



Central Savannah River Area  
Regional Commission  
Area Agency on Aging  
FY2027 RFP  
Aging Services (Non-Nutrition)



THIS PACKAGE IS FOR THE CSRA REGIONAL COMMISSION'S FY2027 RFP FOR AGING SERVICES.

ALL RFP SUBMITTALS **MUST** BE COMPLETED ONLINE VIA THE APPLICATION PORTAL. THE PORTAL IS LINKED ON THE RC'S WEB PAGE UNDER THE RFPs/BIDs TAB.

THIS DOCUMENT WILL HELP YOU PREPARE TO COMPLETE THE ONLINE RFP. ONLY APPLICATIONS SUBMITTED THROUGH THE RFP PORTAL WILL BE ACCEPTED.



Central Savannah River Area  
Regional Commission  
Area Agency on Aging  
FY2027 RFP  
Aging Services - (non-nutrition)



## CSRA AAA FY2027 RFP for Aging Services (non-nutrition)

### Important Information

Thank you for your interest in the CSRA RC AAA's request for proposals for non-nutrition services. The deadline for applications is **January 7, 2026**. After completing this RFP, a copy of your submission will be sent to your email address.

In order for the CSRA RC to make a decision regarding your proposal, you must include all information requested. All completed proposals will be reviewed.

If you have any questions concerning this RFP or the application process, please submit them in writing to [rfps@csrarc.ga.gov](mailto:rfps@csrarc.ga.gov) no later than 5:00 pm on December 19, 2025.

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***Note: You can save and resume your submission over time if desired. When you click the "Save" button you'll be emailed a link that you can use to resume your application.***

### RFP Notice

**RFP Due Date: January 7, 2026 by 3:00 PM**  
**PM**

**Deadline for Questions: December 19, 2025 by 5:00**

The CSRA Regional Commission (CSRA RC), as the state-designated Area Agency on Aging for this region, is seeking proposals for non-nutrition-related Area Agency on Aging programs, to include

- adult day care
- emergency response system service,
- health promotion and disease prevention
- home and community-based services (HCBS) case management
- homemaker services
- kinship care
- elderly legal assistance program
- material aid,
- personal care
- powerful tools for caregivers
- respite care
- senior center activities (recreation)

Responders must apply by the due date in the manner described. The RFP can be accessed on or after November 6, 2025, at the CSRA RC's website at <https://csrarc.ga.gov/current-bid-opportunities>

A mandatory bidder's conference will be held at via Zoom on Tuesday, December 2, 2025 at 10:00 AM. There will not be an in-person meeting. Anyone submitting a response must attend the bidder's conference.

CSRARC AAA FY2027 RFP Bidder's Conference

<https://zoom.us/j/99284014235?pwd=1BbTVbv3J7Ect80lPncEwb0RkeqWYz.1>

Meeting ID: 992 8401 4235 Passcode: 434050

Phone Access: +13052241968,,99284014235#,,, \*434050# US

CSRA RC will receive responses until 3:00 PM on January 7, 2026. No responses will be accepted after this time.

Questions about the RFP must be directed in writing no later than 5:00 pm on December 19, 2025 to: [rfps@csrarc.ga.gov](mailto:rfps@csrarc.ga.gov) Answers will be in writing and provided to persons who request to be included. To request a copy of answers, please send your agency name, contact email to [rfps@csrarc.ga.gov](mailto:rfps@csrarc.ga.gov) by the due date for questions.

In making its award determination, the CSRA RC will take into account a variety of factors, including but not limited to the following: cost of the proposal, potential ability of the applicant to successfully perform under the contract's terms and conditions, analysis of the applicable Unit Cost Methodology or other cost analysis, relevant past project experience and qualifications, organizational capacity to perform the required services, budget and financial capacity of the applicant, quality and thoroughness of responses to the scope of work and quality assurance sections in the proposal. Each of these factors will be considered to ensure that the selected proposal(s) are best suited to meet the needs of the project and comply with the expectations set forth in the RFP.

CSRA RC reserves the right, in its sole discretion, to: 1) cancel the RFP at any time, 2) amend the RFP before the due date, 3) alter the timetables for procurement; 4) request additional information from any Responder, 5) interview any Responder before issuing a grant award, 6) reject any or all Responses, and/or 7) waive any technicalities or formalities.

Any contracts and any subsequent periodic payments during the grant period is contingent upon receipt of local, state and federal funds.

# **RFP Overview**

## **Overview**

### **2.1 Introduction**

The Georgia Department of Human Services, Division of Aging Services (DAS) has designated the CSRA RC as the Area Agency on Aging (AAA) for the fourteen-county region. As such, the CSRA RC receives funds through the Older Americans Act (Title III B, C1, C2, D & E and Title VII) and other fund sources to ensure that a comprehensive and coordinated service delivery system for older persons and their caregivers is available.

The Area Agency on Aging (AAA) oversees the provision and coordination of programs for older adults in the Central Savannah River Area, located in east central Georgia and headquartered in Augusta, Georgia. The goal of the AAA is to assure maximum independence and to enhance the quality of life for older persons through home and community based services.

The CSRA Area Agency on Aging oversees the provision of a variety of services and support to improve the lives of senior citizens in all 14 counties of the CSRA. The AAA's primary activities are:

- identifying and planning for aging-service needs throughout the region,
- connecting senior citizens and caregivers with needed aging services and information,
- providing staff support and leadership to outside agencies that address aging issues, and
- administering grants and contracts to quality organizations that provide services to older CSRA residents.

The CSRA Area Agency on Aging develops an Area Plan for aging services and programs which describes this service delivery system in detail and the impact the Plan has on older residents in the planning and service area. The Area Plan is implemented through contracts, subgrant agreements, and cooperative agreements negotiated with various providers and local jurisdictions to implement services for the benefit of older residents and their families/caregivers in the Central Savannah River Area. The Area Plan planning period should not be confused with the period of contracts, subgrant agreements, or cooperative agreements awarded under this RFP.

### **2.2 Purpose**

Through this Request for Proposal (RFP), the CSRA Regional Commission, in its capacity as the Area Agency on Aging, is soliciting responses from applicants interested in operating certain aging programs in each of the following counties: Burke, Columbia, Glascock, Hancock, Jefferson, Jenkins, Lincoln, McDuffie, Richmond, Screven, Taliaferro, Warren, Washington, and Wilkes for the CSRA Area Agency on Aging for the period outlined within the "Period of Award" section of this RFP. Except for the Elderly Legal Assistance Program, Responders may limit their request to serve a particular geographical area.

### **2.3 Services to be Funded**

Multi-Funded/OAA funding: Services available through single county, or multiple counties within the region:

- Adult Day Care
- Assistive Technology
- Caregiver Services

- Case Management – could include Kinship Case Management and Caregiver Case Management
- Consumer Directed Care (Support Options)
- Culturally Appropriate Information and Referral
- Elderly Legal Assistance Program (ELAP) – must be provided regionally
- Emergency Response Systems
- Health Promotion and Disease Prevention
- Home and Community-Based Services (HCBS) Case Management
- Home Modifications and Repairs
- Homemaker Services
- Kinship Care
  - Community and Public Education
  - Material Aid
  - Support Group
- Material Aid
- Personal Care
- Powerful Tools for Caregivers
- Respite Care
- Senior Recreation

## **2.4 Program Goals**

The CSRA Area Agency on Aging oversees the provision of a variety of services and support to improve the lives of senior citizens in all 14 counties of the CSRA. The Area Agency on Aging's primary activities include:

- identifying and planning for aging-service needs throughout the region,
- connecting senior citizens and caregivers with needed aging services and information, providing staff support and leadership to outside agencies that address aging issues, and
- administering grants and contracts to quality organizations that provide services to older CSRA residents.

## **2.5 Program Funding**

The amount of the grant awards under this RFP are contingent upon receipt of funds from Georgia Department of Human Services, consisting of Federal Older Americans Act, other Federal, and State funds (i.e. multi-funded grant). Funding amounts are subject to change based on the actual Federal and State allocations received by the CSRA RC and may impact contracts during the course of the implementation period.

# **Award Terms**

## **3.1 Period of Award**

This RFP covers a one-year period beginning on July 1, 2026, and ending on June 30, 2027, with an option to renew (at the sole discretion of the CSRA RC) for one additional year intervals through June 30, 2030. All contracts resulting from this process are contingent on the availability of funds from the Georgia Department of Human Services (DHS) Division of Aging Services. The terms and conditions of the contract with DHS and any subsequent policy decisions, laws or regulations shall be applied to the awardees chosen through this process. The CSRA Regional Commission may terminate the contract due to non-availability of funds, due to default, or for convenience.

## **3.2 Expectations of Awarded Applicants**

If awarded, awardees will be expected to:

- Attend CSRA RC meetings and trainings designed for the Aging Services Provider Network.
- Fully cooperate with the CSRA RC's onsite and/or virtual financial and program monitoring.
- Conduct annual independent monitoring of all subcontractors.
- Meet all required fiscal and programmatic deadlines.
- Comply with Federal and State fingerprint and background check guidelines.
- Use the system of record as identified by CSRA RC for recording of all services and invoicing.
- Expend all awarded funds for awarded services and by the contract deadline
- Comply with all relevant Federal and State requirements.
- Follow subcontractor procurement requirements as outlined in the CSRA RC issued contracts.

## **3.4. Renewal Considerations**

Grants will be awarded on a fiscal year basis (July 1st to June 30th) with any potential renewal based on satisfactory performance and availability of funds. Budgets, units provided, and unit costs will be reviewed annually and adjustments to contracts will be made based on actual expenditures, units delivered, number of persons served, and allocations received through the Georgia Department of Human Services (DHS) Division of Aging Services. During this process, one-year budgets for each service the Applicant is proposing will be reviewed in accordance with directives provided by DHS.

## **3.5. Funding Variance**

If funding to the CSRA RC AAA is reduced and reduction of Contractor award levels is deemed necessary, CSRA RC will determine a reduction strategy. CSRA RC may reduce funding to each Contractor on a straight percentage basis. Alternatively, CSRA RC may reduce or eliminate services CSRA RC deems to not be effectively delivered or for other reasons. CSRA RC reserves the right to establish additional strategies and/or new criteria for reductions during the term of the contract.

CSRA RC further reserves the right to amend contracts based on project service levels and/or other performance factors to assure there will be cost effective service provision.

## **3.6 Standards and Guidelines**

Detailed information concerning the laws, regulations, program standards and guidelines in the delivery of

Home and Community Based Services (non-Medicaid) is available at the following:

- Georgia: GA DHS/Division of Aging Services Policy and Manual Management System (PAMMS)

[HCBS Manual](#)

[Access to Services Manual](#)

### **3.7 RFP Submittal**

Responders must complete this Request for Proposal in its entirety to be considered. All RFP submissions must be made through the online RFP portal located at the CSRA AAA FY2027 RFP for Aging Services address (<https://www.cognitofrms.com/CSRA2/CSRAAAAFY2027RFPForAgingServices>) The contents of the proposal submitted by the successful applicant will become a part of any contract awarded.

### **3.8 Inclusion in Area Plan**

Selected Responders will become a part of the service delivery system detailed in CSRA RC's FY 2026-2030 Area Plan on Aging (a planning document for the CSRA). Inclusion in the Area Plan does not guarantee or imply any grant award for subsequent years. This RFP only covers the period outlined in the "Period of Performance and Contract Terms" section of this RFP.

## **Evaluation of Proposals**

### **Submission Requirements**

It is essential that each Responder addresses every requirement outlined in this Request for Proposals (RFP) and includes all information requested. Should a response be materially incomplete, the CSRA RC, at its sole discretion, may determine the submission to be technically unresponsive, resulting in its elimination from further consideration.

### **Review Committee Process**

For procurements anticipated to result in an award or contract exceeding \$50,000 in aggregate, the CSRA RC may, at its sole discretion, assemble a review committee to objectively assess each response. This committee may consist entirely of CSRA RC staff members or include only those individuals.

### **Responder Acknowledgment**

Responders explicitly acknowledge that a compilation of each Responder's average score (calculated by averaging the scores assigned by each reviewer) may be made available only at the conclusion of the RFP award process.

### **Evaluation Criteria**

In determining the award, the CSRA RC will consider various factors, which include but are not limited to the following:

- Cost of the proposal
- Potential ability of the applicant to successfully perform under the contract's terms and conditions
- Analysis of the applicable Unit Cost Methodology or other cost analysis
- Relevant past project experience and qualifications
- Organizational capacity to perform the required services
- Budget and financial capacity of the applicant
- Quality and thoroughness of responses to the scope of work and quality assurance sections in the proposal

Each of these factors will be taken into consideration to ensure the selected proposal or proposals are best suited to meet the needs of the project and fully comply with the expectations established in the RFP.

### **Final Award Decision**

Following the review, the committee's recommendations will be submitted to the CSRA RC's management for consideration. The CSRA RC Council will make the final decision regarding the award of responses, taking into account the management's recommendations and the criteria for responsiveness. The CSRA RC Board reserves the right to make a final decision that may differ from the review committee's recommendations.



## **Appeal and Arbitration Procedures**

### **Appeal Process for Non-Selected Responses**

Responders who are not chosen for a competitively solicited contract or agreement by the CSRA Regional Commission have the right to appeal the decision. To initiate an appeal, the Responder must submit a written appeal to the Executive Director within ten (10) calendar days of receiving notification of non-selection. The appeal must be sent via certified mail, with a return receipt requested, to the following address:

Attn: Appeal of Procurement Award  
CSRA Regional Commission  
3626 Walton Way Ext., Suite 1  
Augusta, GA 30909

### **Appeal Hearings for Awards Under \$125,000**

For procurements where the awarded amount is less than \$125,000, the Executive Director will schedule a hearing within ten (10) business days. During this hearing, the Responder may present relevant information regarding the procurement decision. After considering the information presented, the Executive Director will render a decision and communicate it to the Responder within ten (10) business days following the hearing.

### **Appeal Hearings for Awards of \$125,000 or More**

For procurements with awards equal to or greater than \$125,000, the appeal will be heard by the CSRA Regional Commission's Council at its next regularly scheduled meeting. The Responder may present arguments in support of the appeal, while the Executive Director and/or his designee may provide counterarguments. The Council will review all information presented and issue a decision within ten (10) business days after the hearing. The decision made by the CSRA Regional Commission's Council is considered final and binding.

## **Arbitration of Procurement Disputes**

Should a dispute arise regarding the procurement process after the issuance of an appeal decision by either the Executive Director or the Regional Commission's Council, the matter will be referred to arbitration. Arbitrators will be selected in accordance with the rules of the American Arbitration Association, and the arbitration will proceed under the guidelines established by the CSRA Regional Commission. The resulting judgment from the arbitrators may be entered in any court of competent jurisdiction. The costs associated with the arbitration process will be equally shared by the party requesting arbitration and the CSRA Regional Commission.

## **Post-Arbitration Actions**

Once the arbitrator has rendered his judgment, the decision will be presented to the CSRA Regional Commission's Council at its next regularly scheduled meeting. The Council will then consider the judgment and determine any further actions, if necessary.

## Applicant Info

Company Name

Authorized Representative

Title

Email

Phone

Address

Contact Person

Contact Person Title

Contact Person Email

Contact Phone Number

## Services

What services are you requesting to provide?

Adult Day Care  
Assistive Technology  
Caregiver Services  
Elderly Legal Assistance Program  
Emergency Response Systems  
Health Promotion and Disease Prevention  
Home & Community-Based Services Case Management  
Home Modifications  
Homemaker Services  
Kinship Care  
Material Aid  
Personal Care  
Powerful Tools for Caregivers  
Respite Care  
Senior Center Activities

### Important Information Regarding Aging Services

Please note that the applicant must review the scope of work and eligible activities associated with each service. A basic taxonomy is included in the Scope of Work section for the services you select.

Detailed information about aging related services in Georgia can be found under the [Division of Aging Services](#) section of the [DHS Policy and Manual Management System \(PAMMS\) system online](#).

## Service Area

What counties will you serve?

# Organization Details

## Organizational Information

Is the applicant a local government?

No

Is your agency properly registered to do business in the State of Georgia? Georgia Corporation License

Yes

Describe your company's ownership and corporate structure.

Please provide a link to your agency's website (if applicable)

Is there any present or pending litigation in connection with aging-related contracts for services involving the agency or any principal officers?

Yes

Please explain present or pending litigation.

## Previous History

Have you or your organization been contracted by the CSRA Regional Commission for aging-related services before? (if yes, explain)

Yes

### Previous Work with CSRA RC

Does your agency have any experience managing government contracts?

Yes

Describe your organization's experience managing government contracts.

Have you or your organization defaulted on a contract or failed to complete any work awarded, or been involved in work related to litigation (if yes, explain).

Yes

Explain

### Experience with Similar Programs

### Funding Sources

### Qualifications and Capabilities

# **Organizational Capacity**

## **History of Performance**

**Do you intend to collaborate with any outside agency or organization in the implementation of this grant? If so, please describe.**

**What outreach, in addition to an agency website or social media, will you conduct to ensure that those most in need of this service are made aware of it?**

**Has your agency used the Wellsky DAS Data System within the past three (3) years?**

Yes

## **Staff Training**

## **Operating Hours**

## **Emergency Operations**

## **Organizational Chart**

## Scope of Work

The following questions are directly related specific services you indicate that you plan to provide.

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Additional information and guidance related to aging-related services is available from the Georgia Department of Human Services' Division of Aging Services (DOAS) as noted below.

### Division of Aging Services Policies and Manuals

The current Division of Aging Services (DAS) policies and manuals are accessible online at:

[Division of Aging Services Policies and Manuals: Policy and Manual Management System \(PAMMS\)](#)

### Taxonomy of Services

The Georgia Division of Aging Services (DAS) maintains a Taxonomy of Services, which specifies allowable services the Aging Network provides as funded through DAS allocation of state and federal funds. The most recent taxonomy of services can be found online at:

[Division of Aging Services Taxonomy of Services](#)

*Note: specific information related to each service is included below in the application and will appear based on your selection of proposed services.*

## Aging Service Questions

### Adult Day Care

#### Adult Day Care

Personal assistance for dependent elders in a supervised, protective, and congregate setting during some portion of a day. Services offered in conjunction with adult day care typically include social and recreational activities, training, and counseling.

#### Adult Day Care - Mobile

Personal assistance for dependent elders in a supervised, protective, and congregate setting during some portion of a day. Services offered in conjunction with adult day care typically include social and recreational activities, training, and counseling. Mobile Adult Day Care are services provided by staff who travel from a central location to an off-site location(s), primarily, but not limited to, rural areas.

#### Adult Day Health

Personal assistance for dependent elders in a supervised, protective, and congregate setting during some portion of a day. Services offered in conjunction with adult day health typically include social and recreational activities, training, and counseling, and services such as rehabilitation, medications assistance and home health aide services for adult day health. Adult Day Health programs must have an RN or LPN present at all time.

**What specific services will be provided?**

**What is the daily structure and what types of activities are typically offered?**

**What assistance is provided for daily living tasks, such as eating, toileting, and transfers?**

**What are the qualifications and training of the staff and volunteers?**

**What is the participant-to-staff ratio?**

**What are the days and hours of operation?**

## **Assistive Technology**

Assistive Technology includes any item, piece of equipment, or product system, whether acquired commercially, modified, or customized, that is used to increase, maintain, improve functional capabilities, or reduce social isolation and feelings of loneliness. Items can range from low tech to high tech and include eyeglasses, dental care, and hearing aids.

Services under AT involve selecting, designing, fitting, customizing, adapting, applying, maintaining, or donating (device reutilization program) assistive technology devices. This includes:

- trial use and short-term loans of assistive technology.
- “Try before you buy” (device loan program)
- Coordinating and using necessary therapies, interventions, or services with assistive technology devices, such as therapies (occupational therapy, physical therapy, and nurses, etc.), interventions, or services associated with education and rehabilitation plans and programs.

See below for a nonexclusive list of the types of assistive technology that are allowable:

| <b>Low Tech examples that don't require much training or have complex or mechanical features</b> | <b>Mildly Complex examples that might have some complex features, may be electronic or battery operated and may require some training to use properly</b> | <b>High Tech examples which are the most complex devices that have digital or electronic components that likely require training and effort to learn to use</b> |
|--------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Handheld magnifiers                                                                              | Talking spell checkers                                                                                                                                    | Digital hearing aids                                                                                                                                            |
| Large print text                                                                                 | Manual wheelchairs                                                                                                                                        | Power wheelchairs                                                                                                                                               |
| Canes and walker                                                                                 | Amplifiers                                                                                                                                                | Computers with specialized software such as voice recognition                                                                                                   |
| Reachers, grabbers                                                                               | Alternate mouse or keyboard for computer                                                                                                                  | Voice activated phones                                                                                                                                          |
| Specialized pen or pencil grips                                                                  | Closed caption televisions CCTV                                                                                                                           | Communication devices with voices                                                                                                                               |
| Weighted silverware or plates                                                                    | Portable wheelchair ramps                                                                                                                                 |                                                                                                                                                                 |

| Low Tech examples that don't require much training or have complex or mechanical features | Mildly Complex examples that might have some complex features, may be electronic or battery operated and may require some training to use properly | High Tech examples which are the most complex devices that have digital or electronic components that likely require training and effort to learn to use |
|-------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------|
| • Handheld magnifiers                                                                     | • Talking spell checkers                                                                                                                           | • Digital hearing aids                                                                                                                                   |
| • Large print text                                                                        | • Manual wheelchairs                                                                                                                               | • Power wheelchairs                                                                                                                                      |
| • Canes and walker                                                                        | • amplifiers                                                                                                                                       | • computers with specialized software such as voice recognition                                                                                          |
| • Reachers, grabbers                                                                      | • Alternate mouse or keyboard for computer                                                                                                         | • Voice activated phones                                                                                                                                 |
| • Specialized pen or pencil grips                                                         | • Closed caption televisions CCTV                                                                                                                  | • Communication devices with voices                                                                                                                      |
| • Weighted silverware or plates                                                           | • Portable wheelchair ramps                                                                                                                        |                                                                                                                                                          |

**What specific assistive technologies and products will be offered?**

**How will the program operate?**

**Explain how you would conduct outreach to ensure you reach those most in need of assistive**

**What is your experience in delivering this service? List any organizations you have or currently**

## Caregiver Services

Caregiver Services are services that offer temporary, substitute supports or living arrangements for care recipients to provide a brief period of relief or rest for caregivers.

Title III E Family Caregiver Support Funding is caregiver-specific funding and requires the caregiver to be the client. Individuals qualify for caregiver funding if they meet any one of the following criteria:

- Adult family members or other informal caregivers aged 18 and older providing care to individuals 60 years of age and older
- Adult family members or other informal caregivers aged 18 and older providing care to individuals of any age with Alzheimer's disease and related disorders
- Older relatives (not parents) aged 55 and older providing care to children under the age of 18; and
- Older relatives, including parents, aged 55 and older providing care to adults ages 18-59 with disabilities.

In providing caregiver services under Title III-E, priority should be given to family caregivers who provide care for individuals with Alzheimer's disease and related disorders with neurological and organic brain dysfunction. (Per PAMMS MAN5300, CH 316.5)

Caregiver Services can include support groups, material aid, home delivered meals, Powerful Tools for Caregivers and in-home or out-of-home respite (in home respite can include homemaker, personal care or any other in-home respite). Any in-home respite providers must be a licensed private home

care provider and out-of-home respite provided by an adult day center, personal care home or assisted living facility must be licensed by DCH. In light of upcoming state policy changes, CSRA RC may require client choice in the selection of home care providers. All clients will be given the ability to choose between all approved home care providers at all times to ensure client satisfaction. PAMMS MAN5300, CH316

**What specific services do you propose to offer?**

**Describe your plan for assessing the needs of each caregiver and care recipient and developing a personalized care plan.**

**How will you communicate with clients, their families, and relevant stakeholders, especially regarding changes in the care plan?**

**What has been your experience in providing this service?**

**Explain your process for handling emergencies, including after-hours and weekend availability.**

## **Elderly Legal Assistance Program**

The Elderly Legal Assistance Program (ELAP) purpose is to assist individuals in understanding their rights exercising choice, benefitting from services, opportunities, and entitlements, and maintaining rights promised and protected by law. ELAP provides access to the system of justice offering advocacy, advice, and representation to persons 60 and older. The Older Americans Act (OAA) OF 1965 as amended, designates Legal Assistance as a priority service funded under Section Title IIIB. As such, funding of legal assistance by each Area Agency on Aging is mandatory, and services shall be accessible and available throughout the region.

The Applicant must be capable of providing education and guidance on these priorities in addition to those set in the 2008 revision of the Georgia Elderly Legal Assistance Program Standards. Current ELAP policy can be found in PAMMS MAN 5200, CH 2000.

**What specific services do you propose to offer?**

**Describe your experience in the provision of legal assistance to Older Georgians in a defined service area.**

**Address use of attorneys without GA licenses and supervision of those attorneys, if applicable.**

**Describe how staff (or subcontractor) will be supervised and monitored to ensure quality and appropriateness.**

**Describe service delivery including intake process, case acceptance procedures, information related to scheduling, duration, and frequency of services.**



**Identify how client requests are prioritized in accordance with targeted population, greatest economic or social need, and limited English-speaking proficiency and mandated priority areas.**

**Describe capacity and plan for effective outreach and assistance to institutionalized, isolated and homebound individuals to make them aware of services.**

**Describe capacity and plan to reach limited English-speaking populations.**

**Describe your plans related to informing elders of their legal rights in community education forums such as speeches, presentations, radio, or TV shows.**

**Describe case referral process to pro bono or reduced fee assistance programs and follow up process.**

## **Emergency Response Systems**

Installation of an in-home electronic support system which provides two-way communication to geographically and socially isolated individuals, enabling them to remain in their own homes. The electronic system provides 24-hour-a-day access to the medical control center daily.

**Describe the services you propose to offer.**

**What are the features of the personal emergency response devices, such as waterproof wearability, fall detection, and GPS tracking?**

**Describe the types of emergency alerts the system can trigger (e.g., button press, fall detection, inactivity) and how the system verifies them.**

**Do you offer a companion app for family members or caregivers to receive notifications, track location, or check in? If yes, describe how it works.**

**How is the system designed for simplicity, and is the help button large and visible for someone with declining vision or dexterity?**

**What are the standard contract terms, including length and cancellation policy for recipients under this program?**

**Will contracts with recipients under this program end when program funding ends?**

Yes

# Health Promotion and Disease Management

## Health Promotion and Disease Prevention

The provision of activities promoting wellness, nutrition, and physical activity, disease prevention and risk management, healthy lifestyle and safety in a group setting.

Staff activities will include:

- Disease Management
- Medications Management
- Physical Activity
- Health Promotion
- Health Indicators, Outcomes, Evaluation
- Health Literacy
- Preventative Action
- Self-Care/Self-Management

## Evidence Based Services

Bingocize

Chronic Disease Self-Management Program

Chronic Disease Self-Management Education

Fall Prevention - Matter of Balance

Fall Prevention - Tai Chi

Geri-Fit Program

Health Coaches for Hypertension Control

## Bingocize

Bingocize ® is an evidence-based health promotion program that strategically combines the game of bingo, health education, and/or exercise. Trained leaders may select between separate 10-week workshops that focus on exercise-only, exercise and falls prevention, or exercise and nutrition. Each workshop includes a facilitator's script for each session, participants' materials, and "take home" cards for participants to complete exercises and tasks at home to reinforce the weekly health education information. Participants play Bingocize ® twice per week, with each 45-60-minute session consisting of exercises (range of motion, balance, muscle strengthening, and endurance exercises) and/or health education questions. Workshops can be delivered using a traditional in-person bingo game, along with printed curriculum facilitator and participants' materials. However, facilitators and participants are recommended to use a stand-alone online version, Bingocize ® Online, to play Bingocize ® in-person or remotely. This adds a fun, interactive technology component to the original game.

One workshop equals 10-weeks with two 45 - 60 minute sessions/classes per week for a total of 20 sessions/classes.

A completer is one participant who attends 16 of the 20 sessions/classes.

One completer is required for reimbursement for the workshop.

## Chronic Disease Self-Management

### Chronic Disease Self-Management Education (CDSME)

## **Chronic Disease Self-Management Program (CDSMP)**

A Stanford University (SMRC) evidence-based, train the trainer program held for two and a half hours, once a week, for six consecutive weeks. Workshops and Lay Leader Trainings are facilitated by either non-health care professionals or health care professionals able to adhere to the fidelity of the program, and giving preference to individuals with chronic conditions themselves.

The objective is to empower workshop participants to problem solve, and set weekly goals to improve skills needed to manage symptoms experienced by participants with chronic conditions as well as caregivers of persons with chronic conditions.

Curriculum includes: medications management, developing goals around establishing/enhancing exercise programs, healthier nutrition habits, and other personal weekly action items, learning better communication techniques, managing of pain and fatigue, working with healthcare professionals and the healthcare system, and much more.

### **Program Info:**

- One workshop equals 6 weeks of 2.5 hour sessions/classes once per week.
- A completer is one participant who attends 4 of the 6 sessions/classes.
- One completer is required for reimbursement for the workshop.

## **Fall Prevention - Matter of Balance**

Developed by researchers in Maine, this is an 8 week evidence based program designed to address the fear individuals have of falling. It combines education about falls prevention as well as an introduction to physical activities that can help improve balance and stability. A completer is a participant who attends at least five of the eight sessions.

### **Program Info:**

- One workshop equals to eight 2-hour sessions/classes, either once per week for eight weeks or twice a week for four weeks.
- A completer is one participant who attends 5 of the 8 sessions/classes.
- One completer is required for reimbursement for the workshop.

## **Fall Prevention - Tai Chi**

Developed by Dr. Paul Lam with tai chi and medical colleagues, the program utilizes Sun style Tai Chi for its ability to improve relaxation, balance, and its ease of use for older adults. The program incorporates classes along with home practice to help improve muscular strength, flexibility, balance, and stamina. The class format is in person or remote/virtual.

Note: It is permissible to use a combination of remote (i.e. videoconference) and in person implementation in the same session or during a class series. For example: 10 participants join by Zoom and 10 participants attend in a senior center and receive instruction at the same time. Two instructors for class size of 12-20, which incorporates zoom participants.

**Program Info:**

- One workshop equals to 8 weeks, two 1-hour sessions/classes per week.
- A completer is one participant who attends 11 out of 16 sessions.
- One completer is required for reimbursement for the workshop.

OR

- One workshop equals to 16 weeks, one 1-hour session/class per week.
- A completer is one participant who attends 11 out of 16 sessions.
- One completer is required for reimbursement for the workshop.

## **Geri-Fit**

Geri-Fit® is a 45-minute evidence-based health promotion program and chronic disease self-management support program. Designed exclusively for older adults, Geri-Fit helps rebuild strength that's been lost through the aging process. The progressive resistance strength training program uses bodybuilding techniques to increase strength. The program also incorporates range of motion exercises, stability and balance training, cardiovascular activity for heart health, and gait exercises to help improve walking. Geri-Fit helps ensure a higher level of function and improvement in activities of daily living as well as management of chronic diseases such as diabetes, heart disease, pain management, depression and more. There's no dancing, aerobics, or choreography to learn and participants never have to get on the floor. Most of the exercises are performed seated in chairs with a set of light dumbbell weights, however, participants have the option to do the exercises standing if they prefer. Each person is encouraged to work out at their own pace and fitness level.

**Program Info:**

- One workshop equals four weeks with two session/classes per week.
- A completer is one participant who attends 5 of 8 sessions/classes.
- One completer is required for reimbursement for the workshop.

OR

- One workshop equals twelve weeks with two sessions/classes per week.
- A completer is one participant who attends 16 of the 24 sessions/classes.
- One completer is required for reimbursement for the workshop.

## **Health Coaches for Hypertension Control**

Health Coaches for Hypertension Control consists of eight sessions delivered by Health Coaches using a scripted manual and visual aids. The 90-minute sessions include experiential learning strategies appropriate for those with health literacy challenges. Specific session topics include: Basics of Hypertension Control; Nutrition with emphasis on Dietary Approaches to Stop Hypertension (DASH); Physical Activity with emphasis on creating a personal physical activity plan; Tobacco Cessation; Stress Management; Medication Management; one session about developing short-term action plans and another on creating a long-term action plan. The Nutrition and Physical Activity sessions also include content on

weight control.

**Program Info:**

- One workshop equals eight 90-minute sessions/classes.
- A completer is one participant who attends 5 of the 8 sessions/classes.
- One completer is required for reimbursement for the workshop.

OR

- A workshop equals two 90-minute sessions/classes per week for four weeks.
- A completer is one participant who attends 5 of the 8 sessions/classes.
- One completer is required for reimbursement for the workshop.

**List and describe the specific evidence-based programs you propose to deliver.**

**Describe how the program operates.**

**Explain any proposed modifications or adaptations to an existing evidence-based program, and how fidelity to the core model will be maintained.**

**How will services be targeted to older adults in the greatest economic and social need?**

**Describe your organization's experience delivering services to older adults, specifically mentioning any relevant experience with evidence-based programs.**

**Detail the qualifications and training of all staff and volunteers who will be implementing the evidence-based programs.**

**Do you hold a valid license to use the proposed evidence-based program(s)?**

Yes

## **Home and Community-Based Services Case Management**

***NOTE: This RFP requests proposals for certain HCBS Case Management Services. A final determination regarding the outsourcing of these services will be made after careful consideration of qualified responses.***

### **Purpose**

Case management provides access for individuals to community resources or assists individuals in identifying and securing resources or services to enhance wellness and remain in the community for as long and as safely as possible.

Case management is a person-centric, collaborative process designed to meet an individual's complex social and health needs. Through ongoing monitoring and evaluation, case management promotes quality, cost-effective outcomes for the individual and the community.

Case management services must maintain the flexibility to respond to changing needs and preferences of individuals. Services should be designed to enhance the ability of case management to vary service delivery in response to changing individual needs and preferences.

Not every individual who requires long term care services needs or desires case management, and not every individual who can benefit from case management needs long-term care services. Moreover, not every individual who can benefit from case management needs it indefinitely or always requires intensive levels of case management service.

### **Core Principles**

Case management services are implemented according to the following Core Principles:

1. **Capacity based:** Older persons and persons with disabilities have the capacity for continued growth and autonomy and are the authority on their own needs, know what they need most to achieve well-being, and have abilities, competencies, and resources to help achieve their goals.
2. **Conflict-free:** Program staff remains neutral with no interest in the choices made by individuals nor in the types of services or providers selected by the individuals; and to the extent possible, avoids the appearance of conflicts regarding referrals on behalf of individuals.
3. **Culturally Competent:** Program staff understands and respects the culture of individuals and interacts with them in ways that are culturally and linguistically competent; and appreciates the ways cultural beliefs and values inform the individual's acceptance of Service Plan options.
4. **Individualized:** Services should focus on meeting the specific needs and preferences of each individual and/or family through joint development, implementation, and review of the Service Plan.
5. **Person-Centered:** Program staff approaches individuals and families with empathy and an understanding of their life experiences and challenges by searching for and acting upon what is important to that individual, including their wants, needs, and values.
6. **Professionally Responsible:** Program staff maintains the privacy, confidentiality, health, and safety of individuals by adhering to ethical and legal standards and to program guidelines.

### **Core Functions of Case Management**

An optimal case management program requires case management staff who have specialized skills and competencies to provide the following core functions:

- Assessment
- Service Plan Development
- Service Plan Coordination
- Advocacy
- Reassessment
- Discharge

### **Behavioral Health Coaching**

The process of assessment, service coordination, education, and coaching to support persons living with mental health and/or substance abuse issues to live as safely and independently as possible in a

congregate setting.

### **BRI Care Consultation**

An evidence-based information and coaching service delivered by telephone which empowers people to understand options, manage care, and make decisions more effectively. Participants must complete periodic contacts based on program guidelines

### **Case Management**

Short-term assistance on behalf of an older person or caregiver who is experiencing immediate risk to health and safety, is at high risk of institutional placement, or has complex needs across multiple domains of care. Activities of case management include such practices as comprehensive assessment, often across multiple domains; and developing and monitoring short-term care plans. Case Management can be provided to older adults, persons with disabilities, caregivers, or relative caregivers raising children.

### **Case Management Brokering**

The conflict-free assessment of a consumer (preferably face-to-face) to determine eligibility or appropriateness for services, the recommendation of service(s) and frequency, and the periodic rescreening of that consumer to determine ongoing eligibility or appropriateness for services.

### **Support Options Coordination**

Providing skills training and support to consumers in meeting their responsibilities as participants in the consumer-directed model of services, including training, coaching, and providing technical assistance to consumers to assist them in using their budgets correctly and avoiding overspending.

**Discuss your agency's experience providing case management services. Address any experience you have with aging-related case management services.**

**Describe how your agency provides HCBS case management services.**

**Describe your plan for ensuring that all clients and program staff will contribute to assessment and care planning activities.**

**Describe how your program staff will remain neutral with no interest in the choices made by individuals nor in the types of services or providers selected by the individuals; and to the extent possible, avoid the appearance of conflicts regarding referrals on behalf of individuals.**

**Discuss your approach to client assessment.**

**How are client service plans developed, maintained, and updated?**

**Discuss the reassessment process you use for clients.**

**Describe how your services focus on meeting the specific needs and preferences of each individual and/or family through joint development, implementation, and review of the Service Plan.**

**What kind of training and/or professional development opportunities are given to agency staff?**

**How many case managers do you expect to employ? What is their anticipated case load?**

**How do case managers interact with HCBS clients?**

## **HCBS Case Management Program Design**

**Describe the process and staff responsible for each of the following:**

**Program start-up or continuation (including staff recruitment and training)?**

**Enrolling clients in the program**

**Assessing client needs**

**Developing care/case management plans**

**Implementing care/case management plans**

**Ensuring appropriate services are provided pursuant to care/case management plans**

**Closing out cases**

## **Home Modifications**

Provision of housing improvement services designed to promote the safety and well-being of adults in their residences, to improve internal and external accessibility, to reduce the risk of injury, and to facilitate in general the ability of older individuals to remain at home.

For Kinship Care, could include, but not limited to, safety electrical plugs, child safety gates, window and drawer safety latches.

**Describe the services you propose to offer.**

**Describe your approach to managing home modification projects for older adults, including the**



process for assessment, scope development, bidding, and inspections.

Will you use subcontractors? If so, how are they selected? How will you oversee them?

Do you specialize in any particular aging-in-place modifications (e.g., universal design, Alzheimer's/dementia care)?

What is your process for conducting an in-home assessment to understand a client's specific needs and identify potential hazards?

How will you ensure the safety and privacy of residents while work is being performed?

How do you ensure all work meets local, state, and national building codes, including any accessibility standards (e.g., ADA)?

## **Homemaker Services**

Homemaker Services include assistance such as preparing meals, shopping for personal items, managing money, using the telephone, or doing light housework. This service must be provided by a private home care provider licensed by the Georgia Department of Community Health (DCH).

In light of upcoming state policy changes, the CSRA RC may require client choice in the selection of home care providers. All clients will be given the ability to choose between all approved home care providers at all times to ensure client satisfaction. This service can be provided via a voucher program. PAMMS MAN5300, CH208

Describe the services you propose to offer.

Explain your process for evaluating a client's needs and creating a customized care plan.

Given the national and local shortage of home care staff, how would you work through the challenges to assure that clients are provided ongoing services and/or add new clients to services?

What is the standard of promptness for ensuring that clients are started on service?

## **Kinship Care**

**Kinship Care**

**Core Services:** The core services will provide Information and Assistance Services, Counseling Services, and Community/Public Education Services. The successful applicant(s) will be required to offer the

following services as part of this contract agreement:

- **Counseling Services:** Counseling to individuals, support groups and caregiver training. Providing individual guidance and assistance with problem resolution by professionally qualified paid or volunteer staff to older people or grandparents raising grandchildren.
- **Case Management:** Provides assistance, access or care coordination as needed.

The CSRA Regional Commission Area Agency on Aging will offer information and referral services and technical assistance to support all kinship care projects in the region.

**Optional Program Services:** In addition to the minimum program services required, each applicant has the option of providing any of the services listed below.

1. **Kinship Care – Group:** Activities provided to support continued independence and well-being.
2. **Respite Care – Out of Home:** Services which offer temporary supports or living arrangements for care recipients to provide a brief period of relief or rest for caregivers. This includes summer camps, childcare or after school care. While these services are optional, the inclusion of any or all in the applicant's proposal will be weighed during the review process.

The successful Responder will work with the CSRA RC's AAA to ensure adequate service outreach and delivery within the service area(s) awarded.

**Describe the services you propose to offer.**

**How will the program operate?**

**Share how the service you want to provide helps grandparents gain skills or resources that will sustain them as they raise grandchildren.**

## Material Aid

The material aid program assists with the purchase of materials and/or supplies that support a person's ability to continue living in the community as independently as possible.

Materials may include:

- housing/shelter,
- transportation,
- utilities,
- food/meals,
- groceries,
- clothing,
- child safety items,
- incontinence supplies,
- school supplies, etc.

Payments to or on behalf of an older person for

- housing/shelter,
- utilities,
- food/meals or groceries,
- clothing,
- eyeglasses,
- dental care, etc....

**Describe the specific material aid and activities you will provide.**

**How will the program operate?**

**How will you identify and assess the needs of individual seniors? Will reassessments be conducted, and if so, how often?**

**Explain how your organization currently answers requests for material aid assistance.**

**What has been your experience in offering this service?**

**Describe your delivery process for getting materials to clients. Is delivery performed by your staff or a subcontractor?**

## **Personal Care**

Providing personal assistance, stand-by assistance, supervision, or cures for individuals having difficulties with basic activities of daily living such as bathing, grooming, dressing, and eating.

**What specific services will be offered?**

**How will the program operate?**

**How will services be delivered at the client level?**

**What is your policy for handling emergencies in the home?**

## **Powerful Tools for Caregivers**

Powerful Tools for Caregivers is an evidence based six week education program designed to provide family caregivers with tools necessary to increase their self care and confidence. The program improves

self-care behaviors, management of emotions, self-efficacy, and use of community resources.

- One workshop equals six weeks with one session/class per week.
- Completers are participants who attend 4 of 6 sessions/classes.
- One completer is required for reimbursement for the workshop.

**List and describe the specific programs you propose to deliver.**

**Describe how the program operates.**

**Explain any proposed modifications or adaptations to an existing program, and how fidelity to the core model will be maintained.**

**How will services be targeted to older adults in the greatest economic and social need?**

**Describe your organization's experience delivering services to older adults.**

**Detail the qualifications and training of all staff and volunteers who will implement the program.**

**Do you hold a valid license to use the proposed program(s)?**

No

**If you do not hold a valid license for the program(s) you plan to implement, discuss what steps you will take to secure the license before implementation.**

## **Respite Care**

### ***Caregiver Services:***

Services that offer temporary, substitute supports or living arrangements for care recipients in order to provide a brief period of relief or rest for caregivers.

Respite includes:

#### ***In-Home Respite:***

- personal care
- homemaker services

#### ***Out of Home:***

- respite provided by attendance of the care recipient at a senior center, adult day program, or other nonresidential program

- institutional respite provided by placing the care recipient in an institutional setting such as a nursing home for a short period of time as a respite service to the caregiver

***Kinship Care Respite Program:***

Services that offer temporary, substitute supports or living arrangements for children to provide a period of relief or rest for kinship caregivers.

Respite includes:

- attendance of the child or children at a summer camp
- other types of short-term childcare settings that provide respite for the kinship caregiver

**Describe the specific types of services offered (e.g., in-home, facility-based, short-term, 24/7).**

**Describe how the program operates.**

**Explain how the program will be accessible, including outreach strategies and client referrals.**

**Describe the types of social, physical, and intellectual activities that will be provided.**

**Detail emergency protocols, including how clients will be monitored and what plans are in place for emergencies or disasters.**

**Explain the process for selecting, training, and conducting background checks for all staff.**

## **Senior Center Activities**

### **Senior Center Activities**

The Georgia Department of Human Services' Division of Aging Services provides the following definition for Senior Center Recreation:

#### **Senior Recreation – Group:**

Individual clients documented. Activities that

- promote socialization and physical and mental enrichment
- clubs
- education sessions and programming for other leisure activities
  - sports
  - performing arts
  - games

- crafts
- travel
- volunteering
- community gardening
- environmental activities
- intergenerational activities

### **Senior Recreation Session Definition**

- One (1) session includes all activities included in the specified time period per day and only one session per day.

Example #1: On Monday during the Senior Recreation Session from 10 a.m. to 11 a.m., the Senior Center offered 3 Bingo games, 1 game of Billiards, and 15 minutes of exercises, this is 1 session. Not all attendees are required to participate in each activity offered within the session for the day.

Example #2: On Tuesday during the Senior Recreation Session from 10 a.m. to 11:30 a.m., the Senior Center offered 2 Bingo games, 20 minutes of putting puzzles together, 2 games of checkers, and 25 minutes of exercises, this is 1 session. Not all attendees are required to participate in each activity offered within the session for the day.

#### **Required Documentation for All Sessions and Explanation of Requirements:**

- The Senior Center staff would pass around a sign-in/attendance sheet for the one session. It does not matter which activities each client participates in during the session. The sign-in/attendance sheet will not break out the participants by each activity. It is completed for all clients participating in the one session for the day.
- The daily session sign-in/attendance sheets are required to be uploaded into the DDS along with any other monthly reimbursement documents in the Notes Chapter of the Provider Record.
- Reminders: A Senior Recreation session is a Group Service and is required to be entered into Consumer Groups in the DDS as required for EBPs. Enter the unduplicated count of the people participating in the one Senior Recreation session for the day. The name of the Senior Center along with each activity provided during the session is required to be listed in the comment box to include the destination of travel, if applicable. If a client participates in more than one activity provided during the session, the client is only counted one time for participating in the Senior Recreation session for that day.

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All proposals must clearly identify the services to be performed and outline how those services meet the criteria for Recreation.

The Area Agency on Aging prefers to utilize funding for these activities within the region's existing Senior Center locations to maximize participation by clients of those centers. Consideration will be given for projects that target eligible recipients who do not otherwise attend a local Senior Center. In responding, please indicate where the services you propose will be provided and the target population you plan on reaching.

Responders who will be providing services to a Senior Center(s) but do not otherwise operate the Center(s) must include written approval from the operator of the Center acknowledging that the Responder, if successful, will be authorized to provide the service at the local Center.

The successful Responder will work with the CSRA RC's AAA Director and staff to ensure adequate service outreach and delivery within the service area(s) awarded.

**What specific services do you plan to provide?**

**How do you determine what type of programming is wanted by the participants in the senior center?**

**How do you ensure that all center members are able to take part in all sessions if they choose to? This question seeks to clarify that there is no distinction between the offerings of activities for congregate meal clients and other center participants.**

**What is the plan for outreach and marketing to attract new participants?**

**What resources, such as equipment, tools, and personnel, are needed to deliver the proposed services?**

## **Marketing**

**Does your agency engage in marketing for your services?**

Yes

**Marketing Plans**

**Outreach**

**Special Populations**

**Marketing Materials**

## **Quality Assurance**

**Describe your agency's methods (i.e. process/frequency) to assure the delivery of quality services by staff.**

**What is your process for gathering and incorporating client feedback into program operations?**

**Describe how you will work with the Area Agency on Aging to resolve issues effectively related to service delivery and clients.**

## **Financial Capacity**

### **Applicant's Fiscal Year**

**Begin**

**End**

## **Agency Audit**

**Does your agency have an annual audit?**

Yes

**If yes, did you receive a management letter with the latest audit?**

Yes

**If you did receive a management letter, please describe any findings and your organization's action plan to address those findings.**

### **Most Recent Audit**

**Describe your financial management and reporting capabilities.**

**Do you have a history of receiving and managing grants or other funding? Please discuss.**

### **Other Funding Source**



## Financial Documents

Financial documentation that assists with evaluation of the applicant's current financial status is required.

Preferred documentation includes, in order of preference,

1. the most recent Annual Comprehensive Financial Report (ACFR);
2. financial statements (FS) that have been reviewed and/or audited by an independent public accountant (IPA) with accompanying notes;
3. financial statements compiled by an independent public accountant;
4. federal tax returns; or
5. last internally prepared financial statements signed by the owner or an individual familiar with finances of the entity if financial audit is not required.

## Subcontracting

**Do you plan to use subcontractors for this project? (if yes, explain)**

Yes

### Subcontracting Explanation

### Identify Any Planned Subcontractors

## Budget

The Uniform Cost Methodology (UCM) spreadsheet is used to develop the unit cost for aging related services. You may download the UCM from the RC's bid page on the website:

<https://csrarc.ga.gov/current-bid-opportunities>

Once the spreadsheet is complete, upload a copy using the upload option below. You can put the unit cost in the appropriate section in this application above.

### UCM Training

Training guidance for the Uniform Cost Methodology (UCM) spreadsheet is available online. Please refer to the online training guide for assistance in completing your UCM spreadsheet.

[UCM Training Manual](#)

### UCM Spreadsheet

**Unit Cost**

**Units To Be Served**

**Total Amount Requested**

## Supporting Documents

Upload any other supporting documents you think will assist us in evaluating your response.

Supporting Documents might include

- Agency governing documents (bylaws, charter)
- Mission Statement
- Resumes of key personnel
- Relevant certifications for key personnel

## Certifications

Please use the link below to complete and sign the required certifications. Once you have signed the certifications, use the box below to upload them.

***IF SOMEONE OTHER THAN YOURSELF IS THE AUTHORIZED SIGNER, PLEASE PUT THEIR INFORMATION INTO THE REQUEST FIELD SO THAT THE ASSURANCES CAN BE DIRECTED TO THE APPROPRIATE INDIVIDUAL.***

[Use this link to open DocuSign to obtain the forms listed below.](#)

You will be asked for the name of the individual authorized to sign the application and their email address. Once you have signed the documents and received a copy by email, upload the signed documents using the upload link below.

The following assurances must be signed and included with the response.

- Responder Certifications
- Appeals Process Acknowledgement
- General Financial Requirements and Assurances
- Contractual and Standard Program Assurances
- Assurance of Compliance with Title VI of the Civil Rights Act of 1964, As Amended
- Assurance of Compliance with Section 504 of the Rehabilitation Act of 1973, As Amended and the Americans' with Disabilities Act of 1990, As Amended
- Compliance with Clean Air and Water Acts
- Certification Regarding Debarment, Suspension, and Other Responsibility Matters
- Disclosure of Lobbying Activities
- Health Insurance Portability Protection Act (HIPPA) Business Associate Agreement
- Certification of Non-Collusion
- Conflict of Interest Disclosures
- E-Verify Certification
- Evaluation Criteria and Review Considerations

## Upload Docusign Certifications

## **Submittal**

### **Save Your Work**

The CSRA Regional Commission recommends that you use the "Save" button below to save your RFP prior to submittal. When you save, you can send a link to your proposal via email.

## **Review Before Submitting**

**I have reviewed the answers included in this application and uploaded the appropriate documents.**

Yes

**I hereby declare that the information provided above is true and accurate to the best of my knowledge. I understand that any false information may result in the termination of any agreement generated as a result of this RFP.**

Yes

**I affirm that any funds received from this proposal will be used for the identified purpose.**

Yes

**Signature**