

**AREA AGENCY ON AGING
FOR NORTH FLORIDA, INC.
d/b/a
ADVANTAGE AGING SOLUTIONS**

Request for Proposals (RFP) Specifications
For
Community Care for the Elderly
Lead Agency Designation
In
WASHINGTON COUNTY

2025/2026

July 8, 2025



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INTRODUCTION

1. **Legislatively Mandated Requirements**

The Community Care for the Elderly (“CCE”) Act (ss. 430.201-430.207, F.S.) was created by the Florida Legislature to assist functionally impaired elderly persons to live dignified and reasonably independent lives in their own homes or in the homes of relatives or caregivers. The CCE program provides a continuum of care through the development, expansion, reorganization and coordination of multiple community-based services to assist elders to reside in the least restrictive environment suitable to their needs.

Pursuant to ss. 430.203 and 430.204, F.S., a Lead Agency must be designated for each community care service system. A community care service system is defined as a service network comprising a variety of home-delivered services, day care services, and other basic services (referred to as home and community-based services). The primary goal of the community care service system is to prevent unnecessary institutionalization of functionally impaired elderly persons through the provision of community-based services.

In accordance with s. 430.203(9)(c), F. S., the Lead Agency must be given authority and responsibility to coordinate some or all services, either directly or through subcontracts, for functionally impaired elderly persons. These services must include case management, homemaker, respite care, personal care services, emergency alert response, and home-delivered meals. Pursuant to s. 430.203(9), F.S., agencies must be designated at least once every six (6) years through a Request for Proposal (“RFP”) process.

The main goal of the RFP is to define the scope of work to be accomplished and convey the requirements and expectations for Lead Agency designation under the Community Care for the Elderly Act. Pursuant to s. 430.203(9) (a), F.S., these guidelines include requirements for “assurance of quality and cost efficiency of services, minimum personnel standards, and employee benefits.”

The Area Agency on Aging for North Florida, Inc d/b/a Advantage Aging Solutions (“AAANF”) has been designated by the State of Florida Department of Elder Affairs (“DOEA”) as the area agency on aging for Planning and Service Area 2 (“PSA 2”) which encompasses Bay, Calhoun, Franklin, Gadsden, Gulf, Holmes, Jackson, Jefferson, Leon, Liberty, Madison, Taylor, Wakulla, and Washington counties. As such, it is identified by the State as the contracting agency of choice for the coordination and administration of the CCE Program in PSA 2. AAANF intends to fulfill the legislatively mandated requirements referenced above through the issuance of a CCE RFP process for the period of July 2025 - June 2026. The CCE contracts procured through the RFP process may be renewed on a yearly basis for five additional years contingent upon satisfactory performance and availability of funds. Community-based organizations interested in obtaining a CCE Lead Agency designation will be required to submit written proposals detailing their respective qualifications and plans for providing case management services, coordination of home and community-based services and other required Lead Agency functions of the CCE program.

Section 430.602(3), Florida Statutes, defines “Home Care for the Elderly” (“HCE”) as “a full-time family-type living arrangement, in a private home, under which a person or group of persons provides, on a nonprofit basis, basic services of maintenance and supervision, and any necessary specialized services as may be needed, for three or fewer elderly persons.” Pursuant to Rule 58H-1.002(6), Florida Administrative Code, a service provider under the HCE program is a CCE lead agency that is awarded a contract to provide case management and other services under the HCE program. Accordingly, both CCE and HCE services will be provided by CCE Lead Agencies designated pursuant to this RFP.

2. Statement of Need

According to demographic data provided by the DOEA the elder population (individuals 60 years of age or older) in PSA 2 is estimated to be 183,031 in 2024 (Department of Elder Affairs, 2024 Profile of Older Floridians). The elder population in PSA 2 comprises approximately 24% of the area’s general population in PSA 2, of which approximately 28,400 are estimated to have 2 or more disabilities. The majority of the older population (66%) live in the more urban areas within the PSA, particularly in Bay and Leon Counties. Florida is only second to California in the total

number of seniors that reside in the state. The elder population is the fastest growing population in Florida with estimations of seniors comprising one-third of the population by 2030 (Source: 2026-2029 State Plan, Bureau of Economic and Business Research, 2020 Census Counts).

In addition to the number and percent of elders projected to increase in the coming years, people are also living longer. An expected consequence is the continued rise in the need for long-term care services, specifically access to nutrition assistance, affordable housing, and transportation.

Along with these rising trends, there are challenges in addressing the increasing size of the 60 and older population. It is reasonable to expect as these individuals age in place and begin to cope with infirmities of old age, their reliance on a caregiver to help with their activities of daily living will also grow. The number of caregivers for the state of Florida is estimated at 2.7 million caregivers following a 2023 report from AARP indicating a rise in the amount of unpaid caregiver contributions from the previous report completed in 2019 (Source: AARP, Valuing the Invaluable: Florida's Family Caregivers Provide \$40 Billion in Unpaid Care). Programs must be well managed to avoid the unwanted results of depleted personal savings, strained government entitlement programs and unrealistic expectations of providers and caregivers (Florida State Plan on Aging, 2022-2025).

Review of available data indicates that services most often provided under the CCE program indicate the need to support functionally impaired elders with ongoing assistance and caregiving whether provided through formal or informal means.

In addition to Case Management and Case Aide, the core services most often provided in Planning and Service Area 2 to frail consumers under this program are:

- Personal Care
- Adult Day Care or Adult Day Health Care
- Homemaker
- Respite
- Specialized Medical Equipment, Services and Supplies
- Home Delivered Meals
- Emergency Alert Response

- Transportation
- Chore

The gap between people served and people awaiting services, as well as the disparity between client needs and amount of services actually provided, poses a serious concern for thought and action. As the contracting agency for development, coordination and administration of the CCE Program in PSA 2, the AAANF intends to address these concerns through issuance of this RFP, which seeks innovative approaches to service delivery and program management, while emphasizing improved quality and customer satisfaction, all at a reasonable cost.

3. Statement of Purpose

The purpose of this RFP is to solicit applications from responsive, responsible service agencies and organizations interested in providing case management and coordination of core services and carrying out all functions required by law for a CCE Lead Agency. As a result of the review of accepted proposals, a Lead Agency will be designated to coordinate case management and direct services for seniors residing in Washington County, Florida.

The designated Lead Agency will provide case management to all Community Care for the Elderly (CCE), Home Care for the Elderly ("HCE"), and Alzheimer's Disease Initiative ("ADI") clients. The Lead Agency will be expected to provide case management and coordinate the delivery of approved core services on a countywide/community care service areawide basis.

CCE funds for Washington County are being placed under competitive procurement. Those organizations currently holding the Lead Agency designations are not held harmless from responding to this RFP.

The terms "proposer" and "bidder" refer to the proposer.

In order to comply with the DOEA Programs and Services Handbook and achieve established goals and objectives set forth in the AAANF Area Plan on Aging, the designated Lead Agency will:

- a. Ensure that all other funding sources available have been exhausted before targeting CCE funds.
- b. Ensure that coordination is established with all community-based health and social services for functionally impaired older persons funded wholly or in part by federal, state and local funds in order to provide a continuum of care.
- c. Deliver directly, or through subcontracts, core and other necessary contracted services.
- d. Provide case management to applicants and ongoing recipients of core and other contracted services.
- e. Assess and collect co-payments for core and other contracted services.
- f. Train and use volunteers to the fullest extent possible to provide services to clients and assist with other Lead Agency activities.
- g. Compile accurate reports.
- h. Monitor subcontracts and vendor agreements to ensure quality services and efficient use of funds. Make payments to subcontractors for CCE services.
- i. Initiate and maintain coordination among agencies.
- j. Arrange in-service training for staff, volunteers, core service subcontractors, and other contracted service providers, in compliance with the DOEA Programs and Services Handbook and any applicable contract with the AAANF.
- k. Accept voluntary contributions, gifts and grants to carry out a community care service system.
- l. Demonstrate innovative approaches to program management, staff training and service delivery that impact on cost avoidance, cost effectiveness and program efficiency.
- m. Establish and follow procedures for handling recipient complaints and grievances concerning such adverse actions as service termination, suspension or reduction in services.

- n. Conduct client satisfaction surveys to evaluate and improve service delivery.
- o. Ensure the DOEA eCIRTS data is timely and accurate.
- p. Develop and implement complaint procedures and ensure subcontractors develop and implement complaint procedures to process and resolve client dissatisfaction with services.
- q. Implement measurable client outcomes directed at:
 - i. Maintaining clients in the least restrictive setting;
 - ii. Targeting high risk clients;
 - iii. Improving quality of life;
 - iv. Maintaining or improving functional status;
 - v. Improve operations and accessibility by:
 - 1. Assuring case management services are available on-call, including evenings, weekends and emergencies for High Risk Adult Protective Services (“APS”) cases.
 - 2. Providing services, other than case management, within 72 hours to APS referrals classified as high risk and in need of service to prevent further harm.
 - 3. Responding to referrals for persons identified as Aging Out by the Department of Children and Families and at imminent risk of institutional placement as identified by the Department of Elder Affairs and the Aging and Disability Resource Center.

In performing these responsibilities, the provider must conform to the regulations and standards in the DOEA Programs and Services Handbook, APS Operations Manual, and Contracts executed with the AAANF. The DOEA Programs and Services Handbook and APS Operations Manual referenced above, can be accessed below or through the following electronic files included in the RFP Package:

- The DOEA Programs and Services Handbook – dated February 2023, [Programs & Services Handbook - DOEA](#)

- Adult Protective Services Operations Manual – dated March 2022, [APS Operations Manual](#)

The CCE Lead Agency is a key component of the publicly funded long-term care system and its performance has a highly significant impact on the lives of the individuals it serves and the local, regional and statewide fiscal sustainability of the long-term care system. It is highly desirable for the Lead Agency designation be conferred only to case management agencies with a proven record of performance under conditions typically found in the everyday course of business of a lead agency designated pursuant to Ch. 430, F.S.

Agencies applying to be a CCE Lead Agency under the provisions of Ch. 430, F.S., must have the following qualifications:

- a. Ability to provide case management services to functionally impaired, elderly persons; coordinating community-based health and social services funded wholly, or in part, by federal, state and local funds to provide a continuum of care.
- b. Ability to provide in-home services directly, or by managing a community service system of providers through subcontracts.
- c. Ability to provide emergency services to at-risk individuals, such as elders at imminent risk of abuse or institutionalization.
- d. Ability to monitor subcontracts / vendors to ensure high quality services and efficient use of funds.
- e. Ability to coordinate service delivery using multiple funding sources and subcontractors / vendors.
- f. Ability to financially match CCE contract dollars at the rate of 10%.
- g. Be a responsible bidder meaning: a vendor who has the capability in all respects to fully perform the contract requirements and the integrity and reliability that will assure good faith performance. A bidder will be disqualified as non-responsible for a variety of reasons including such matters as: a lack of

required qualifications, lack of necessary resources and experience, financial

- h. inability or insolvency, submitting false statements in bids, and delinquencies or deficiencies on prior contracts.

The review panel will evaluate how well the resources and experience described in each applicant's proposal qualify the applicant to provide services required by the provisions of this RFP. Consideration will be given to the length of time and extent to which the applicant has provided services similar or identical to those requested. The applicant's personnel resources, as well as computer, financial and other technological resources will be considered in evaluating the applicant's qualifications to meet the requirements of this RFP.

To comply with the DOEA Programs and Services Handbook, the designated Lead Agencies will be expected to:

Promote Quality Services by Assuring:

- Case managers develop care plans to meet the individual needs of consumers.
- Case managers act as consumer advocates by seeking services from all community resources, not just from traditional service providers.
- Case managers monitor the quality, appropriateness and cost of services delivered to consumers.
- All staff are appropriately trained and assigned.

Implement Measurable Consumer Outcomes to:

- Maintain consumers in the least restrictive setting.
- Target high-risk consumers.
- Improve quality of life.
- Improve or maintain functional status.

Improve Operations and Accessibility:

- Assuring case management services are available on call, including evenings,

weekends, and emergencies.

- Provide needed assessment and services within 72 hours to APS referrals classified as high risk and in need of services to prevent further harm, pursuant to Ch. 415, F.S.
- Serve targeted groups as established in the State Plan on Aging.

Ensure Maximum Efficiency:

- Minimize administrative costs.
- Increase funds available for core services.
- Actively seek all community resources available for client services.
- Clearly identify in the client care plan funding alternatives used prior to using CCE funds.
- Seek competitive bids or negotiate vendor agreements for provision of quality, cost-competitive services not directly provided by the designated Lead Agency.
- Thorough and timely billing and collection of all co-payments.

Coordination with the Aging and Disability Resource Center

The AAANF is designated as an Aging and Disability Resource Center (“ADRC”), under the provisions of section 430.2053, F.S. The primary functions of an ADRC are to facilitate consumer friendly access to long term care services and benefits for elders and caregivers through a coordinated, multi-access “one stop” system that integrates information, referral and eligibility determination functions.

The ADRC functions are supported by designated Access Points. Lead Agencies are one type of ADRC Access Point. An Access Point operates as a local point of contact for elders and caregivers seeking access to long-term care services and benefits.

An Access Point agrees to:

- Refer to the ADRC all individuals seeking long-term care services and benefits to the Elder Helpline at 1-800-963-5337. This includes information, referral, intake, screening and eligibility determinations.
- Implement referral protocols and procedures established by the ADRC.

- Provide the ADRC with the most current information on elder resources available in the contractor's county or local community.
- Report the number of contacts (calls, walk-ins, emails, or faxes) of individuals seeking information, referrals or assistance for themselves or others.

The ADRC agrees to:

- Provide timely and helpful long-term care options to elders and caregivers referred by the Access Point.
- Provide the Access Point with written policies and procedures concerning the Access Point referral process.
- Provide technical assistance and training for Access Point staff, as needed.

The ADRC and Access Point mutually agree to:

- Cooperate on efforts to enhance consumer choice, support informed decision-making, minimize service fragmentation and confusion, reduce duplication of administrative paperwork and procedures, and increase cost-effectiveness of long-term care support and delivery systems.
- Participate in public education programs to increase awareness of ADRC services.

Additional coordination and program management responsibilities of the Lead Agency are listed throughout **Section A** of this document.

SECTION A – Program Module Instructions and General Requirements

Instructions: Bidders will complete the Service Provider Summary Page and respond the items A.1 - A.12 of the Electronic RFP Application.

General Requirements: Sections A.1 - A.12 below provide information about the details that Bidders will be required to provide responses to in the electronic RFP application.

A.1. Demographics and Community Care Service System

The Lead Agency designation is contingent upon the bidder's ability to accept referrals and provide case management and coordination of core services on a countywide basis for all eligible consumers residing in the specific county/community care service area ("CCSA") being bid. For the purposes of this RFP, a CCSA is defined as Washington County.

- a. The Lead agency will provide an overview of the social, economic and demographic characteristics of the County with special emphasis must be focused on reaching the areas of the community with greatest social and economic needs.
- b. The Lead Agency staff should participate in local networks and consortiums where hospitals, home health, social, and medical providers are represented, since these may be sources of referrals on such high-risk individuals. Even without participation of such groups, Lead Agencies are expected to conduct outreach throughout the county they propose to serve.

A.2 Consumer Identification

- a. Information and Education of Resources

The Lead Agency must develop a plan for how it will identify and inform frail elders and their caregivers of the range and availability of services by county of the intended service area. Services not available through agencies under subcontract or vendor agreement with a CCE Lead Agency should be obtained and/or arranged through referrals to other community resources. Referrals should be made to volunteer agencies, informal networks and proprietary agencies that charge fees a consumer may be able to pay. Services provided under the CCE program should be considered after all other viable options are examined to meet the needs of any given consumer.

- b. Outreach

The Lead Agency is charged with the responsibility of performing outreach to

identify and inform frail elders and their caregivers of the range and availability of services. This may be done in cooperation with church, civic, social, and medical organizations. The target group consists of those individuals most likely to fall into the high-risk category (priority levels 4 and 5) when screened by the ADRC.

c. Referral

1. As an Access Point to the Aging and Disability Resource Center, the Lead Agency will develop internal procedures for:
2. Making referrals on behalf of individuals seeking long-term care services and benefits to the ADRC's Elder Helpline at 1-800-963-5337.
3. Implementing referral protocols and procedures established by the ADRC. Services not available through the agencies under subcontract or vendor agreement with a CCE Lead Agency should be obtained and/or arranged through referrals to other community resources. Referrals should be made to volunteer agencies, informal networks and proprietary agencies that charge fees a consumer may be able to pay. Services provided under the CCE program should be considered after all other viable options are examined to meet the needs of any given consumer.

d. Release Processes for Clients Enrolled as APCL by the ADRC

The Assessed Priority Consumer List (APCL), also known as waiting list, is managed by the ADRC to prioritize persons in greatest need, and with the least assistance available to receive services first.

If an applicant is authorized (released) by the ADRC for enrollment in CCE, HCE, or ADI, the Lead Agency must complete a comprehensive assessment using the DOEA Form 701B within 14 business days after receiving authorization to enroll.

Please click on this link to [701 Forms - DOEA](#) or refer to the electronic files Reference Documents included in this RFP package to view and download the referenced screening and assessment tools and instructions.

Applicants on the APCL with low priority scores (priority rank 1 or 2) may chose to remain on the APCL and be reassessed annually by or request a change of condition assessment from the ADRC

Once a client becomes active and services begin in CCE, HCE, or ADI, the Lead Agency case manager must conduct follow-up contacts on referrals within fourteen business days to ensure services have begun as authorized.

e. Staffing Department of Children and Families Adult Protective Services High Risk Referrals

The DOEA and the DCF maintain a signed memorandum of agreement to ensure the delivery of timely services to vulnerable elders in need of services or victims of abuse, neglect, or exploitation. The agreement calls for development of joint local written procedures through a memorandum of understanding for serving APS referrals. The AAA/ADRC, DCF Regions, and Lead Agencies sign a tripartite memorandum of understanding that defines:

- The APS referral process;
- Method for tracking referrals in eCIRTS and the APS Tracking Tool (“ARTT”); and
- Service delivery guidelines in accordance with the APS Operations Manual dated March 2022.

The Lead Agency shall ensure that, pursuant to s. 430.205(5), F.S., those elderly persons determined by APS to be victims of abuse, neglect, or exploitation and who are in need of immediate services to prevent further harm and are referred by APS as “high risk”, will be given primary consideration for receiving CCE services.

Case coordination by a Lead Agency case manager must be available on a 24 hour per day/seven day per week basis for elderly victims of abuse, neglect, or exploitation who are referred by an APS investigator as High Risk. Emergency services may be provided or continued for up to 31 days for APS referrals by contracted emergency services providers. A DOEA Form 701B Assessment of the

individual must be conducted within 72 hours to determine eligibility for ongoing CCE services.

Lead Agency case managers must immediately report to the Abuse Registry any situation in which any elderly person is suspected of being or is the actual victim of abuse, neglect, or exploitation. Annual training must be completed regarding Mandatory Reporting.

Lead Agency case managers must coordinate closely with APS workers, investigators, and/or case workers to:

- Assure immediate need for services is met on a timely basis, that is, within 72 hours of an initial referral from the APS worker.
- Share client-specific or case-specific information, which assures the best and most expeditious care for the consumer and eliminates or reduces factors placing the consumer at risk of abuse, neglect, or exploitation.
- Ensure the coordination case management for at least 30-days, or longer if APS and/or client requests continuation of emergency services.
- Adhere stringently to the guidelines in the APS Operations Manual and the DOEA Programs and Services Handbook, which include requirements for maintaining client and case information in the following systems:

1. APS Referral Tracking Tool (ARTT)

A case manager and a designated back up point person must access and document assigned High Risk APS referrals in the APS Referral Tracking Tool (ARTT). Certificate of Completion is generated once the online training is completed, and a copy must be emailed to the AAANF. Please refer to the APS Operations Manual for more information.

2. eCIRTS

Lead Agency staff assigned data entry tasks in eCIRTS must request access to the system from the AAANF and complete

training modules in the DOEA/Wellsky Learning Platform. This system is used for such tasks as enrolling clients in approved programs, entering/maintaining client assessment and care plan information, reporting and billing the AAANF for services provided and uploading relevant documentation as required by policy.

g. Prioritization Procedures

As defined under s. 430.203(7), F.S., a functionally impaired elderly person means “any person 60 years of age or older, having physical or mental limitations that restrict the ability to perform the normal activities of daily living and that impede the capacity to live independently without the provision of core services. Functional impairment shall be determined through a functional assessment administered to each consumer for Community Care for the Elderly core services. The functional assessment shall be developed by the Department.”

The Uniform Client Assessment Instrument (Form 701B) developed by the Department of Elder Affairs must be used by the CCE Lead Agency case manager to determine an individual’s level of need. Scores obtained using the Assessment will provide a priority ranking score to help determine the need for services.

Once referred by the ADRC, final determination of eligibility is the responsibility of the CCE Lead Agency. A potential consumer will be determined to be eligible only after a DOEA Form 701B Assessment has been completed to establish age, need, and risk of institutional placement without services.

The CCE Lead Agency case manager must conduct follow-up contacts on referrals within fourteen business days to ensure services have begun as authorized.

Priority Groups have been established for receipt of CCE services, and are as follows in order of priority:

1. Adult Protective Services High Risk Referrals

CCE emergency services are specifically provided within 72 hours to alleged or actual victims of abuse, neglect, or exploitation assigned as High Risk by the local Adult Protective Services Investigator. Under this provision, services must be carefully coordinated by the CCE Lead Agency with the Adult Protective Services Investigator, assuring all ordered services are coordinated to assist in reducing immediate risk of harm. Actual or alleged victims of abuse, neglect, or exploitation, or those at risk for the same, are afforded the highest priority access to CCE services.

2. Imminent Risk of Nursing Home Placement

Referrals for consumers deemed to be at imminent risk of nursing home placement through a CARES assessment receive the next highest priority for CCE services. Referrals from long term care facilities for individuals who wish to and are assessed and found capable to live in a less restrictive community setting also require immediate, emergency services in order to stabilize the transition for the consumer.

3. Individuals Designated as Aging Out

Clients who are designated as Aging Out and participating in Community Care for Disabled Adults (CCDA) or Home Care for Disabled Adults (HCDA) are referred to the ADRC by Department of Children and Families staff to ensure that a consistent protocol is followed for transitioning individuals receiving CCDA or HCDA services into programs serving individuals age 60 and older.

A.3. Case Management Functions

Respondents to this RFP will be required to submit a proposal detailing the cost for case management services and CCE core services. Case Management must be provided directly by the designated Lead Agency and by that agency only. It is anticipated that case aides will be reflected as a separate service than case management. CCE core services may be offered either directly by each Lead Agency or through qualified provider agencies under subcontract with each Lead Agency. AAANF reserves the right to review and approve all subcontracted

reimbursement rates for core services.

County specific funding levels for CCE HCE, and ADI and current active enrolled client counts for 2025-2026 is provided in the Reference Documents tab.

[Note: Bidders must have two-years of continuous case management experience; see paragraph 13 of the Organizational Capability Package.]

The APCL, also known as waiting list, is managed by the ADRC and must be maintained when formal services funded by Medicaid or programs administered by DOEA are not available. Agencies with waiting lists must inform the consumer, or the referring party, about the waiting list and suggest other agencies or sources of help. Further information on APCL, or waiting list, requirements are noted in the DOEA Programs and Services Handbook, Chapter 2.

a. Comprehensive Assessment of Eligible Consumers

The case manager is responsible for completing the DOEA Client Assessment Instrument, Form 701B. The assessment will determine the person's functional status, existing resources, and service needs. Further information on DOEA Form 701B requirements are noted in the DOEA Programs and Services Handbook.

i. Determination of Functional Status

A consumer's functional status is determined by the scores received on the Activities of Daily Living ("ADL") and the Instrumental Activities of Daily Living ("IADL") sections of the DOEA Form 701B Assessment instrument.

ii.. Establishing Service Needs and Care Plan Development

The result of the comprehensive assessment process is establishment of a consumer care plan, which must thoroughly address all service needs of the functionally impaired elderly person.

b. Service Care Plan

Lead Agency case managers must prepare a care plan for each eligible consumer using the format prescribed by the DOEA Programs and Services Handbook, Chapter 2, DOEA Forms 203A and 203B. The care plan is developed in coordination with the consumer and/or caregiver and must address all consumer needs. It is the responsibility of the case manager to consider the most appropriate resources to provide the services needed, as indicated in the care plan. Consumers or caregivers may accept or decline services or providers of services. The option of the consumer to choose from multiple service provider agencies must be observed at all times.

Case managers must manage consumer care plans by arranging for the services received and monitoring the quality of service delivered to their clients. Review the care plan should occur at least twice annually to ensure the continued appropriateness of prescribed services and to determine if additional assistance is needed. Specific frequency requirements for each Program are prescribed in the DOEA Programs and Services Handbook, Chapter 2.

All consumers must be reassessed at least annually, and care plans must reflect changing or ongoing consumer needs.

c. Consumers to be Case Managed

The Lead Agency will determine the number of case management personnel needed to continue services to existing clients at time of bid award, serve highest priority clients first, and serve prioritized clients from the wait list. Refer to the DOEA Programs and Services Handbook for recommended case load caps.

d. Coordination of Case Management

Lead Agency case managers will coordinate all community resources for functionally impaired elderly persons in a community care service system which is designed to provide a continuum of care as the needs of consumers change. This includes administering and

managing the Community Care for the Elderly (CCE) program, the Home Care for the Elderly (HCE) program, and the Alzheimer's Disease Initiative (ADI) program.

Funds appropriated by the Florida Legislature for CCE must be used only to provide CCE services, case management and directly related expenditures. The Lead Agency must ensure all other funding sources available have been exhausted before using CCE funds. Additionally, the designated Lead Agency must prepare monthly CCE, ADI and HCE surplus/deficit reports and forward the reports to the AAANF as described in the Model Contract (refer to Appendices).

- HCE: The goal of the HCE Program is to encourage the provision of care for elders in family-type living arrangements or in private homes, as an alternative to nursing home or other types of institutional care. The program encourages a person or group, acting as caregiver(s), to provide basic support and maintenance as well as assistance in arranging specialized services, for three or fewer elders on a not-for-profit basis.
- ADI: The ADI Program is designed to address the special needs of consumers with Alzheimer's Disease or related dementias, and the needs of their caregivers through Respite services.

Each of these programs is funded individually and carries distinct program responsibilities. Alternative funding (City, County, Local, etc.) must be incorporated into the planning and coordination of client services prior to utilizing the DOEA/AAANF contracted funds.

Each consumer will be assigned one case manager, even if the consumer is enrolled in more than one program. Case management providers are strongly encouraged to cost-share case managers, across programs to assure consumers receive the most appropriate mix of services.

Multiple assessments will not be conducted for the same consumer between programs. Providers will check eCIRTS to determine if a current assessment has

been completed prior to conducting an assessment.

e. Resource Identification and Exploration

The case manager is the gatekeeper in the community care service system with the knowledge and responsibility to link consumers to the most beneficial and least restrictive array of community services and resources irrespective of funding source or program. Case managers serve as a contact between health care and social service delivery systems, particularly physicians, hospitals, health maintenance organizations, nursing homes, and home health agencies.

To provide an effective continuum of care, the Lead Agency must ensure coordination with all community-based health and social services programs for functionally impaired older persons funded wholly or in part by federal, state and local funds. Voluntary contributions, gifts and grants must be encouraged and used to expand CCE services to support a comprehensive array of services.

f. Co-Payment

Collecting co-payments from clients is an important responsibility for providers of CCE and ADI services. State General Revenue resources to support services for the elderly cannot meet the growing needs. Therefore, every eligible client must be given an opportunity to participate in the co-pay for services program. It is critical case managers assess potential clients for their ability to participate in the cost of their care.

Lead Agency case managers must assess all non-exempt CCE consumers for services rendered based on ability to pay, in accordance with rules and guidelines adopted by the DOEA. Co-Pay Guidelines are included in the DOEA Programs and Services Handbook, Appendix B.

The Lead Agency is responsible for timely billing and collecting assessed co-payments for all services provided under the CCE program. Case managers must pay particular attention to the procedures established for termination of consumers

due to non-payment, the requirements for consumer notification of right to appeal, and approval of waiver of termination for non-payment. The collected funds must be reported to AAANF on a monthly basis. All collected co-payments funds must be used to expand consumer services under the CCE program and may be used to count toward the required 10 percent contract match. The designated Lead Agency annual co-pay goals will be established by AAANF in conjunction with the Lead Agency.

g. Budget Management

The Lead Agency will implement procedures to track case management and care plan costs throughout the year in order to ensure enrolled clients will be served the entirety of the contract year. Please refer to the Model Contract for surplus/deficit monthly reporting requirements).

A.4. Service Delivery Process

a. Service Delivery

The Lead Agency must ensure that a variety of core services which are designed to prevent or delay nursing home placement are provided directly by the Lead Agency or are subcontracted with a procured provider. At a minimum, the core services of case management, homemaker, respite care, personal care services, and supplies specialized medical equipment, services and supplies must be included in the CCE Program application. In circumstances where services are being subcontracted, the Lead Agency must develop a plan that includes the following:

1. Identification of services under subcontract agreements.
2. Procurement process used to ensure best quality, price and availability of services.
3. Process for verifying current licenses/certifications required under state law.
4. Process for verifying all subcontractor employees/volunteers have successfully completed Level II Background Screening and updates are conducted as required by law.
5. Lead Agency monitoring processes, tools and frequency to be used for subcontracted services.

(Note: Case Management may only be provided by the Lead Agency and is prohibited from subcontract agreements).

b. Description of Service Delivery (by service)

In addition to the prescribed core services of case management, homemaker, respite care, personal care services, and emergency alert response additional services as listed in Appendix A of the DOEA Programs and Services Handbook, dated 2023 may also be incorporated into the Lead Agency's programming based on identified client needs and appropriate budgeting.

The form contained in the corresponding section of the electronic RFP application "*Description of Service Delivery (by service)*" must be completed individually for each service the Lead Agency intends to coordinate.

c. Subcontractor Monitoring

Bidders will be required to develop and submit a draft monitoring schedule and monitoring tool used for any subcontractors/vendors of the Lead Agency, if relevant.

A.5. Quality Assurance

a. Plan for Measuring Quality Assurance

The Lead Agency will develop a plan and tool/survey to self-monitor and self-evaluate the quality-of-service delivery by its own staff and its subcontractors.

The degree of client satisfaction with service quality and staff effectiveness must be evaluated periodically during the contract period. Consumer surveys must be conducted, compiled and results evaluated and reported to the AAANF at least once annually. Survey results are expected to be analyzed by the Lead Agency and used to develop continuous quality assurance initiatives to ensure improvements to service delivery.

b. Staff Training and Retention Strategies

Formal orientation, pre-service, in-service training plans must be established by the Lead Agency according to standards and requirements specified in rules and the DOEA Programs and Services Handbook.

All DOEA services require a general pre-service orientation along with training specific to the service being provided. Lead Agencies shall be responsible for provision of the pre-service and in-service training for all paid and volunteer staff as referenced in the DOEA

Programs and Services Handbook.

Each Lead Agency shall describe and allocate budget funds for training in the provider application. It is also essential that Lead Agencies meet with contracted service providers to establish necessary protocol and procedures for authorization of services, paperwork and reporting, unusual incident reports, and general expectations for coordination. Service providers must recognize that case managers are the gatekeepers and have responsibility for coordinating and authorizing services to clients.

Pre-service orientation for staff (and volunteers, as appropriate) should include:

- An overview of the aging process
- An overview of the aging network (ADRC, DCF, AHCA, DOEA, and other agencies) and the agency's relationship to the community care service system
- Review of the relationship of case management to the community care services system
- Communication techniques with the elderly
- Overview of concepts related to abuse, neglect, exploitation, and APS reporting
- APS Referral Tracking Tool (ARTT) Training and Certification
- Case Management 701B Assessment Training and Certification
- Local agency service procedures and protocol
- Client confidentiality
- HIPAA policies and procedures
- Use and completion of assessment instruments and care plans
- Interviewing skills and techniques
- Record keeping procedures
- eCIRTS procedures
- Caregiver training regarding responsibilities and resource development techniques
- Interagency coordination and informal network development training

In-service training hours and topics are to be provided at the discretion of the Lead Agencies. Case managers must be trained and certified as required by DOEA policy with regard to use of screening and assessment tools and attend and pass a post- test for Care

Plan training provided by the AAANF. Additionally, they must have 6 hours of in-service training per year and will document the duration and content in case management staff records. Topics such as Alzheimer's Disease, Cultural Sensitivity, Caregiver's Needs, Dealing with Difficult Clients, Mental Health and the Elderly, and continuing Handbook and Policy Reviews are appropriate. Attendance at AAANF or DOEA sponsored training may be required as appropriate.

Required training will include but not be limited to the intake and risk assessment instruments, care plan development and costing, imminent risk policies/procedures, and the prioritization scoring instrument (701 tools). AAANF will conduct training throughout the year which includes assessment and care plan training.

The Lead Agency should ensure measures for quality incentives, beyond salary adjustments are developed to help retain talent. Activities such as annual performance evaluations and goal setting, recognition, team building, and networking opportunities are important to consider. Well-trained staff who feel valued and appreciated are known to significantly delay and reduce loss of talent.

A.6. Process for Handling Reporting Adverse Incidents, Consumer Complaints, and Grievances

a. Reporting Adverse Incidents

The Lead Agency must ensure that procedures include a process for complaints or grievances involving alleged abuse, neglect, or exploitation to be reported to the Florida Department of Children and Families Adult Protective Services – Abuse Hotline, as required by contract and Florida Statute. Complaints or grievances concerning situations that may endanger the health, safety, or welfare of a recipient will be reported to the AAANF within 48 hours of the Lead Agency or a subcontractor having knowledge of such conditions. Please refer to Appendix D of the DOEA Programs and Services Handbook for minimum guidelines in the development of grievance procedures.

b. Consumer Complaints

The Lead Agency must develop and maintain procedures that provide for handling consumer complaints regarding quality assurance issues. The procedure must include use of a tracking log by date, nature of complaint and resolution of complaints.

c. Consumer Grievance Procedures

The Lead Agency must provide for processing appeals regarding denial, reduction, or termination of core services. These procedures must provide for informing all consumers of the grievance and appeal process, including prior written notification to the consumer of activities related to the grievance/appeal. Refer to Appendix D of the DOEA Programs and Services Handbook, dated February 2023 for minimum guidelines in the development of grievance procedures.

A.7. Reporting

The Lead Agency is required to compile CCE, HCE, and ADI service delivery statistics and other data, and report to AAANF and the DOEA in accordance with the reporting requirements developed by the DOEA and the contracts between the Lead Agency and AAANF.

Monthly reporting requirements for eCIRTS require all client and service data for the previous month to be entered into eCIRTS by the 10th calendar day of the month, as prescribed in contract. Information is reported in the following categories:

- Consumer Demographics
- Consumer Assessment Information
- Consumer Program Enrollment
- Consumer Care Plan Information
- Consumer Services
- Units of Service
- Fiscal Request for Payments

Case management, case aide, and any CCE core service provided by the Lead Agency must be reported on a monthly basis in eCIRTS by the Lead Agency. Additionally, all

request for payment reporting requirements must be submitted within the time frame established by AAANF.

In addition to proper storage, security, and preservation of source documentation, eCIRTS data must also be protected. Maintenance will include valid backup documentation and retention of electronic data on a regular basis according to contract (see Model Contracts).

A.8. Client Confidentiality and Security, and Health Insurance Portability and Accountability (HIPAA) Compliance

a. Confidentiality and HIPAA Compliance

Information about functionally impaired elderly persons who receive services under the CCE Program is confidential (s. 430.207, F.S.). Information received through files, reports, inspections, or otherwise, by the DOEA, by persons who volunteer services, or by persons who provide services through contracts with the DOEA, the ADRC, Lead Agencies or other contracting agencies, is confidential and exempt from the provisions of s. 119.07(1), F.S. Such information may not be disclosed publicly in a manner as to identify a functionally impaired elderly person, unless that person or his/her legal guardian provides written consent.

The Lead Agency must ensure confidentiality of consumer information by all employees, service providers, and volunteers as required by state laws. It is essential that training be established to promote security of information, including protection from loss, damage, defacement, or unauthorized access.

The designated Lead Agency must comply with all requirements of the Health Insurance Portability and Accountability Act ("HIPAA") of 1996. The DOEA and the Lead Agency recognize that each is a Business Associate of the other under the terms of HIPAA. As such, each agrees to the terms as written in the Model Contracts.

b. Social Security Disclosure

In accordance with Title XIX of the Social Security Act, the client must be informed that disclosure of the SSN is voluntary and will be used for referral and screening for

Medicaid purposes (*refer to 701D: Assessment Instructions in Chapter 2 of the DOEA Programs and Services Handbook, dated February 2023*). The client is not required to provide the SSN but is encouraged to do so in order for staff to screen for Medicaid eligibility and possible referral to the DCF for services.

c. Compliance with E-Verify

To comply with the Executive order 12989, as amended, and Executive Order No.11-02, the Lead Agency agrees to utilize the U.S. Department of Homeland Security's E-Verify system, <http://www.uscis.gov/e-verify>, to verify the employment eligibility of (1) all new persons employed by the Lead Agency during the contract term to perform duties pursuant to the contract; and (2) all persons, including subcontractors, assigned by the contractor to perform work pursuant to this contract. The Lead Agency shall also include a requirement in its subcontracts that the subcontractor shall utilize the E-Verify system to verify the employment eligibility of all new persons employed by the subcontractor during the contract term. Contractors meeting the terms and conditions of the E-Verify System are deemed to be in compliance with this provision. The Lead Agency and its subcontractors shall complete and sign the Verification of Employment Status Certification prior to the execution of the contract.

d. Level II Background Screening

The Lead Agency shall ensure that, prior to providing services, all persons having access to vulnerable elders, their living area, funds or personal property, or protected health information pertaining to such individuals, shall pass a Level II criminal background screening in accordance with the requirements of s. 430.0402 and ch. 435, F.S., as amended. These provisions shall apply to employees, subcontractors, consultants, direct service providers and volunteers. Consequently, any commitment for employment, purchase of services, or volunteer program participation shall be contingent upon passing of a Level II background check. The background screening shall include employment history checks as provided in s. 435.03(1), F.S., and both local and national criminal record checks coordinated through law enforcement agencies. For purposes of this section, the term "direct

service provider" means a person 18 years of age or older who, pursuant to the program to provide services to the elderly, has direct, face-to-face contact with a client while providing services to the client or has access to the client's living areas or to the client's funds or personal property. This term includes coordinators, managers, and supervisors of residential facilities and volunteers. Refer to Appendix E of the Department of Elder Affairs Programs and Services Handbook, dated February 2023 for detailed processes and procedures.

A.9. Disaster Preparedness

The Lead Agency is required to enter data into eCIRTS for all consumers. In addition to basic identification, location of residence, phone number, and caregiver (when applicable) contact information, this data includes fields to indicate if a consumer needs help for emergency evacuation and if they have a special disaster registry listing. The Lead Agency must be prepared to use eCIRTS reports to identify, locate, and assist with the evacuation and other needs of endangered elderly in the event of a disaster, as directed by the AAANF and/or DOEA.

To prepare for an emergency/disaster event, the Lead Agency will cooperate, coordinate, and train with the local emergency management agency to the fullest extent possible. The Lead Agency will maintain a current DOEA required Disaster Plan to be implemented, at the direction of the AAANF and/or DOEA, in the event that a disaster is declared by federal, state, or local officials. The plan minimally calls for the following measures and procedures:

- Designation of a Disaster Coordinator.
- Plans for contacting all at-risk consumers, on a priority basis, prior to and immediately following a disaster.
- Plans for receiving referrals from and conducting outreach and delivering services, before and after a disaster, to elderly persons in need who may or may not be current consumers.
- Plans for after-hours coverage of network services, as necessary.
- Plans for delivering meals to consumers prior to and following a disaster.

- Plans for assigning staff to Emergency Operation Centers and/or declared assistance centers to ensure that elderly victims in the disaster area receive help.
- Plans for relocating Lead Agency and staff for continued operations if office is incapacitated.

A.10. Volunteer Plan

Pursuant to s. 430.204(3), F.S., concerning the CCE Program, “The use of volunteers shall be maximized to provide a range of services for the functionally impaired elderly person. The contracting agency shall provide or arrange for the provision of training and supervision of volunteers to ensure the delivery of quality services. The contracting agency may provide appropriate insurance coverage to protect volunteers from personal liability while acting within the scope of their volunteer assignments under a community care service area. The coverage may also include excess automobile liability protection.”

Bidders must provide assurance and demonstrate staffing capability to train and supervise volunteer staff and volunteer supervisors. All bidders must submit a written plan to address recruitment, training, utilization and retention of volunteers to assist the CCE Lead Agency.

Reporting on the number of volunteers, types of volunteer services and volunteer hours must be submitted to the AAANF annually in a format to be provided.

Lead Agencies may use CCE funds and staff for securing, training and using volunteers. CCE funds may also be used to provide insurance and personal liability coverage, excess automobile liability protection and automobile mileage reimbursement. Per s.112.061(7), (d)1., a., F.S., the current State of Florida approved mileage reimbursement rate is **\$0.445 per mile**.

Section B. Contract Module – General Requirements

Instructions: Bidders will complete respond to items B.1 - B.5 of the Electronic RFP Application.

General Requirements: Sections B.1 - B.5 below provide information about the details that Bidders will be required to provide responses to in the electronic RFP application.

B.1. Operating Budget

Bidders will complete the Operating Budget template and upload it accordingly. The AAANF will train the successful bidder on the Unit Cost Methodology process for establishing rates for individual services.

B. 2. Match Commitment Pages

Bidders awarded funds through this solicitation process will be required to provide a match equal to no less than 10% of the total budget presented. The match requirement may be satisfied through a commitment of cash or in-kind resources, or a combination of both.

General revenue dollars from other contracts or grants may not be used as match. Appropriate matching funds based on the Lead Agency's earnings must be reported monthly.

Match Commitment Forms (a-f) must be completed as relevant in the electronic application.

B.3. Organizational Capability Package

The “**Organizational Capability Package**” details a list of **required** documentation to be submitted by all bidder agencies. These items will assist the review team in measuring the bidder's management capabilities, financial position, and experience. Bidders are urged to pay close attention to the specific requirements listed in and address each item in detail. In addition to the corporate documents being requested, there is an Administrative Assessment Checklist and a requirement Letter of Attestation – 90-days of Operational Financial Liquidity (using the template provided by the Contractor on the procurement site) that must be downloaded and signed.

B.4. Required Signature Forms

[NOTE: Bidders will need to download referenced forms from the RFP Procurement Site at: <https://www.advantageaging.org/procurement>]

a. Contract Terms and Conditions

CCE Contracts procured through the RFP process may be renewed on a yearly basis for five additional years contingent upon satisfactory performance and availability of funding. Bidders may access Model Contracts to view on the RFP Procurement Site.

All bidders are instructed to carefully read through the documents in order to determine their agency's ability to meet the requirements in AAANF contracts. Proposals must include a signed and dated **Contract Terms and Conditions Affidavit** that certifies each bidder's intention of abiding by all terms and conditions of the contract.

Failure to submit a fully completed contract Terms and Conditions Affidavit constitutes a fatal flaw which automatically disqualifies a proposal from further review and consideration.

b. Statement of No Involvement

A signed statement indicating that neither the bidder nor any person with an interest in the firm had a noncompetitive contract with AAANF that involved any of the preliminary work (e.g., a feasibility study or actual preparation of the RFP) prior to the release of the solicitation document. This form can be downloaded from the RFP Procurement Site.

c. Certification Regarding Lobbying

Bidders will sign this certification affirming that federal or state appropriated funds will not be used to pay for professional lobbying services and that required registration and disclosure for lobbying activity will be filed as instructed in the "Disclosure Form to Report Lobbying."

d. Debarment

Bidders will sign this certification affirming that (1) The prospective Vendor certifies, by signing this certification, that neither he nor his principals is presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this contract/subcontract by any federal department or agency, and (2) Where the prospective Vendor is unable to certify to any of the statements in this certification, such prospective Vendor shall attach an explanation to this certification.

e. Statement of No CCE Funding Utilized

Any and all expenses involved in the preparation and submission of proposals in connection with this solicitation process shall be borne by the bidder(s). The AAANF assumes no liability for any cost incurred by the bidder in responding to this RFP nor for any other pre-contract costs. Current CCE providers must certify they have not used CCE program funds in preparing a response to this RFP by completing this form.

f. Availability of Documents

The form identifies required documentation that must be maintained and available at the bidder's administrative office. The form must be signed and dated by the bidder's authorized agency official. The form must be download from the RFP Procurement Site at: <https://www.advantageaging.org/procurement>

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SECTION C. GENERAL INFORMATION AND RFP TIMELINE

[Note: All times are Eastern Time Zone]

ACTIVITY	DATE/TIME	LOCATION
Request for Proposal Issued by the Agency	Tuesday, July 8, 2025 5:00 P.M.	Electronically Posted: https://www.advantageaging.org/procurement and Noticed at https://www.flrules.org/bigDoc/Default.asp
Bidder's Conference Q & A	Friday, July 18, 2025 1:00 P.M. Virtually Via Zoom	Virtually: Join Zoom Meeting https://us02web.zoom.us/j/81511796147?pwd=tlvKfcrzPQj3FljQfliPjmKVaxbALQ.1 Meeting ID: 815 1179 6147 Passcode: 776629
Notice of Intent to Submit an RFP Response	Monday, July 28, 2025 5:00 P.M.	Must be uploaded in the Procurement Portal https://www.advantageaging.org/procurement
Last Day for written inquiries to be submitted via the Procurement Portal	Friday, August 1, 2025 5:00 P.M.	Must be uploaded in the Procurement Portal https://www.advantageaging.org/procurement
Anticipated Date for Agency Responses to RFP Inquiries	Friday, August 8, 2025 5:00 P.M.	Electronically Posted: https://www.advantageaging.org/procurement <i>(Note: Responses to questions received before the Bidder's Conference will be included in this posting)</i>
Proposals Due to the Agency	Complete responses to this RFP are due by: Friday, Friday, August 29, 2025, 4:00 P.M.	Must be uploaded in the Procurement Portal as Per Submission Guidelines https://www.advantageaging.org/procurement

ACTIVITY	DATE/TIME	LOCATION
Board of Directors Meeting: Bid Review Committee Recommendations	Thursday, September 25, 2025 10:30 A.M.	Area Agency on Aging for North Florida, Inc. 2414 Mahan Drive, Tallahassee, FL 32308
Anticipated Posting of Notice of Intent to Award	Thursday, September 25, 2025 3:00 pm	Electronically Posted: https://www.advantageaging.org/procurement and https://www.flrules.org/bigDoc/Default.asp
Notice of Intent to Protest Due (72 hours after Notice of Intent to Award is Posted)	Tuesday, September 30, 2025 3:00 P.M.	Protest must be uploaded to the Procurement Portal at www.advantageaging.org
Deadline to File Written Appeals	Tuesday, October 14, 2025 3:00 P.M.	Written appeal must follow criteria as described in Section C., Item I of this RFP.
Appeals Resolved	TBD	<i>Refer to Section C.I of the RFP for procedures</i>
Contract Start Date	Sunday, November 1, 2025 (Pending status of protest or appeal)	

A. Notice of Intent to Submit a Proposal

Applicants are required to submit an electronic Notice of Intent to Submit a Proposal on the Submittable application site by the deadline of **5:00 p.m. on Monday, July 28, 2025**. Failure to submit the Notice of Intent to Submit a Proposal will preclude an applicant from submitting a

proposal. All addenda to the RFP will be posted on the AAANF's RFP Procurement Site at:
<https://www.advantageaging.org/procurement>

In the event that less than two Notices of Intent are received in response to this RFP, the AAANF may identify that there is only a single source provider for the respective contract and, therefore, cancel the RFP as it relates to that county and immediately negotiate a contract with that single source. The AAANF may also require the single source provide a complete application under this RFP in order to verify that the single source is a responsive and responsible bidder.

Failure to submit the Notice of Intent on the part of a bidder will preclude that party from submitting a proposal on the project.

B. Inquiries/Cone of Silence

Verbal inquiries or other verbal questions relating to this RFP will not be accepted. Written inquiries only will be accepted between the release of the RFP on Tuesday, July 8, 2025 up until 5:00 p.m., Friday, August 1, 2025 via the procurement email address:
procurement@aaanf.org

Written inquiries, including email may only be addressed to the AAANF's procurement email address: procurement@aaanf.org for this RFP. The AAANF will send a reply email that the inquiry has been received. No phone calls will be accepted. The AAANF has no obligation to respond to any inquiries that have not been received by the AAANF within the established timeframe.

Cone of Silence: Bidders to this RFP, or persons acting on their behalf, may not contact, between the release of this RFP and deadline for submission of written appeals, any employee or officer of the AAANF, any individual involved in evaluating proposals submitted in response to the RFP, any employee or officer of the State of Florida, or any elected politician concerning any aspect of this solicitation, except in writing to the procurement email address. Violation of this provision may be grounds for rejecting a proposal.

No interpretation of the meaning of the RFP documents will be made to any proposer orally. It

is the bidder's responsibility to ensure that written inquiries submitted by email have been received by the AAANF. Oral statements made by AAANF representatives in the pre-proposal conference may not be relied on by bidders unless such statements are included in the written summary of the conference or addendum. Failure of a bidder to receive any such addendum or summary shall not relieve said bidder from complying with the RFP documents as clarified or revised in writing. All addenda and clarifications issued shall become part of the RFP documents.

Attendance at the **Bidder's Conference** is mandatory. Please refer to the RFP Timeline for the date, time and Zoom link. A summary of key questions and answers from this conference and any addenda to the RFP document will be posted on the agency's Procurement Site at: <https://www.advantageaging.org/procurement> and ongoing updates will be provided until Friday, August 8, 2025.

C. Funding Levels

Funding for the CCE and other General Revenue programs is contingent upon an annual appropriation from the Legislature and is subject to reduction or elimination. The total estimated amount of funding to be awarded pursuant to this RFP, based on 2024-2025 contracts is and is subject to the availability of funds. Please refer to the Procurement Site to view projected allocation by program at: <https://www.advantageaging.org/procurement>

Distribution of Funds: The funds are allocated on a county-by-county basis. The amount that is allocated to each of the respective fourteen counties is determined by a funding formula, which is based on a board approved funding formula relevant to aging demographics. These amounts represent state funds only and do not include required matching funds, program income, and/or other resources incorporated into the total project cost. The total amount of funds available by county is subject to change during the term of the contract. Any necessary changes will be made pursuant to the terms of the contract.

D. Type of Contract and Method of Payment

Only fixed unit rate contracts will be issued. Bidders awarded funds will be reimbursed monthly for the units of service provided, at the contracted unit rate, up to the total amount of

the contract. The CCE Lead Agency is expected to manage its budgets such that the Lead Agency is able to provide services to enrolled clients for the entire contract period without interruption. Lead Agencies shall monitor overall contract expenditure rates during the contract period. Service and client information must be maintained in eCIRTS. Case management and core service units must be entered in eCIRTS for Lead Agency reimbursement. Monthly invoices submitted by the Lead Agency is consolidated and submitted to the DOEA for payment. Payments are usually received within 45 to 60 days of submission.

Bidders awarded funds through this solicitation agree to maintain and provide upon request all programmatic, financial, administrative, and eCIRTS reports as required in the associated contracts. Copies of the Model Contracts are available for review in the Reference Documents links.

Failure to abide by these terms and conditions may result in, but is not limited to, suspension of payment and/or termination of contract.

E. Trade Secrets

The Recipient must ensure fixed rates include only those costs which are in accordance with all applicable state and federal statutes and regulations and are based on audited historical costs in instances where an independent audit is required.

AAANF is unable to assure confidentiality of information fitting the definition of “trade secrets” pursuant to s. 812.081, F.S., due to the lack of protection of trade secrets in Chapter 199, F.S.

AAANF assumes no liability for disclosure or use of unmarked material containing trade secrets or other confidential material and may use or disclose the data for any purpose and may consider that the proposal was not submitted in confidence and, therefore, is a public record pursuant to Chapter 119, F.S.

The AAANF is not obligated to agree with a bidder’s claim of trade secret for marked materials and, by submitting a proposal, the bidder agrees to be responsible for defending its claim that each and every portion of marked as trade secret is exempt from inspection and copying under Florida’s Public Records Law. Failure to timely defend its claim that each identified trade

secret information will constitute a waiver of such claim. Each bidder agrees that it shall protect, defend, and indemnify, including attorney fees and costs, including any appellate costs and attorney fees, the AAANF, its officers, employees, agents, and legal counsel from any and all claims and litigation arising from or relating to bidder's claim that the marked portions of its proposal are confidential, proprietary, trade secret, or otherwise not subject to disclosure under Florida's public record laws.

F. Allowable Costs, Method of Cost Presentation, and Method of Payment

All CCE program costs must be reasonable and necessary. Allowable costs are found in the cost principles, administrative requirements, and other provisions of all applicable state and federal laws and regulations including: ss. 215.97 and 216.348, F.S., Title 45, Code of Federal Regulations ("CFR"), Part 74, and/or 45 CFR, Part 92, and/or 48 CFR Part 31, and Office of Management and Budget ("OMB") Circulars A-21, A-87, A-110, A-122, and A-133, whichever is applicable to the bidder's organization.

G. Acceptance of Proposal

Proposals and associated documents must be uploaded to the Procurement Portal no later than **4:00 pm, Eastern Time on Friday, August 29, 2025**. No changes, modifications, or additions to the proposals submitted will be accepted after the submission deadline. However, AAANF may seek clarifications from proposers. Proposals not received within the Procurement Portal by the specified date and time per the AAANF's clock will be rejected.

H. Award and Notice of Contract Award

If an award under this RFP is made, AAANF will designate as Lead Agency the lowest cost, most responsive, most responsible, and most advantageous bidder to the AAANF in compliance with this RFP provided said proposal is considered (within the sole discretion of AAANF) reasonable and in the best interest of AAANF to accept. Lowest, responsive, responsible, and most advantageous refers to the results of the quantitative and qualitative evaluation process followed in the review of all proposals to be submitted. AAANF reserves the right to waive any minor irregularity in any proposal. AAANF reserves the right to reject any one or all proposals, or any part of any proposal, to re-advertise this RFP; to postpone

or cancel the solicitation process; to waive any informality in any proposal, and to award the contract in the best interest of AAANF. AAANF, likewise, reserves the right to reject the proposal of any proposer who has previously failed to perform properly or to complete on time, contracts of similar nature, or who is not in a position to perform the contract.

Written notice of Intent to Award Contract will be posted on the Procurement Site **Thursday, September 25, 2025**. In the event a bidder submits a Notice of Intent to Protest on Tuesday, September 30, 2025, the Notice of Contract Award will be posted on the Procurement Site following completion of the Appeals process.

I. Provider Protest Appeal & Contract Enforcement Policy

Written protest of AAANF's Intent to Award Contract must follow the guidelines for Service Provider/Bid Dispute Appeals Procedures which can be located in the Reference Documents of the Procurement Site. <https://www.advantageaging.org/procurement>

When a disputed contract award that is the subject of an appeal may result in an interruption of service(s) to clients, the AAANF reserves the right to contract with one or more providers of choice on an emergency basis or extend existing contracts, on a provisional basis, to maintain services in place until such time when the appeal is resolved.

SECTION D: PROPOSAL EVALUATION

1. Description of Evaluation Criteria

Each proposal will be evaluated according to the standards contained in the **Proposal Evaluation**. Fatal Criteria are items that require the same response from all bidders. Non-fatal criteria are items that can be responded to differently by bidders.

Evaluation criteria will be based on the quality and/or completeness of the bidder's response and are rated on a point scale. All "Non-Fatal" evaluation criteria eligible portions of each bidder's proposal are summarized in whole on the bidder's RFP Rating Sheet. These portions are grouped into three (3) main items: 1) Program Module- Including scoring of the bidder's

submitted Statement of Need; 2) Contract Module-Including scoring of the bidder's submitted operational budget; and 3) Organizational Capability- Including scoring of the bidder's submitted proof of organizational readiness and capability. Within each Item are sections that are rated as follows:

1. Individual bidder responses assigned in each item's section will be rated as a section whole on a point scale of 0 to 4, with a 4.0 being the highest possible rating for any section.
2. An item score is determined by adding the individual section ratings and dividing by the total number of sections within the item. Therefore, item scores are an average of all section scores, with a 4.0 being the highest possible rating for any item.
3. A weighted value for the item is determined by multiplying the item score by a predetermined weight assigned to that item.
4. A rating for the proposal as a whole is determined by adding the weighted values for each item. Therefore, 4.0 is the highest possible Total Score for any bidder's RFP Rating Sheet/Proposal.

A MINIMUM RATING OF "TWO" IS REQUIRED UNDER THE TOTAL SCORE FOR A PROPOSAL TO BE CONSIDERED.

The evaluation criteria have been designed to give due consideration to agencies able to demonstrate:

- Collaboration and partnerships with the ADRC and other service entities
- Experience providing the service(s)
- Ability to meet minimum service standards and contract requirements as set forth by the DOEA and AAANF
- Ability to identify areas of need and strategies to address client outcomes
- Ability to properly track and account for the bidder's true cost of providing services
- Ability to accurately calculate and negotiate reimbursement unit rates using the AAANF Unit Cost Methodology Tool

2. Proposal Evaluation Tool

An RFP Review and Evaluation committee appointed by the AAANF will evaluate all written

proposals. Proposals scoring less than a minimum rating of **"Two"** will be eliminated from further consideration.

All bidders whose proposals have been reviewed and received a minimum score of **"Two"** or higher may be considered.

The Proposal Evaluation tool can be viewed on the RFP Procurement Site:

<https://www.advantageaging.org/procurement>

to be used by bidders as a checklist to ensure the proposal contains all required items.

Each member of the RFP Review and Evaluation Committee is required to complete a Conflict of Interest Questionnaire to ensure they have no conflict of interest, which could interfere in the selection of a contractor. If a committee member answers "yes" to any question on the Conflict of Interest Questionnaire, their participation in the selection team must be terminated and the person must be replaced by someone without a conflict.

The AAA Board of Directors has ultimate approval of provider awarded contracts based upon the recommendations of the RFP Review and Evaluation Committee.

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