or consultants engaged by the Grantee to provide goods or services in connection with the grant-funded project, shall disclose any existing or contemplated relationship with any other person or entity, including relationships with any member, shareholder of 5% or more, parent, subsidiary, or affiliate organization, which would constitute an actual or potential conflict of interest or appearance of impropriety, relating to other clients/customers/agents of the Grantee, subgrantees, contractors, subcontractors, consultants or former officers and employees of the State and its affiliates, in connection with the providing of goods or rendering of services related to the grant-funded project. The Grantee shall have procedures in place for alerting the State of any such actual or potential conflicts as well as procedures to resolve the same.

K. Minority & Woman-Owned Business Enterprise Requirements

Pursuant to New York State Executive Law Article 15-A, the Department recognizes its obligation to promote opportunities for maximum feasible participation of New York State-certified minority- and women-owned business enterprises (M/WBEs) and the employment of minority group members and women in the performance of New York State Department of Health contracts.

In 2006, the State of New York commissioned a disparity study to evaluate whether minority and women-owned business enterprises had a full and fair opportunity to participate in state contracting. The findings of the study were published on April 29, 2010, under the title "The State of Minority and Women-Owned Business Enterprises: Evidence from New York" ("Disparity Study"). The report found evidence of statistically significant disparities between the level of participation of minority- and women-owned business enterprises in state procurement contracting versus the number of minority- and women-owned business enterprises that were ready, willing, and able to participate in state procurements. As a result of these findings, the Disparity Study made recommendations concerning the implementation and operation of the statewide certified minority- and women-owned business enterprises program. The recommendations from the Disparity Study culminated in the enactment and the implementation of New York State Executive Law Article 15-A, which requires, among other things, that the Department establish goals for maximum feasible participation of New York State Certified minority- and women-owned business enterprises ("M/WBE") and the employment of minority groups members and women in the performance of New York State contracts.

Business Participation Opportunities for MWBEs

For purposes of this solicitation, the Department of Health hereby establishes a goal of **30%** as follows:

- 1) For Not-for-Profit Applicants: Eligible Expenditures include any subcontracted labor or services, equipment, materials, or any combined purchase of the foregoing under a contract awarded from this solicitation.
- 2) For-Profit and Municipality Applicants: Eligible Expenditures include the value of the total amount of the Budget provided for the Work Plan in the Grant Contract entered into pursuant to this RFA.

The goal on the Eligible Expenditures portion of a Grant Contract awarded pursuant to this RFA will be 15% for Minority-Owned Business Enterprises ("MBE") participation and 15% for Women-Owned Business Enterprises ("WBE") participation (based on the current availability of qualified MBEs and WBEs and outreach efforts to certified M/WBE firms). A Grantee awarded a Grant Contract pursuant to this RFA must document good faith efforts to provide meaningful participation by M/WBEs as subcontractors or suppliers in the performance of the Grant Contract and Grantee will agree under the terms of its Grant Contract that the Department may withhold payment pending receipt of the required M/WBE documentation required by the Department or the OSC. For guidance on how the Department will determine "good faith efforts," refer to 5 NYCRR §142.8.

The directory of New York State Certified M/WBEs can be viewed at: https://ny.newnycontracts.com. The directory is found on this page under "NYS Directory of Certified Firms" and accessed by clicking on the link entitled "Search the Directory". Engaging with firms found in the directory with like product(s) and/or service(s) is strongly encouraged and all communication efforts and responses should be well documented by a Grantee to evidence its good faith efforts to encourage M/WBE participation in the performance of its obligations under its Grant Contract.

By submitting an Application, each Applicant and potential Grantee agrees to complete an M/WBE Utilization plan as directed in **Attachment 4** of this RFA. The Department will review the M/WBE Utilization Plan submitted be each Grantee. If a Grantee's M/WBE Utilization Plan is not accepted, the Department may issue a Notice of Deficiency. If a Notice of Deficiency is issued, Grantee agrees that it shall respond to the Notice of Deficiency within seven (7) business days of receipt. The Department may disqualify a Grantee as being **non-responsive** under the following circumstances:

- a) If a Grantee fails to submit a M/WBE Utilization Plan;
- b) If a Grantee fails to submit a written remedy to a Notice of Deficiency;
- c) If a Grantee fails to submit a request for waiver (if applicable); or
- d) If the Department determines that the Grantee has failed to document good-faith efforts to meet the established New York State Department of Health M/WBE participation goals for the procurement.

In addition, Grantees will be required to certify they have an acceptable Equal Employment Opportunity policy statement.

L. Vendor Identification Number

Effective January 1, 2012, in order to do business with New York State, you must have a vendor identification number. As part of the Statewide Financial System (SFS), the Office of the State Comptroller's Bureau of State Expenditures has created a centralized vendor repository called the New York State Vendor File. In the event of an award of a grant to a successful Applicant pursuant to the terms of this RFA and in order to initiate a Grant Contract with the New York State Department of Health, a Grantee must be registered in the New York State Vendor File and have a valid New York State Vendor ID.

If already enrolled in the Vendor File, the Applicant should include the Vendor Identification number in your organization information. If not enrolled, to request assignment of a Vendor Identification number, an Applicant should please submit a New York State Office of the State Comptroller Substitute Form W-9, which can be found on-line at: https://www.osc.state.ny.us/files/vendors/2017-11/vendor-form-ac3237s-fe.pdf

Additional information concerning the New York State Vendor File can be obtained on-line at: http://www.osc.state.ny.us/vendor_management/index.htm, by contacting the SFS Help Desk at 855-233-8363 or by emailing at helpdesk@sfs.ny.gov.

M. Vendor Responsibility Questionnaire

The Department strongly encourages each Applicant to file the required Vendor Responsibility Questionnaire online via the New York State VendRep System. The Vendor Responsibility Questionnaire must be updated and certified every six (6) months. To enroll in and use the New York State VendRep System, see the VendRep System Instructions available at https://www.osc.state.ny.us/state-vendors/vendrep/vendrep-system.

An Applicant must provide their New York State Vendor Identification Number when enrolling. To request assignment of a Vendor ID or for VendRep System assistance, contact the Office of the State Comptroller's Help Desk at 866-370-4672 or 518-408-4672 or by email at itservicedesk@osc.ny.gov.

Applicants opting to complete online should complete and upload the Vendor Responsibility Attestation (**Attachment 5**) of the RFA. The Attestation is located under the SFS Attachments Section and once completed should be uploaded to the applicable PSQ/Bid Factor.

Applicants opting to complete and submit a paper questionnaire can obtain the appropriate questionnaire from the VendRep website, www.osc.state.ny.us/vendrep, and upload it with their Application in response to the applicable PSQ/Bid Factor.

N. Vendor Prequalification for Not-for-Profits

Each not-for-profit Applicant subject to prequalification is required to prequalify prior to having the ability to submit an Application in the NYS Statewide Financial System.

Pursuant to the New York State Division of Budget Bulletin H-1032, dated July 16, 2014, and revised on December 9, 2023, the new Prequalification Policy will be effective as of January 16, 2024. The updated policy requires that not-for-profit organizations register and prequalify in the SFS using the updated Prequalification Application. The updated Prequalification Application and New York State Prequalification Manual for Grantees can be found on the Grants Management website at: https://grantsmanagement.ny.gov/get-prequalified.

An application cannot be submitted/received from a not-for-profit Applicant that (a) has not Registered in the NYS Statewide Financial System or (b) has not Prequalified in the Statewide Financial System by the Application's due date specified on the Cover Page of this RFA.

Below is a summary of the steps that must be completed to meet registration and prequalification requirements. The Vendor User Manual within the Statewide Financial System Website details the requirements and job aid walks users through the process.

1) Register for the Statewide Financial System

Applicants will first need to create an account in SFS. Applicants that need to create an account should do so at the following link: https://www.osc.ny.gov/state-vendors/portal/enroll-vendor-self-service-portal. Any questions related to SFS accounts should be sent to the SFS Help Desk (HelpDesk@sfs.ny.gov).

If you have previously registered and do not know your Username, please email helpdesk@sfs.ny.gov. If you do not know your Password, please click the "I Forgot My Password" link from the main log-in page and follow the prompts.

2) Complete your Prequalification Application

- Log in to the Statewide Financial System.
- Applicants will first need to create an account in SFS. Applicants that need to create an
 account should do so at the following link: https://www.osc.ny.gov/state-vendors/portal/enroll-vendor-self-service-portal. Any questions related to SFS accounts should be sent to the SFS Help Desk (HelpDesk@sfs.ny.gov).
- Instructions for SFS Prequalification can be found on Page 20 of the SFS Grantee User Manual entitled, "! Grantee Processing in SFS." This user manual is accessible to organizations with an SFS account under the SFS Coach Tile/Button in the SFS Vendor Portal. Select "Handbook: User Manual with Screenshots" from the Training Type drop down to locate the manual. If you have any problems accessing the manual, please contact HelpDesk@sfs.ny.gov. Please see the section entitled, "Enter and Submit a Prequalification Application," located on page 20 of the SFS Grantee User Manual, for

complete instructions on how to complete and submit an SFS Prequalification in the NYS Statewide Financial System.

 Specific questions about the prequalification process should be referred to your primary New York State agency representative. The representative specific to the NYS Department of Health can be reached at: vendorresponsibility@health.ny.gov.

3) Add a signatory or "Grant Contract Approver" to your account

• In order to have your designated signatory (known in SFS as Grant Contract Approver) sign a contract and have their name appear on the contract agreement you have to add the Grant Contract Approver's name to your SFS Vendor Profile. The Delegated Administrator for your organization can add the Signatory's Name by following the instructions found on page 17-20 of the SFS Grantee User Manual entitled, "! Grantee Processing in SFS." This user manual is accessible to organizations with an SFS account under the SFS Coach Tile/Button in the SFS Vendor Portal. Select "Handbook: User Manual with Screenshots" from the Training Type drop down to locate the manual. If you have any problems accessing the manual please contact helpDesk@sfs.ny.gov.

All potential Applicants are strongly encouraged to begin Statewide Financial System Registration and Prequalification process as soon as possible in order to participate in this opportunity.

O. General Specifications

- 1. By submitting the "Application Form" each Applicant attests to its express authority to sign on behalf of the Applicant.
- 2. Grantees will possess, at no cost to the State, all qualifications, licenses and permits to engage in the required business as may be required within the jurisdiction where the work specified is to be performed. Workers to be employed in the performance of any Contract awarded pursuant to this RFA will possess the qualifications, training, licenses, and permits as may be required within such jurisdiction.
- 3. Submission of an Application indicates the Applicant's acceptance of all terms and conditions contained in this RFA, including the terms and conditions of the Master Contract for Grants. Any exceptions the Applicant would like considered by the Department relating to the terms and conditions of this RFA and/or Master Contract for Grants must have been raised during the Question and Answer Phase of this RFA (See, Section IV.B.).
- 4. An Applicant may be disqualified from receiving an award if such Applicant or any subsidiary, affiliate, partner, officer, agent, or principal thereof, or anyone in its employ, has previously failed to perform satisfactorily in connection with public bidding or contracts, in the State of New York or otherwise.

5. Provisions Upon Default

- a. If an Applicant is awarded a grant pursuant to this RFA, the services to be performed by the successful Applicant pursuant to the terms of the Grant Contract entered into with the Department shall be at all times subject to the direction and control of the Department as to all matters arising in connection with or relating to the Contract resulting from this RFA.
- b. In the event that the Grantee, through any cause, fails to perform any of the terms, covenants, or promises of any Contract resulting from this RFA, the Department acting for and on behalf of the State, shall thereupon have the right to terminate the Contract by giving notice in writing of the fact and date of such termination to the Grantee.
- c. If, in the judgement of the Department, the Grantee acts in such a way which is likely to or does impair or prejudice the interests of the State, the Department acting on behalf of the State, shall thereupon have the right to terminate any Contract resulting from this RFA by giving notice in writing of the fact and date of such termination to the Grantee. In such case the Grantee shall receive equitable compensation for such services as shall, in the judgement of the State Comptroller, have been satisfactorily performed by the Grantee up to the date of the termination of the Contract, which such compensation shall not exceed the total cost incurred for the work which the Grantee was engaged in at the time of such termination, subject to audit by the State Comptroller.

V. Completing the Application

A. Application Format/Content

Please refer to the Statewide Financial System: Vendor User Guide for assistance in applying for this procurement through the NYS Statewide Financial System. This guide is available by logging into the Statewide Financial System and searching under SFS Coach.

Please respond to each of the sections described below when completing the Statewide Financial System online Application. Your responses comprise your Application. Please respond to all items within each section. When responding to the statements and questions, be mindful that Application reviewers may not be familiar with your agency and its services. Your answers should be specific, succinct, and responsive to the statements and questions as outlined. Please be aware that the value assigned to each section described below indicates the relative weight that will be given to each section of your Application when scoring your Application.

It is each Applicant's responsibility to ensure that all materials included in its Application have been properly prepared and submitted. Applications must be submitted via the Statewide Financial System by the Application deadline date and time specified on the Cover Page of this RFA.

IMPORTANT: Any material added to a Bid Factor "Add Comments" box in SFS will not be reviewed as part of a submitted application. Applicants are instructed to use the "Response" box for narrative responses unless otherwise instructed within this RFA.

Please note there is a 2,000-character limit for each response.

Please provide any requested attachments as specified within this RFA. Applicants are instructed to upload one (1) attachment in response to any request for an attachment. If more than one (1) version of an attachment is uploaded, the final version uploaded will be the version considered for review.

See the Event Comments and Attachments link at the bottom of the Bid Event page in SFS for required attachments to be completed in response to corresponding bid factor questions, as well as informational only attachments.

Program Specific Questions(PSQ)/Bid Factors

1. Program Summary

Not Scored

- 1a)Applicants are instructed to complete and upload **Attachment 2 Application Cover Page and Minimum Eligibility Attestation** to this Program Specific Question/Bid

 Factor Question.
- 1b)Applicants are instructed to complete and upload **Attachment 4 Minority & Women Owned Business Enterprise Requirement Forms** to this Program Specific Question/Bid Factor Question.
- 1c) Applicants are instructed to complete and upload **Attachment 5 Vendor Responsibility Attestation** to this Program Specific Question/Bid Factor Question.
- 1d)Summarize how your organization will meet the CAPABLE program goals as stated in Section I: Introduction and Section III. Project Narrative/Work Plan Outcomes of the RFA. Indicate how your organization will ensure that CAPABLE services are provided, and how it will reach the region intended to serve. Indicate the health region for which you are applying based on the regions as defined in **Attachment 1 DOH Regions by County**.

2. Statement of Need

Total 10 Points

- 2a)Describe the need for the CAPABLE program in the region you plan to serve. Indicate the aging community and the resources available to them, including transportation, healthy aging programs, housing, etc.
- 2b)Describe the cultural and language needs of the aging population in the region and describe your organization's ability to meet those needs.
- 2c) Describe how you will recruit participants in the pilot, initially and over time.
- 2d)Describe how you will continue to sustain participation in the CAPABLE program after the pilot period.

3. Applicant Organization

Total 20 Points

3a) Describe your organization's mission and current services in detail.

RFA 20563, Community Aging in Place - Advancing Better Living for Elders (CAPABLE)

- 3b)Describe your organization's administrative capacity to administer this grant.
- 3c) Describe the agency's experience with administrative, fiscal, and programmatic oversight of government contracts, including timely and accurate submission of fiscal and project reports.
- 3d)Describe your organization's experience implementing similar programming to the aging population. Include this information also for all proposed subcontractor(s).
- 3e)Describe the organizational structure, including both programmatic leadership and clinical staff, and their qualifications as they relate to your organization's ability to carry out the CAPABLE program.

4. Program Activities Points

Total 50

Grant Administration:

- 4a)Describe how your organization will assume responsibility for oversight and management of all CAPABLE contracted operations.
- 4b) Describe how your organization will establish and maintain internal controls and quality assurance procedures to ensure program integrity.
- 4c)Describe how your organization will provide program monitoring, and adhere to data collection requirements for all CAPABLE grant-funded staff in compliance with OALTC direction to achieve contract deliverables and ensure program compliance.

Financial Accountability:

- 4d)Describe how your organization will maintain a financial management system that ensures accountability for all CAPABLE expenses paid and funds received.
- 4e)Describe how your organization will provide in-kind services and support to maintain CAPABLE operations. This grant will not cover the costs of training additional clinicians beyond what the budget allows in this RFA (see Table 1). Please also describe your organization's financial ability to support a reimbursement-based grant, i.e., the ability to pay grant expenses, and then be reimbursed by OALTC for those expenses.

Staffing:

- 4f) Describe how your organization will recruit, hire, and maintain the required CAPABLE team outlined in the RFA, including staffing for program coordination. Describe how vacant positions will be covered within the organization to avoid any gaps in services until a replacement is trained and hired.
- 4g)Indicate the number of full-time or part-time RNs your organization is proposing to implement CAPABLE. If you are requesting to subcontract, then include the number of part-time RNs being requested by the subcontractor.
- 4h)Provide proposed CAPABLE job descriptions for the RN, OT, handy worker, and project coordination staff positions that reflect the roles as outlined in Section III.D. of the RFA. Applicants are instructed to upload these job descriptions in one singular PDF as Attachment 6 in response to this Program Specific Question/Bid Factor Question.
- 4i) Indicate the number of full or part-time OTs your organization is proposing to

- implement CAPABLE. If the Applicant is requesting to subcontract, then include the number of part-time OTs being requested by the subcontractor.
- 4j) Indicate the number of full or part-time handy workers your organization is proposing to implement CAPABLE. If you are requesting to subcontract, then include the number of part-time handy workers being requested by the subcontractor.
- 4k)Indicate the number of full or part-time project coordination staff your organization is proposing to implement CAPABLE. If you are requesting to subcontract, then include the number of part-time project coordination staff being requested by the subcontractor.

Implementation of CAPABLE:

- 4l) Describe in detail how your organization will gather referrals from healthcare partners to build program numbers to meet the contractual goal of at least 200 participants.
- 4m) Describe in detail how your organization will manage a waiting list for the CAPABLE program.

Records and Reports:

4n)Describe in detail how your organization will maintain all records and reports of the CAPABLE program in compliance with the OALTC and CAPABLE National Center requirements.

5. Budget Proposal/Cost Proposal

Total 20 Points

A Budget Proposal/Cost Proposal for the purposes of this RFA will be an Applicant's completed year one (1) budget as initially submitted in SFS in response to this RFA. Applicants should strive to ensure that their total Budget Proposal submitted in SFS is as low as possible while still being able to meet the scope of work/work plan. Applicants are instructed to prepare an annual budget with consideration given to all costs necessary to fully support CAPABLE operations as described in this RFA, and based on the maximum award of \$315,000 per year as listed in the region for which they are applying. Applicants applying for **more than one (1)** region are required to apply separately for each region and the total budget per each application should not exceed the total maximum amount indicated for the region in Table 1 of this RFA.

- 5a)The budget for year one (1) (August 1, 2025 July 31, 2026) must be entered into the Statewide Financial System (SFS) and will be evaluated as the Applicant's Budget Proposal. Refer to **Attachment 7 SFS Expenditure Budget Instructions.** Once the budget in SFS is completed, Applicants are required to also enter the total grant funds being requested in the Unit Bid Price field at the bottom of the page. The total grant funds and Unit Bid Price must match in order for the application to submit successfully.
- 5b)Applicants should submit budgets for year two (2) and year three (3) of the contract term on **Attachment 8 Budget for Years 2 & 3**. Applicants are instructed to upload **Attachment 8** in response to this Program Specific Question/Bid Factor Question. Attachment 8 will not be evaluated as part of the Applicant's Budget Proposal.

General Budget Guidelines

- The proposed budget should be clear, accurate, complete, and all budget items should be in direct alignment with CAPABLE program activities as described in the RFA.
- All costs should be reasonable and cost-effective.
- All costs must be justified with an accompanying narrative.
- Administrative/programmatic support positions must relate directly to the proposed services listed in the RFA.
 - The budget narrative must list the annual salaries of staff that will be working on the project and the corresponding percentages of their time that will be spent working on CAPABLE activities.
 - Indirect costs are not allowable.
 - Applicants are limited to a maximum of \$ 315,000 for each year of project implementation. The grant will provide funding for all pilot activities.

All costs must be related to the provision of the CAPABLE pilot program activities, as well as be consistent with the scope of services, reasonable, and cost-effective. Justification for each cost should be submitted in narrative form. For all existing staff, the Budget Justification must delineate how the percentage of time devoted to this initiative has been determined.

THIS FUNDING MAY ONLY BE USED TO EXPAND EXISTING ACTIVITIES OR CREATE NEW ACTIVITIES UNDER THIS RFA. THESE FUNDS MAY NOT BE USED TO SUPPLANT FUNDS FOR CURRENTLY EXISTING STAFF ACTIVITIES.

Poorly explained or poorly justified proposed expenses may be eliminated from reimbursable expenses during contract negotiation. Any ineligible budget items will be removed from the budget prior to contracting and the budget amount requested will be reduced to reflect the removal of the ineligible items. However, proposed budget expenses will not be altered or deleted from an Applicant's Budget Proposal for the purposes of financial calculation during the cost evaluation scoring process as described in Section C. Review & Award Process, "Cost Evaluation".

Any ineligible budget items will be removed from the budget before contracting. The budget amount requested will be reduced to reflect the removal of the ineligible items.

Contracts established resulting from the Request for Applications will be cost-reimbursable.

All funded contracts will be held to the following contract language:

- Attachment A-1: Agency Specific terms and Conditions (RFA Attachment 10)
- Attachment H: Federal Health Insurance Portability And Accountability Actbusiness Associate Agreement (RFA Attachment 11)
- Attachment M: Participation by Minority Group Members and Women with Respect to State Contracts: requirements and Procedures (RFA Attachment 12)

6. Work Plan Not Scored

The Work Plan Objectives, Tasks, and Performance Measures for this RFA are State defined and listed in **Attachment 9 – Work Plan**. In the event that the State identifies an issue or necessary change to the Work Plan, the State may ask a Grantee to modify a Work Plan prior to the initiation of a contract.

INSTRUCTIONS: Applicants may not enter or remove Objectives, Tasks, and Performance Measures in the SFS Work Plan at the time of application. However, for the **SFS Work Plan Project Summary**, applicants are instructed to insert the Project Summary as it is listed in **Attachment 9 – Work Plan.** Any additional Project Summary entered in the Project Summary area will not be considered or scored by reviewers of your application.

The Grantee will be held to the Objective, Tasks and Performance Measures as listed in **Attachment 9 – Work Plan** and will be required to enter the performance measures into the SFS if funding is awarded.

B. Freedom of Information Law

All Applications may be disclosed or used by the Department to the extent permitted by law. The Department may disclose an Application to any person to assist in evaluating the Application or for any other lawful purpose. All Applications will become State agency records and will be available to the public under the New York State Freedom of Information Law (FOIL). Any portion of an Application that an Applicant believes constitutes proprietary information entitled to confidential handling, as an exception to the general rule regarding the availability to the public of State agency records under the provisions of the Freedom of Information Law, must be clearly and specifically designated in the Application. If the Department agrees with the Applicant's claim regarding the proprietary nature of any portion of an Application, the designated portion of the Application will be withheld from public disclosure. Blanket assertions of proprietary material will not be accepted, and failure to specifically designate proprietary material may be deemed a waiver of any right to confidential handling of such material.

C. Review & Award Process

An Application that meets ALL of the guidelines set forth above will be reviewed and evaluated competitively by OALTC. An Application that does not meet the minimum criteria (PASS/FAIL) will not be evaluated. An Application that does not provide all required information may be omitted from consideration.

Applications with minor issues (for example, an Application missing information that is not essential to timely review and would not impact review scores) MAY be processed and evaluated, at the discretion of the State, but any issues with an Application which are identified by the Department **must** be resolved prior to time of award. An Application with unresolved issues at the time award recommendations are made will be determined to be non-responsive and will be disqualified.

Applications will be evaluated on a 100 point scale as follows:

Program Summary	Not Scored
Statement of Need	10 Points
Applicant Organization	20 Points
Program Activities	50 Points
Budget Proposal/Cost	20 Points
Proposal	
Work Plan	Not Scored

The evaluation process will be conducted in a comprehensive and impartial manner by an evaluation committee, as set forth herein. Applications will first undergo a preliminary evaluation to verify an Applicant has met all Minimum Eligibility Requirements as specified in Section II. Who May Apply. The Technical Proposal will be weighted 80% of an application's total score and the information contained in the Cost Proposal will be weighted 20% of an application's total score. [e.g., 80% Technical, 20% Cost].

Applicants' responses to Program Specific Questions/Bid Factors 2-4 (Applicants' Technical Proposals) will be reviewed by one team of OALTC reviewers. Applicants' response to Program Specific Question/Bid Factor 5 (Budget Proposal/Cost Proposal) will be reviewed by another separate team of OALTC reviewers.

Technical Evaluation

Technical reviewers comprised of OALTC staff will review and evaluate Applicants' Technical Proposals (Applicants' responses to Program Specific Questions/Bid Factors 2-4).

The technical reviewers will independently score each Program Specific Question/Bid Factor and add the scores together to arrive at the reviewer's total technical score. All individual reviewers' total technical scores will be averaged to calculate an Applicant's raw technical score.

The application with the highest raw technical score will receive a final technical score of 80 points. Other Applicants will receive a proportionate final technical score according to the following formula:

 $z = (x/y) \times 80$ where:

x = Technical score for proposal being scored

y = Technical score of the highest scoring proposal

80 = The total technical points available

z = The Applicant's Technical Score

The technical evaluation is 80% (up to 80 points) of the final score.

Cost Evaluation

The cost reviewers will examine Applicants' Budget Proposals. The Budget Proposals will be scored based on a maximum cost score of 20 points. The maximum cost score will be allocated to the Budget Proposal with the lowest budget. All other Budget Proposals will receive a proportionate cost score based on the relation of their Budget Proposal to the Budget Proposal(s) offered at the lowest final cost, using the following formula:

 $C = (A/B)^* 20\%$

A = Total cost of lowest Budget Proposal;

B = Total cost of Budget Proposal being scored; and

C = The Applicant's Cost Score.

The cost evaluation is 20% (up to 20 points) of the final score.

• Composite Score

A composite score will be calculated by the Department by adding an Applicant's technical score together with their cost score. Finalists will be determined based on composite scores.

Applications must receive a passing composite score of 70 to be considered for funding. Awards will be ranked by composite score and awarded to the highest scoring applicant(s) in each of the four regions, up to the maximum number awards as indicated in Table 1 of the RFA.

If an acceptable application (scoring 70 or above) is not received, DOH reserves the right to fund an application scoring in the range of 60-69. If there is no application with a passing score in a region or if there are no applicants in a region, then DOH reserves the right to resolicit where there are an insufficient number of fundable applications.

In the event of a tie score, the applicant with the highest score for **Section 4 – Program Activities** will receive the award. If the scores resulting from that section are a tie, the score from **Section 5 – Budget Proposal/Cost Proposal** will be used to determine who will receive the award.

If changes in funding amounts are necessary for this initiative or if additional funding becomes available, funding will be modified and awarded in the same manner as outlined in the award process described above.

Continued funding throughout the three (3) years is contingent upon the availability of funding and state budget appropriations. DOH reserves the right to revise the award amount as necessary due to changes in the availability of funding.

Applicants will be deemed to fall into one of three categories: 1) not approved, 2) not funded due to limited resources, and 3) approved and funded. Not funded Applications may be

awarded should additional funds become available.

Once awards have been made pursuant to the terms of this RFA, an Applicant may request a debriefing of their own Application (whether their Application was funded or not funded). The debriefing will be limited only to the strengths and weaknesses of the Application submitted by the Applicant requesting a debriefing and will not include any discussion of ANY OTHER Applications. Requests for a debriefing must be received by the Department Office of Aging and Long Term Care no later than fifteen (15) Calendar days from date of the award or non-award announcement to the Applicant requesting a debriefing.

To request a debriefing, please send an email to CAPABLE@health.ny.gov with a copy to Karen Meier at Karen.Meier@health.ny.gov. In the subject line, please write Debriefing Request CAPABLE RFA.

Unsuccessful Applicants who wish to protest the award(s) resulting from this RFA on legal and/or factual grounds, should follow the protest procedures established by the Office of the State Comptroller (OSC). These procedures can be found on the OSC website at https://www.osc.state.ny.us/state-agencies/gfo/chapter-xi/xi17-protest-procedures (Section XI. 17.)

VI. Attachments

- Please note that ALL Attachments to this RFA are accessed under the "Attachments Section" of the Statewide Financial System online Application/Bid Event and are not included in the RFA document. In order to access the online Application/Bid Event and other required documents such as the Attachments, a prospective Applicant must be registered and logged into the NYS Statewide Financial System. Attachments that are requested to be uploaded as part of an Application/Bid Event response will be requested in individual corresponding Bid Factors (See Section V.A., "Program Specific Questions(PSQ)/Bid Factors").
- ALL Applicants are instructed to verify each required attachment that has been uploaded to the application. To check attachments, Applicants are instructed to click "View" in the SFS application for each uploaded attachment to ensure that the attachment and all of its applicable information/data is viewable in its final format.
- PDF Attachments due to system constraints, PDF attachments cannot be uploaded with annotations, editable fields, or JAVA/active controls. Please submit PDFs that are read- only.

Attachment 1: DOH Regions by County

Attachment 2: Application Cover Page and Minimum Eligiblity Attestation*

Attachment 3: OALTC Monthy Progress Report Template

Attachment 4: Minority & Women-Owned Business Enterprise Requirement Forms*

Attachment 5: Vendor Responsibility Attestation*

Attachment 6: CAPABLE Job Descriptions*

Attachment 7: SFS Expendenditure Budget Instructions

Attachment 8: Budget for Years 2 & 3*

Attachment 9: Work Plan

Attachment 10: Attachment A-1: Agency Specific Terms and Conditions

Attachment 11: Attachment H: Federal Health Insurance Portability And Accountability Act

Business Associate Agreement

Attachment 12: Attachment M: Participation By Minority Group Members And Women With Respect To State Contracts: Requirements And Procedures

*These attachments **must** be uploaded as part of your agency's Statewide Financial System (SFS) online Application in response to corresponding Bid Factor questions. Forms to be completed are located in the "**Attachments Section**" of the Statewide Financial System online Application/Bid Event.

Attachements without an asterik (*) do not need to be completed and are for Applicant information only. These Attachments may be accessed in the "Attachments Section" of the Statewide Financial System online Application/Bid Event.