



*Delaware Health  
And Social Services*

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**DIVISION OF MANAGEMENT SERVICES**

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PROCUREMENT

DATE: July 8, 2019

HSS-19-002

HOME & COMMUNITY BASED SERVICES  
FOR INDIVIDUALS WITH INTELLECTUAL & DEVELOPMENTAL DISABILITIES  
FOR  
THE DIVISION OF DEVELOPMENTAL DISABILITIES SERVICES

Date Due: July 30, 2019  
By 11:00 a.m Local Time

ADDENDUM # 2  
Questions and Answers

**PLEASE NOTE:**

THE ATTACHED SHEETS HEREBY BECOME A PART OF THE ABOVE  
MENTIONED RFP.

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Kimberly Jones  
Procurement Administrator

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Kami Giglio  
Social Service Chief Administrator

**Division of Developmental Disabilities Services – Home and Community Based Services for Individuals with Intellectual and Developmental Disabilities – HSS-19-002**

<b>Section Number:</b>	II, Scope of Services
<b>Paragraph Number:</b>	3
<b>Page Number:</b>	2
<b>Question:</b>	<b>Do current DDDS qualified service providers need to respond to this RFP in order to continue to provide services?</b>
<b>Answer:</b>	Yes. All current and newly qualified providers of DDDS Home and Community Based Services (HCBS) must submit a proposal to this RFP in order to contract with DDDS to provide those services.

<b>Section Number:</b>	Appendix A, Minimum Mandatory Submission Requirements
<b>Paragraph Number:</b>	Entire
<b>Page Number:</b>	42
<b>Question:</b>	<b>Do current DDDS qualified service providers need to submit all minimum mandatory submission requirements or just a copy of the signed and dated Qualified Provider letter issued by the DDDS Provider Authorization Committee?</b>
<b>Answer:</b>	All proposals to this RFP must contain all minimum mandatory submission requirements outlined in Appendix A, page 42 of this RFP to be evaluated and scored by the RFP Evaluation Committee. One of those requirements is the submission of the Qualified Provider letter issued by DDDS.

<b>Section Number:</b>	IV, C. RFP Evaluation Process
<b>Paragraph Number:</b>	2. Proposal Selection Criteria
<b>Page Number:</b>	14
<b>Question:</b>	<b>Regarding evaluation criteria. Please describe what the evaluation team will consider as proof of qualified provider status from DDDS? Please cite applicable sources that outline how proof of qualified DDDS provider status is obtained.</b>
<b>Answer:</b>	The Division of Developmental Disabilities Services (DDDS) seeks to provide a robust network of qualified providers to deliver Home and Community Based supports and services. DDDS accepts applications on an open and continuous basis as required by Medicaid regulations. Information on how to become authorized to provide HCBS services can be found at <a href="https://dhss.delaware.gov/dhss/ddds/cps.html">https://dhss.delaware.gov/dhss/ddds/cps.html</a> Once a service provider has completed the application process and has been determined by DDDS to meet the qualification standards for one or more services, the DDDS Provider Authorization Committee issues a signed and dated letter to the provider indicating which services the provider is qualified to provide. A copy of that signed and dated letter must be submitted in any proposal to this Open and Continuous RFP as “Proof of qualified provider status from DDDS.” Only services that a provider has been qualified to provide by the Provider Authorization Committee should be included in the Supplemental Questionnaire found in

**Division of Developmental Disabilities Services – Home and Community Based Services for Individuals with Intellectual and Developmental Disabilities – HSS-19-002**

	Appendix C, Part II, page 73 of this RFP. If the signed and dated letter a provider has previously received from DDDS does not indicate which services the provider has been qualified to provide, the provider must request an updated letter from DDDS. Replacement and/or updated copies of qualified provider letters can be obtained by contacting the Administrative Assistant to the Provider Authorization Committee at 302-744-9600.
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<b>Section Number:</b>	Appendix A - Minimum Mandatory Submission Requirements	
<b>Paragraph Number:</b>	1	
<b>Page Number:</b>	42	
<b>Question:</b>	<b>The first mandatory submission requirement is a “Transmittal Letter.” What will DDDS accept as a “Transmittal Letter?”</b>	
<b>Answer:</b>	<p><u>The Transmittal Letter must contain the following information:</u></p> <ul style="list-style-type: none"> <li>• A summary of the vendor’s interest in providing the required service. (Per page 1 of the RFP)</li> <li>• A statement and justification if there are any exceptions to the requirements of the RFP (Per pages 1-2 of the RFP)</li> <li>• Vendor must state that no activity will be executed in an off shore facility either by a subcontracted form or a foreign office or division of the vendor. The vendor must attest to the fact that no activity will take place outside of the United States. (Per page 24 of the RFP under “Vendor Activity”)</li> <li>• A copy of the provider’s Qualified Provider letter(s) from DDDS.             <ul style="list-style-type: none"> <li>○ Once a service provider has completed the DDDS provider qualification application process, the DDDS Provider Authorization Committee issues a signed and dated letter to the provider indicating which HCBS services the provider has been qualified to provide. A copy of that signed and dated letter must be submitted in any proposal to this Open and Continuous RFP as “Proof of qualified provider status from DDDS”/”Transmittal Letter.” Only services that a provider has been qualified to provide by the Provider Authorization Committee can be included the Supplemental Questionnaire in Appendix C, Part II, page 73 of this RFP. If the signed and dated letter from DDDS does not indicate which services the provider has been qualified to provide, the provider must request an updated letter from</li> </ul> </li> </ul>	

**Division of Developmental Disabilities Services – Home and Community Based Services for Individuals with Intellectual and Developmental Disabilities – HSS-19-002**

	<p>DDDS. Replacement and/or updated copies of qualified provider letters can be obtained by contacting the Administrative Assistant to the Provider Authorization Committee at 302-744-9600.</p>
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<b>Section Number:</b>	Appendix B-Home and Community Based Service Descriptions for Individuals with Intellectual and Developmental Disabilities	
<b>Paragraph Number:</b>	All Service Descriptions	
<b>Page Number:</b>	43-71	
<b>Question:</b>	<b>Several of the Service Descriptions in Appendix B do not provide details on qualifications. Please delineate the qualifications (i.e. education, certification, licensure, experience, etc.) of individuals providing each of the services listed.</b>	
<b>Answer:</b>	Licensure, certification, etc required for specific services are delineated for each applicable service in Appendix B on pages 43-71 of the RFP. All services may only be provided after qualified provider status is obtained through the DDDS Provider Authorization Committee. The Provider Authorization Committee will review and approve any required criteria for each service a potential provider applies to become qualified to provide. The DDDS Provider Authorization Committee process and the provider qualifications can be found at <a href="https://dhss.delaware.gov/dhss/ddds/cps.html">https://dhss.delaware.gov/dhss/ddds/cps.html</a>	

<b>Section Number:</b>	II. Scope of Services	
<b>Paragraph Number:</b>	3	
<b>Page Number:</b>	2-3	
<b>Question:</b>	<b>In reference to the statement, “DDDS needs to contract with Vendors of Home and Community Based Services listed...” For each program listed, please provide the number of qualified DDDS Vendors providing this service in the State. Is there a maximum number of Vendors allowed to provide service per each service category? If so, please indicate the maximum number of Vendors per category.</b>	
<b>Answer:</b>	The Division of Developmental Disabilities Services (DDDS) seeks to provide a robust network of qualified providers to deliver Home and Community Based supports and services. DDDS accepts applications on an open and continuous basis as required by Medicaid regulations. There is no maximum number of vendors allowed for any HCBS service category covered under this RFP. A list of current qualified service providers can be found at <a href="https://dhss.delaware.gov/dhss/ddds/cps.html">https://dhss.delaware.gov/dhss/ddds/cps.html</a>	

**Division of Developmental Disabilities Services – Home and Community Based Services for Individuals  
with Intellectual and Developmental Disabilities – HSS-19-002**

<b>Section Number:</b>	V. Contract Terms and Conditions	
<b>Paragraph Number:</b>	V. Contract Terms and Conditions	
<b>Page Number:</b>	15	
<b>Question:</b>	<b>In reference to, “This open and continuous RFP is in effect contingent upon DDDS’ authorization to operate a 1915(c) Home and Community Based Waiver and 1915(i) Home and Community Based State Plan Amendment for Pathways to Employment Services,” can any statistics be provided that show the number of past enrollees, or what is the number of current enrollees? What is the expected number of referrals?</b>	
<b>Answer:</b>	<p>While most of the funding for the services authorized by DDDS comes from a Medicaid authority, this RFP is not contingent on DDDS’s authority to operate those Medicaid authorities. This RFP is pursuant to State of Delaware procurement requirements. DDDS cannot guarantee referrals to any provider.</p> <p>Information regarding projected numbers of Lifespan waiver enrollees can be found in the 1915(c) waiver application located at <a href="https://dhss.delaware.gov/dhss/dmma/files/ddds_amended_lifespan_waiver.pdf">https://dhss.delaware.gov/dhss/dmma/files/ddds_amended_lifespan_waiver.pdf</a></p> <p>Information regarding projected numbers of Pathways to Employment enrollees can be found in 1915(i) State Plan Amendment renewal application located at <a href="https://dhss.delaware.gov/dhss/dmma/files/ddds_hcbs_1915_renewal_application.pdf">https://dhss.delaware.gov/dhss/dmma/files/ddds_hcbs_1915_renewal_application.pdf</a></p>	

<b>Section Number:</b>	III, Minimum Requirement	
<b>Paragraph Number:</b>	A	
<b>Page Number:</b>	3	
<b>Question:</b>	<b>Is there a narrative requested for the RFP proposal?</b>	
<b>Answer:</b>	No. All required documents for proposal submissions are outlined in Section III, page 3; Appendix A, page 42; and Addendum #1 to this RFP.	

<b>Section Number:</b>	Appendix A, Minimum Mandatory Submission Requirements	
<b>Paragraph Number:</b>	#9	
<b>Page Number:</b>	42	
<b>Question:</b>	<b>What is the OSD application? There is no Attachment #9 in the RFP.</b>	
<b>Answer:</b>	<p>The Office of Supplier Diversity questions and application referenced as Attachment #9 were inadvertently left off of the initial RFP posting. They have since been attached to the RFP as Addendum #1. The OSD <u>questions</u> are mandatory and must be completed and submitted with all other minimum proposal submission requirements listed in Appendix A, page 42. The OSD Application is NOT a required form. It is provided for informational purposes only for organizations that are interested in submitting an application to the Office of</p>	

**Division of Developmental Disabilities Services – Home and Community Based Services for Individuals with Intellectual and Developmental Disabilities – HSS-19-002**

	Supplier Diversity, and it does not influence the outcome of any award decision. Please see Addendum #1 of this RFP.
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<b>Section Number:</b>	Appendix C, Supplemental Questionnaire	
<b>Paragraph Number:</b>	entire	
<b>Page Number:</b>	72-74	
<b>Question:</b>	<b>Is there a fillable version of Appendix C, Supplemental Questionnaire?</b>	
<b>Answer:</b>	Yes. A fillable version of Appendix C has been attached to this RFP.	

<b>Section Number:</b>	Attachments #1-6	
<b>Paragraph Number:</b>	entire	
<b>Page Number:</b>	34-39	
<b>Question:</b>	<b>Are there fillable versions of Attachments #1-6?</b>	
<b>Answer:</b>	Yes. Fillable versions of Attachments #1-6 have been attached to this RFP.	

<b>Section Number:</b>	Attachment #1	
<b>Paragraph Number:</b>	entire	
<b>Page Number:</b>	34	
<b>Question:</b>	<b>Is Attachment #1 a required form that must be completed and submitted with a proposal to this RFP?</b>	
<b>Answer:</b>	No. Attachment #1 is not listed on Appendix A, page 42 as a Minimum Mandatory Submission Requirement. Attachment #1 is the No Proposal Reply Form, and is included to be completed by potential bidders that have received notification of the RFP but DO NOT WISH TO BID.	

<b>Section Number:</b>	Attachments #7-8	
<b>Paragraph Number:</b>	entire	
<b>Page Number:</b>	40-41	
<b>Question:</b>	<b>Are Attachments #7-8 required to be completed and/or used?</b>	
<b>Answer:</b>	No. Attachments #7-8 are not listed on Appendix A, page 42 as a Minimum Mandatory Submission Requirement. Attachments #7-8 are sample reports and included in the RFP for illustration purposes only.	

<b>Section Number:</b>	Attachment #5, Form for Business References	
<b>Paragraph Number:</b>	entire	
<b>Page Number:</b>	37	
<b>Question:</b>	<b>Can DDDS provide guidance on the types of acceptable business references?</b>	
<b>Answer:</b>	DDDS suggests listing business references that can appropriately attest to a provider's ability to provide HCB services. References from families of service recipients and/or individual service recipients are not preferred. Appropriate references should be able to offer information about the provider's qualifications, experience, reputation, attributes	

**Division of Developmental Disabilities Services – Home and Community Based Services for Individuals with Intellectual and Developmental Disabilities – HSS-19-002**

	and/or financial stability. Insurance agents/carriers, contractors, landlords, etc. may all be appropriate references.
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<b>Section Number:</b>	Appendix C, Supplemental Questionnaire	
<b>Paragraph Number:</b>	Part II	
<b>Page Number:</b>	73	
<b>Question:</b>	<b>If our company is interested in providing a service we have not been previously authorized for, should we check that service box?</b>	
<b>Answer:</b>	No. Providers should only check the boxes of services they are currently qualified to provide by the DDDS Provider Authorization Committee. Do not check any service for which you do not have a corresponding qualifying letter from DDDS that indicates you are qualified to provide that service. Providers who wish to be qualified to provide additional HCB services should refer to <a href="https://dhss.delaware.gov/dhss/ddds/cps.html">https://dhss.delaware.gov/dhss/ddds/cps.html</a>	

<b>Section Number:</b>	Appendix C, Supplemental Questionnaire	
<b>Paragraph Number:</b>	Part II	
<b>Page Number:</b>	73	
<b>Question:</b>	<b>For currently qualified providers of multiple HCBS Lifespan Waiver and/or Pathways to Employment SPA services, is a separate RFP proposal required for each individual service?</b>	
<b>Answer:</b>	No. For providers that are <u>currently</u> qualified to provide multiple services by the DDDS Provider Authorization Committee, one proposal that includes the minimum submission requirements for all services the vendor has been determined to provide is sufficient. Each service that a provider has been qualified to provide by the Provider Authorization Committee must be indicated in Appendix C, Part II, page 73 of this RFP and corresponding qualified provider letter(s) indicating each service must be included with the proposal. If the signed and dated letter(s) from DDDS do not indicate which services the provider has been qualified to provide, the provider should request an updated letter from DDDS. Replacement and/or updated copies of qualified provider letters can be obtained by contacting the Administrative Assistant to the Provider Authorization Committee at 302-744-9600.	

<b>Section Number:</b>	Appendix A, Minimum Mandatory Submission Requirements	
<b>Paragraph Number:</b>	12, Vendor proposal package formats	
<b>Page Number:</b>	42	
<b>Question:</b>	<b>The RFP states that the vendor must submit four (4) electronic copies of the vendor proposal on separate CD or DVD media disks. Can electronic copies of the vendor RFP proposal be submitted on a portable USB drive instead of CDs/DVDs?</b>	
<b>Answer:</b>	No, thumb drives and USB sticks <b><u>will not be</u></b> accepted. Per the instructions on page 6 of the RFP, proposals must be submitted	

**Division of Developmental Disabilities Services – Home and Community Based Services for Individuals  
with Intellectual and Developmental Disabilities – HSS-19-002**

	with four (4) paper copies and four (4) electronic copies on CDs and DVD media disks.
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<b>Section Number:</b>	IV, Professional Services RFP Administrative Information, sub-section B. RFP Submissions	
<b>Paragraph Number:</b>	11.a.	
<b>Page Number:</b>	9	
<b>Question:</b>	<b>Is there only one (1) primary vendor for all services or one (1) primary vendor per service?</b>	
<b>Answer:</b>	No. This paragraph and sub-paragraph apply to “Multi-Vendor Solutions (Joint Ventures)” and only apply if the RFP proposal is a multi-vendor solution. This is referring to a vendor who sub-contracts portions of the scope of work to other vendors. The “primary vendor” is the vendor that holds the contract and is responsible for performance under the contract, and therefore responsible for all sub-contractors quality of work. The Division of Developmental Disabilities Services (DDDS) seeks to provide a robust network of qualified providers to deliver Home and Community Based supports and services.	

<b>Section Number:</b>	I, Overview	
<b>Paragraph Number:</b>	Entire section	
<b>Page Number:</b>	1-2	
<b>Question:</b>	<b>This RFP is “open and continuous,” what is the timeline for submissions? Will someone be at the DMS Procurement Office to accept submissions that are not submitted on 7/30/19?</b>	
<b>Answer:</b>	The deadline for <b>initial</b> submissions to the RFP is listed on page 1, “Deadline for Receipt of Proposals: July 30, 2019 by 11:00 am local time.” Page 2, paragraph 3, outlines the deadline for <b>subsequent</b> proposal submissions. “Following this initial advertisement, proposals are due in the DMS Procurement Office by 11:00 am on the second Wednesday of each month.”  All properly sealed and marked proposals are to be sent to the State of Delaware and received no later than 11am on Tuesday July 30, 2019 or by 11:00 am on the second Wednesday of each month. Proposals may be delivered by Express Delivery (e.g. FedEx, UPS, etc.), US Mail, or hand delivered to:  Kimberly Jones Purchasing Services Administrator Department of Health and Social Services Procurement Branch Main Administration Building, Sullivan Street 2 <sup>nd</sup> Floor, Room #257 1901 N. Dupont Hwy Herman Holloway Campus New Castle, DE 19720	

**Division of Developmental Disabilities Services – Home and Community Based Services for Individuals with Intellectual and Developmental Disabilities – HSS-19-002**

	<p>The Procurement Office is open from 8:00 am to 4:30 pm on Monday through Friday.</p> <p>Proposals received after the specified date and time will be held at the DMS Procurement office for the next scheduled DDDS proposal evaluation review process.</p> <p>DDDS will review submissions to this RFP each month and issue contracts based on successful submissions.</p>
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<b>Section Number:</b>	
<b>Paragraph Number:</b>	
<b>Page Number:</b>	
<b>Text of Passage:</b>	
<b>Question:</b>	<b>How often does a provider have to submit proposals to this RFP to continue to contract each fiscal year with DDDS?</b>
<b>Answer:</b>	DDDS will award a one-year contract with four one-year extension opportunities (for a potential total of 5 years) with providers who have submitted successful proposals to this Open and Continuous RFP.

<b>Section Number:</b>	Appendix D, Rate List-Home and Community Based Services	
<b>Paragraph Number:</b>	Respite/Personal Care	
<b>Page Number:</b>	75	
<b>Question:</b>	<b>The personal care hourly rate published for “Home Health” is \$33.84 and “PASA” is \$25.40. Please clarify the difference.</b>	
<b>Answer:</b>	The personal care rates are different because the requirements for licensure are different for each personal care service. The licensure requirements are more stringent for a Home Health agency than a PASA agency. The reimbursement methodology for personal care computes a different rate for each provider type based on the type of license the provider holds issued by the Division of Health Care Quality.	

<b>Section Number:</b>	Appendix D, Rate List-Home and Community Based Services	
<b>Paragraph Number:</b>	Respite/Personal Care	
<b>Page Number:</b>	75	
<b>Question:</b>	<b>Is self-direction only available for respite care and personal care?</b>	
<b>Answer:</b>	Yes. At this time (7/1/19,) DDDS allows self-direction of respite and personal care.	

<b>Section Number:</b>	III, Required Information	
<b>Paragraph Number:</b>	A.1. Minimum Requirements	
<b>Page Number:</b>	3	
<b>Question:</b>	<b>Is an IRS 501c3 Determination Letter required?</b>	
<b>Answer:</b>	Providers must submit <u>either</u> a Delaware business license <u>or</u> an IRS 501c3 Determination Letter. Any licenses or certifications required in order to perform services for which the provider has been qualified by DDDS and wishes to continue to provide must be submitted in the RFP proposal.	

**Division of Developmental Disabilities Services – Home and Community Based Services for Individuals  
with Intellectual and Developmental Disabilities – HSS-19-002**

<b>Section Number:</b>	IV, Professional Services RFP Administrative Information	
<b>Paragraph Number:</b>	A.1. Public Notice	
<b>Page Number:</b>	4	
<b>Question:</b>	<b>Are providers required to post a public notice of intent to submit a proposal to the RFP?</b>	
<b>Answer:</b>	No. The State of Delaware has posted a public notice of this RFP in accordance with 29 Del. C. 6981.	