

State of Hawaii
Department of Health
Family Health Services Division
Maternal & Child Health Branch
Women's Health Section – Family Planning Program

Request for Proposals

HTH-560-CW-002

Title X Family Planning Services

Issued: October 16, 2007

Date Due: January 18, 2008

Note: If this Request for Proposal (“RFP”) was downloaded from the State Procurement Office RFP Website, each applicant must provide contact information to the RFP contact person (of this RFP) to be notified of any RFP changes. For your convenience, an [RFP Interest form](#) may be downloaded to your computer, completed and e-mailed or mailed to the RFP contact person. The State shall not be responsible for any missing addenda, attachments or other information regarding the RFP if a proposal is submitted from an incomplete RFP.

October 16, 2007

REQUEST FOR PROPOSALS

TITLE X FAMILY PLANNING SERVICES RFP No. HTH-560-CW-002

The Department of Health, Family Health Services Division, Maternal and Child Health Branch, Women's Health Section, Family Planning Program, is requesting proposals from qualified applicants to provide subsidized family planning services for women and men (statewide) of reproductive age with priority given to those with incomes that fall at or below 250 percent of the Federal poverty level. The contract term will be from July 1, 2008 through June 30, 2010. Multiple contracts will be awarded under this request for proposals.

Proposals shall be mailed, postmarked by the United States Postal Service on or before January 18, 2008, and received no later than 10 days from the submittal deadline. Hand delivered proposals shall be received no later than 4:30 p.m., Hawaii Standard Time ("HST"), on January 18, 2008, at the drop-off sites designated on the Proposal Mail-in and Delivery Information Sheet. Proposals postmarked or hand delivered after the submittal deadline shall be considered late and rejected. There are no exceptions to this requirement.

The Family Planning Program will conduct an orientation on October 30, 2007 from 2:00 p.m. to 4:00 p.m. HST, via Video Conference Center at the following locations.

- Oahu: Keoni Ana Bldg., 1177 Alakea Street, Honolulu; Kakuhihewa Bldg., 601 Kamokila Blvd., Kapolei; Ko`olauloa Community Health and Wellness Center, 54-316 Kamehameha Hwy., Hauula
- Hawaii (Big Island): Hilo State Office, 75 Aupuni Street, Hilo; Kona Health Center, Kona; Hamakua Health Center, 45-549 Plumeria Street, Honokaa
- Molokai: Molokai State Building, Kaunakakai
- Kauai: Lihue State Office, 3040 Umi Street, Lihue
- Maui: Wailuku Judiciary Bldg., 54 High Street, Wailuku

All prospective applicants are encouraged to attend the orientation.

The deadline for submission of written questions is 4:30 p.m. HST on November 30, 2007. All written questions will receive a written response from the State on or about December 14, 2007 and will be posted on the website <http://www.hawaii.gov/rfps103f/>.

Inquiries regarding this RFP should be directed to the RFP contact person, Ms. LaGena Hayes at 741-A Sunset Avenue, Room 100, Honolulu, Hawaii 96816, telephone: (808) 733-9030, fax: (808) 733-8355, e-mail: lagena.hayes@fhsd.health.state.hi.us.

PROPOSAL MAIL-IN AND DELIVERY INFORMATION SHEET

ONE (1) ORIGINAL AND ONE (1) COPY OF THE PROPOSAL ARE REQUIRED.

ALL MAIL-INS SHALL BE POSTMARKED BY THE UNITED STATES POSTAL SERVICE ("USPS") NO LATER THAN **January 18, 2008** and received by the state purchasing agency no later than 10 days from the submittal deadline.

All Mail-ins

Department of Health
Maternal and Child Health Branch
Family Planning Program
741-A Sunset Avenue, Room 100
Honolulu, Hawaii 96816

RFP COORDINATOR

LaGena Hayes
For further info. or inquiries
Phone: 733-9030
Fax: 733-8355

ALL HAND DELIVERIES SHALL BE ACCEPTED AT THE FOLLOWING SITES UNTIL **4:30 P.M., Hawaii Standard Time ("HST"), January 18, 2008.** Deliveries by private mail services such as FEDEX shall be considered hand deliveries. Hand deliveries shall not be accepted if received after 4:30 p.m., January 18, 2008.

Drop-off Sites

Oahu:

Department of Health
Maternal Child Health Branch
741-A Sunset Avenue, Room 100
Honolulu, Hawaii
Attn: Family Planning Program

East Hawaii:

Department of Health
Keawe Health Center
46 Keawe Street
Hilo, Hawaii
Attn: Maylyn Tallett

Maui:

Department of Health
Maui District Health Office
54 High Street, Room 301
Wailuku, Hawaii
Attn: Family Health Services Section

West Hawaii:

Department of Health
Kealakekua Business Plaza
81-980 Haleki'i Street
Kealakekua, Hawaii
Attn: Jan Carman

Kauai:

Department of Health
Kauai District Health Office
Lihue Health Center
3040 Umi Street
Lihue, Kauai
Attn: Cash Lopez

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Section 1

Administrative Overview

Section 1

Administrative Overview

Applicants are encouraged to read each section of the Request for Proposal (“RFP”) thoroughly. While sections such as the administrative overview may appear similar among RFPs, state purchasing agencies may add additional information as applicable. It is the responsibility of the applicant to understand the requirements of *each* RFP.

I. Procurement Timetable

Note that the procurement timetable represents the State’s best estimated schedule. Contract start dates may be subject to the issuance of a notice to proceed.

| Activity | Scheduled Date |
|--|-----------------------------------|
| Public notice announcing RFP | Oct. 16, 2007 |
| Distribution of RFP | Oct. 16, 2007 to Jan. 18, 2008 |
| RFP orientation session | Oct. 30, 2007 |
| Closing date for submission of written questions for written responses | Nov. 30, 2007 |
| State purchasing agency's response to applicants’ written questions | Dec. 14, 2007 |
| Discussions with applicant prior to proposal submittal deadline (optional) | Oct. 16, 2007 to Jan. 18, 2008 |
| Proposal submittal deadline | Jan. 18, 2008 |
| Discussions with applicant after proposal submittal deadline (optional) | Late Jan. to March 2008 |
| Final revised proposals (optional) | Late Jan. to Feb. 28, 2008 |
| Proposal evaluation period | Mid Jan. to March 2008 |
| Provider selection | March to April 2008 |
| Notice of statement of findings and decision | March to April 2008 |
| Contract start date | July 1, 2008 |

II. Website Reference

The State Procurement Office (“SPO”) website is www.spo.hawaii.gov

| | For | Click |
|---|--|--|
| 1 | Procurement of Health and Human Services | “Health and Human Services, Chapter 103F, HRS...” |
| 2 | RFP website | “Health and Human Services, Ch. 103F...” and “RFPs” |
| 3 | Hawaii Administrative Rules (“HAR”) for Procurement of Health and Human Services | “Statutes and Rules” and “Procurement of Health and Human Services” |
| 4 | Forms | “Health and Human Services, Ch. 103F...” and “For Private Providers” and “Forms” |
| 5 | Cost Principles | “Health and Human Services, Ch. 103F...” and “For Private Providers” and “Cost Principles” |
| 6 | Standard Contract -General Conditions | “Health and Human Services, Ch. 103F...” “For Private Providers” and “Contract Template – General Conditions” |
| 7 | Protest Forms/Procedures | “Health and Human Services, Ch. 103F...” and “For Private Providers” and “Protests” |

Non-SPO websites

(Please note: website addresses may change from time to time. If a link is not active, try the State of Hawaii website at www.hawaii.gov)

| | For | Go to |
|----|---|---|
| 8 | Tax Clearance Forms (Department of Taxation Website) | http://www.hawaii.gov/tax/ click “Forms” |
| 9 | Wages and Labor Law Compliance, Section 103-055, HRS, (Hawaii State Legislature website) | http://www.capitol.hawaii.gov/ click “Bill Status and Documents” and “Browse the HRS Sections.” |
| 10 | Department of Commerce and Consumer Affairs, Business Registration | http://www.hawaii.gov/dcca click “Business Registration” |
| 11 | Campaign Spending Commission | www.hawaii.gov/campaign |
| 12 | Program Guidelines for Project Grants for Family Planning Services (United States Department of Health and Human Services, Office of Public Health and Science, Office Population Affairs, Office of Family Planning) | http://opa.osophs.dhhs.gov/titlex/2001guidelines/opa_guidelines_2001.html click “[text] for text document or [pdf] for adobe acrobat document in format column |
| 13 | TITLE 45 CFR, PART 46 | http://ohsr.od.nih.gov/guidelines/45cfr46.html |
| 14 | State Of Hawai’i Primary Care Needs Assessment Data Book 2005 | http://www.hawaii.gov/health/family-child-health/rural-health/pco/2005databook-complete.pdf |

III. Authority

This RFP is issued under the provisions of the Hawaii Revised Statutes (“HRS”), Chapter 103F and its administrative rules. All prospective applicants are charged with presumptive knowledge of all requirements of the cited authorities. Submission of a valid executed proposal by any prospective applicant shall constitute admission of such knowledge on the part of such prospective applicant.

IV. RFP Organization

This RFP is organized into five sections:

Section 1, Administrative Overview--Provides applicants with an overview of the procurement process.

Section 2, Service Specifications--Provides applicants with a general description of the tasks to be performed, delineates applicant responsibilities, and defines deliverables (as applicable).

Section 3, Proposal Application Instructions--Describes the required format and content for the proposal application.

Section 4, Proposal Evaluation--Describes how proposals will be evaluated by the state purchasing agency.

Section 5, Attachments --Provides applicants with information and forms necessary to complete the application.

V. Contracting Office

The Contracting Office is responsible for overseeing the contract(s) resulting from this RFP, including system operations, fiscal agent operations, and monitoring and assessing provider performance. The Contracting Office is:

**Maternal and Child Health Branch
Women's Health Section
Family Planning Program
Department of Health, State of Hawaii
741-A Sunset Avenue, Room 100
Honolulu, Hawaii 96816**

Phone: (808) 733-9030

Fax: (808) 733-8355

VI. Orientation

An orientation for applicants in reference to the request for proposals will be held as follows:

Date: October 30, 2007 **Time:** 2:00 p.m. to 4:00 p.m. HST

Location: Video Conference Centers at the following locations.

- Oahu (3 sites): Keoni Ana Bldg., 1177 Alakea Street, Honolulu;

Kakuihewa Bldg., 601 Kamokila Blvd., Kapolei; Ko`olauloa Community Health and Wellness Center, 54-316 Kamehameha Hwy., Hauula

- Hawaii (Big Island – 3 sites): Hilo State Office, 75 Aupuni Street, Hilo; Kona Health Center, Kona; Hamakua Health Center, 45-549 Plumeria Street, Honokaa
- Molokai: Molokai State Building, Kaunakakai
- Kauai: Lihue State Office, 3040 Umi Street, Lihue
- Maui: Wailuku Judiciary Bldg., 54 High Street, Wailuku

For further information on locations, please contact the Family Planning Program at 733-9030. **Please bring a copy of the RFP with you.**

Applicants are encouraged to submit written questions prior to the orientation. Impromptu questions will be permitted at the orientation and spontaneous answers provided at the state purchasing agency's discretion. However, answers provided at the orientation are only intended as general direction and may not represent the state purchasing agency's position. Formal official responses will be provided in writing. To ensure a written response, any oral questions should be submitted in writing following the close of the orientation, but no later than the submittal deadline for written questions indicated in the next paragraph (VII. Submission of Questions).

VII. Submission of Questions

Applicants may submit questions to the RFP Contact Person identified in Section 2 of this RFP. All written questions will receive a written response from the state purchasing agency.

Deadline for submission of written questions:

Date: November 30, 2007 **Time:** 4:30 p.m. HST

State agency responses to applicant written questions will be provided by:

Date: December 14, 2007

VIII. Submission of Proposals

A. Forms/Formats - Forms, with the exception of program specific requirements, may be found on the State Procurement Office website at: www.spo.hawaii.gov, click *Procurement of Health and Human Services* and *For Private Providers*. Refer to the Proposal Application Checklist for the location of program specific forms.

1. Proposal Application Identification (Form SPO-H-200) - Provides identification of the proposal.

2. **Proposal Application Checklist** – Provides applicants with information on where to obtain the required forms; information on program specific requirements; which forms are required and the order in which all components should be assembled and submitted to the state purchasing agency.
3. **Table of Contents** - A sample table of contents for proposals is located in Section 5, Attachment B. This is a sample and meant as a guide. The table of contents may vary depending on the RFP.
4. **Proposal Application (Form SPO-H-200A)** - Applicant shall submit comprehensive narratives that addresses all of the issues contained in the Proposal Application Instructions, including a cost proposal/budget if required. (Refer to Section 3 of this RFP.)
5. **Tax Clearance** – A certified copy of a current valid tax clearance certificate issued by the State of Hawaii, Department of Taxation (“DOTAX”) and the Internal Revenue Service (“IRS”) will be required either at the time of proposal submittal or upon notice of award at the discretion of the purchasing agency.

Refer to Section 4, Paragraph III, A.1, Administrative Requirements, and the Proposal Application Checklist (located in Section 5) to determine whether the tax clearance is required at time of proposal submittal for this RFP. Tax clearance application may be obtained from the Department of Taxation website. (See Paragraph II, Website Reference.)

- B. **Program Specific Requirements** - Additional program specific requirements are included in Sections 2 and 3, (Service Specifications and the Proposal Application Instructions). Federal certifications are required, and they are listed on the Proposal Application Checklist.
- C. **Multiple or Alternate Proposals** - Multiple or alternate proposals shall not be accepted unless specifically provided for in Section 2 of this RFP. In the event alternate proposals are not accepted and an applicant submits alternate proposals, but clearly indicates a primary proposal, it shall be considered for award as though it were the only proposal submitted by the applicant.
- D. **Wages and Labor Law Compliance** - Before a provider enters into a service contract in excess of \$25,000, the provider shall certify that it complies with section 103-55, HRS, Wages, hours, and working conditions of employees of contractors performing services. Section 103-55, HRS may be obtained from the Hawaii State Legislature website. (See Paragraph II, Website Reference.)
- E. **Compliance with all Applicable State Business and Employment Laws.** All providers shall comply with all laws governing entities doing business in the

State. Prior to contracting, owners of all forms of business doing business in the state except sole proprietorships, charitable organizations unincorporated associations and foreign insurance companies be register and in good standing with the Department of Commerce and Consumer Affairs (“DCCA”), Business Registration Division. Foreign insurance companies must register with DCCA, Insurance Division. More information is on the DCCA website. (See Paragraph II, Website Reference.)

F. Campaign Contributions by State and County Contractors. Contractors are hereby notified of the applicability of Section 11-205.5, HRS, which states that campaign contributions are prohibited from specified State or county government contractors during the term of the contract if the contractors are paid with funds appropriated by a legislative body. For more information, Act 203/2005 FAQs are available at the Campaign Spending Commission webpage. (See Paragraph II, Website Reference.)

G. Confidential Information – If an applicant believes any portion of a proposal contains information that should be withheld as confidential, the applicant shall request in writing nondisclosure of designated proprietary data to be confidential and provide justification to support confidentiality. Such data shall accompany the proposal, be clearly marked, and shall be readily separable from the proposal to facilitate eventual public inspection of the non-confidential sections of the proposal.

Note that price is not considered confidential and will not be withheld.

H. Language Access – The Provider shall comply, as a “covered entity,” with the provisions of HRS Chapter 371 Part II, Language Access.

I. Proposal Submittal - All mail-ins shall be postmarked by the United States Postal System (“USPS”) and received by the State purchasing agency no later than the submittal deadline indicated on the attached Proposal Mail-in and Delivery Information Sheet. All hand deliveries shall be received by the State purchasing agency by the date and time designated on the Proposal Mail-In and Delivery Information Sheet.

Proposals shall be rejected when:

- Postmarked after the designated date; or
- Postmarked by the designated date but not received within 10 days from the submittal deadline; or
- If hand delivered, received after the designated date and time.

The number of copies required is located on the Proposal Mail-In and Delivery Information Sheet. Deliveries by private mail services such as FEDEX shall be considered hand deliveries and shall be rejected if received after the submittal deadline. Dated USPS shipping labels are not considered postmarks.

IX. Discussions with Applicants

- A. Prior to Submittal Deadline.** Discussions may be conducted with potential applicants to promote understanding of the purchasing agency's requirements.
- B. After Proposal Submittal Deadline -** Discussions may be conducted with applicants whose proposals are determined to be reasonably susceptible of being selected for award, but proposals may be accepted without discussions, in accordance section 3-143-403, HAR.

X. Opening of Proposals

Upon receipt of proposal by a state purchasing agency at a designated location, proposals, modifications to proposals, and withdrawals of proposals shall be date-stamped, and when possible, time-stamped. All documents so received shall be held in a secure place by the state purchasing agency and not examined for evaluation purposes until the submittal deadline.

Procurement files shall be open to public inspection after a contract has been awarded and executed by all parties.

XI. Additional Materials and Documentation

Upon request from the state purchasing agency, each applicant shall submit any additional materials and documentation reasonably required by the state purchasing agency in its evaluation of the proposals.

XII. RFP Amendments

The State reserves the right to amend this RFP at any time prior to the closing date for the final revised proposals.

XIII. Final Revised Proposals

If requested, final revised proposals shall be submitted in the manner, and by the date and time specified by the state purchasing agency. If a final revised proposal is not submitted, the previous submittal shall be construed as the applicant's best and final offer/proposal. *The applicant shall submit **only** the section(s) of the proposal that are amended, along with the Proposal Application Identification Form (SPO-H-200).* After final revised proposals are received, final evaluations will be conducted for an award.

XIV. Cancellation of Request for Proposal

The request for proposal may be canceled and any or all proposals may be rejected in whole or in part, when it is determined to be in the best interests of the State.

XV. Costs for Proposal Preparation

Any costs incurred by applicants in preparing or submitting a proposal are the applicants' sole responsibility.

XVI. Provider Participation in Planning

Provider participation in a state purchasing agency's efforts to plan for or to purchase health and human services prior to the state purchasing agency's release of a request for proposals, including the sharing of information on community needs, best practices, and providers' resources, shall not disqualify providers from submitting proposals if conducted in accordance with sections 3-142-202 and 3-142-203 of the Hawaii Administrative Rules for Chapter 103F, HRS.

XVII. Rejection of Proposals

The State reserves the right to consider as acceptable only those proposals submitted in accordance with all requirements set forth in this RFP and which demonstrate an understanding of the problems involved and comply with the service specifications. Any proposal offering any other set of terms and conditions contradictory to those included in this RFP may be rejected without further notice.

A proposal may be automatically rejected for any one or more of the following reasons: (Relevant sections of the Hawaii Administrative Rules for Chapter 103F, HRS, are parenthesized.)

- (1) Rejection for failure to cooperate or deal in good faith. (Section 3-141-201, HAR)
- (2) Rejection for inadequate accounting system. (Section 3-141-202, HAR)
- (3) Late proposals (Section 3-143-603, HAR)
- (4) Inadequate response to request for proposals (Section 3-143-609, HAR)
- (5) Proposal not responsive (Section 3-143-610 (1), HAR)
- (6) Applicant not responsible (Section 3-143-610 (2), HAR)

XVIII. Notice of Award

A statement of findings and decision shall be provided to all applicants by mail upon completion of the evaluation of competitive purchase of service proposals.

Any agreement arising out of this solicitation is subject to the approval of the Department of the Attorney General as to form, and to all further approvals, including the approval of the Governor, required by statute, regulation, rule, order or other directive.

No work is to be undertaken by the awardee prior to the contract commencement date. The State of Hawaii is not liable for any costs incurred prior to the official starting date.

XIX. Protests

Any applicant may file a protest against the awarding of the contract. The Notice of Protest form, SPO-H-801, is available on the SPO website (See the Proposal Application Checklist in Section 5 of this RFP.) Only the following matters may be protested:

- (1) A state purchasing agency's failure to follow procedures established by Chapter 103F of the Hawaii Revised Statutes;
- (2) A state purchasing agency's failure to follow any rule established by Chapter 103F of the Hawaii Revised Statutes; and
- (3) A state purchasing agency's failure to follow any procedure, requirement, or evaluation criterion in a request for proposals issued by the state purchasing agency.

The Notice of Protest shall be mailed by USPS or hand delivered to the head of the state purchasing agency conducting the protested procurement and the procurement officer who is conducting the procurement (as indicated below) within five working days of the postmark of the Notice of Findings and Decision sent to the protestor. Delivery services other than USPS shall be considered hand deliveries and considered submitted on the date of actual receipt by the state purchasing agency.

| Head of State Purchasing Agency | Procurement Officer |
|---|---|
| Name: Chiyome Leinaala Fukino, M.D. | Name: Acting Chief, Administrative Services Office |
| Title: Director of Health | Title: DOH Procurement Officer |
| Mailing Address: P. O. Box 3378, Honolulu, HI 96801 | Mailing Address: P. O. Box 3378, Honolulu, HI 96801 |
| Business Address: 1250 Punchbowl Street, Honolulu, HI 96813 | Business Address: 1250 Punchbowl Street, Honolulu, HI 96813 |

XX. Availability of Funds

The award of a contract and any allowed renewal or extension thereof, is subject to allotments made by the Director of Finance, State of Hawaii, pursuant to Chapter 37, HRS, and subject to the availability of Federal and/or State funds.

XXI. Monitoring and Evaluation

The criteria by which the performance of the contract will be monitored and evaluated are:

- (1) Adherence to Title X's federal Program Guidelines for Project Grants for Family Planning Services, January 2001.

- (2) Quality of Care/Quality of Services.
- (3) Output Measures.
- (4) Performance Measures.
- (5) Financial Management.
- (6) Administrative Requirements.

XXII. General and Special Conditions of Contract

The general conditions that will be imposed contractually are on the SPO website. (See Paragraph II, Website Reference.) Special conditions may also be imposed contractually by the state purchasing agency, as deemed necessary.

The Department of Health may also be required to make modifications to individual contracts that it is unable to anticipate now. Reasons for such modifications may include, but not be limited to, Health Insurance Portability and Accountability Act (“HIPAA”) regulations.

Applications are required to address requirements in the Federal Title X Program Guidelines for Family Planning Services and describe plans to meet HIPAA standards in their proposal application.

XXIII. Cost Principles

In order to promote uniform purchasing practices among state purchasing agencies procuring health and human services under Chapter 103F, HRS, state purchasing agencies will utilize standard cost principles outlined in Form SPO-H-201 which is available on the SPO website. (See Paragraph II, Website Reference.) Nothing in this section shall be construed to create an exemption from any cost principle arising under federal law.

Section 2

Service Specifications

Section 2

Service Specifications

I. Introduction

A. Overview, purpose or need

Since the early 1970's, the Hawaii State Department of Health ("DOH") has been the Grantee for the federally funded Title X Family Planning Program. The award is made by the U.S. Department of Health and Human Services ("DHHS"), Office of Population Affairs, Office of Family Planning. The Hawaii DOH Family Planning Program ("FPP") of the Women's Health Section, Maternal and Child Health Branch, Family Health Services Division is responsible to administer the program and funds enabling the provision of Title X subsidized family planning ("FP") services in Hawaii.

As Grantee, the FPP's functions and responsibilities include:

- Assessing community needs in the area of family planning for individuals with low incomes and for those at risk for unintended pregnancy;
- Identifying, funding, and contracting with service providers;
- Assuring access to subsidized high quality clinical family planning services and related preventive health services including preconception and interconception care (care received prior or between pregnancies to improve individual health and pregnancy outcomes);
- Assuring access to highly effective contraceptive methods;
- Monitoring and evaluating the performance of contract agencies;
- Collecting, analyzing, and disseminating data;
- Providing training and technical assistance to family planning providers;
- Providing community education and outreach services;
- Advocating for clients; and
- Serving as liaison between the state, federal, and community family planning providers.

Proposals are requested from qualified applicants to become a designated Title X Delegate Clinic and provide FP clinical services and health education to women and men of reproductive age (with priority given to individuals with low incomes) for fiscal years 2009 and 2010 (July 1, 2008 to June 30, 2010). Proposals that are awarded will be funded by federal Title X Family Planning funds and State funds awarded to the DOH.

According to the 2006 Guttmacher Institute's "Contraception Counts" report, there are 138,110 women in Hawaii in need of contraceptive services and supplies. It is estimated that 62,020 of these women have incomes below 250%

of the federal poverty level and are in need of publicly supported contraceptive services; including 15,840 sexually active adolescents.

Many women who do not have health insurance cannot afford contraceptive services. The U.S. Census Bureau's Current Population Survey ("CPS") Annual Social and Economic Supplement, Hawaii Sample (2001-2005), indicates approximately 120,000 persons were uninsured in 2005. This represents approximately 9.6% of Hawaii's resident population.

When family planning services are not used, many women have an unintended pregnancy. Over half of the pregnancies in Hawaii, 52.4%, were unintended in the year 2005. This represents 11,329 of 21,636 pregnancies. Increased availability of family planning and reproductive health services is needed to prevent unintended pregnancies, an important factor in ensuring positive birth outcomes and a healthy start for infants.

The purpose of the proposed services is to assist women and men throughout Hawaii to plan if and when pregnancy shall occur and to prevent unintended pregnancies. This is accomplished through the provision of high quality family planning and related preventive services including breast and pelvic examinations; cervical cancer screening; risks factor screening; patient education and counseling; Sexually Transmitted Diseases ("STD") and Human Immunodeficiency Virus ("HIV") screenings; pregnancy diagnosis and counseling; and preconception and interconception care.

Family planning services should be community based, culturally appropriate, comprehensive, and include the provision of a broad range of highly effective contraceptive methods, health education, and counseling at the time of the clinic visit. Culturally appropriate refers to services and activities that are responsive to, and respectful of the history, traditions, and cultural values of different ethnic groups.

FP services strive to promote optimal health and well-being during reproductive years. Program objectives should focus on reaching all clients in need of family planning services.

B. Planning activities conducted in preparation for this RFP.

A request for information ("RFI") was posted on the State Procurement website on August 31, 2007. An email was sent announcing the posting of the RFI to current providers and prospective providers. The RFI included the website for the previous RFP and website for the Federal Title X Family Planning Program Guidelines and other resources.

C. Description of the goals of the service

The goals of this program are to:

1. Assure access to high quality clinical family planning and reproductive health services including the provision of highly effective contraceptive methods, and provide cancer and sexually transmitted disease screening and prevention education, including HIV prevention education, counseling, and testing to all individuals of reproductive age with a priority to low income and hard-to-reach individuals (uninsured or underinsured persons, immigrants, males, persons with limited English proficiency, homeless persons, substance abusers, persons with disabilities, and adolescents).

For purposes of this RFP, the term “low income” shall be defined as individuals whose individual or family income falls within two hundred fifty percent (250%) of the federal poverty guidelines.

2. Improve the health status of populations in areas of the State designated as in need of services as identified in the 2005 Primary Care Needs Assessment Data Book published by the Family Health Services Division, DOH. (See Section 1 Administrative Overview; Paragraph II, Website Reference.)

D. Description of the target population to be served

The target population is hard-to-reach individuals that are the most under-served and the least likely to access family planning services in a traditional setting. These individuals include, but are not limited to uninsured or underinsured persons, immigrants, males, persons with limited English proficiency, homeless persons, substance abusers, persons with disabilities, and adolescents.

E. Geographic coverage of service

The services shall be statewide, in areas of high population density such as Honolulu, and in locations that have been federally designated as medically underserved areas (“MUAs”) and medically underserved populations (“MUPs”) as indicated in the State of Hawaii Primary Care Needs Assessment Databook 2005. (See Section 1 Administrative Overview; Paragraph II, Website Reference.)

F. Probable funding amounts, source, and period of availability

The estimated amount of federal funds available per fiscal year is \$800,000, and the estimated amount of state funds available per fiscal year is \$1,200,000. Federal and state funding is for a period of two years (July 1, 2008 - June 30, 2010.) An additional \$1,500,000 annually, of federal and state funds, may

become available. Funds are subject to budget additions and restrictions. This RFP has been developed in such a manner as to satisfy the procurement requirements for additional federal (i.e. Title X) and/or state funds.

II. General Requirements

A. Specific qualifications or requirements, including but not limited to licensure or accreditation

The applicant shall comply with the Chapter 103F, Hawaii Revised Statutes (“HRS”) Cost Principles for Purchases of Health and Human Services identified in SPO-H-201 (Effective 10/1/98), which can be found on the SPO website. (See Section 1 Administrative Overview, Paragraph II, Website Reference.)

Advanced practice nurses (nurse practitioners, certified nurse midwives, and clinical nurse specialists), registered nurses, physician assistants, social workers, pharmacists, and physicians providing FP services must have unencumbered licenses to practice in the State of Hawaii.

Delegation of special tasks of nursing care to unlicensed assistive personnel is allowed if criteria for delegation are met under state law. (Chapter 116-89, Hawaii Administrative Rules.)

Compliance with Occupational Safety and Health Administration (“OSHA”) Blood Borne Pathogens, Clinical Laboratory Improvement Amendments (“CLIA”) Requirements, and Health Insurance Portability and Accountability Act (“HIPAA”) must be met.

B. Secondary purchaser participation
(Refer to §3-143-608, HAR)

After-the-fact secondary purchases will be allowed.

Planned secondary purchases – None.

C. Multiple or alternate proposals
(Refer to §3-143-605, HAR)

Allowed Unallowed

D. Single or multiple contracts to be awarded
(Refer to §3-143-206, HAR)

Single Multiple Single & Multiple

Criteria for multiple awards:

Prefer at least one provider per island; with additional providers in higher population density areas.

E. Single or multi-term contracts to be awarded
(Refer to §3-149-302, HAR)

Single term (\leq 2 yrs) Multi-term ($>$ 2 yrs)

Contract terms:

The anticipated term of the contract is July 1, 2008 to June 30, 2010 with the option to extend an additional two years (from July 1, 2010 to June 30, 2012). Extensions must be in writing and must be executed prior to expiration date of June 30, 2010.

F. RFP contact person

The individual listed below is the sole point of contact from the date of release of this RFP until the selection of the successful provider or providers. Written questions should be submitted to the RFP contact person and received on or before the day and time specified in Section I, Paragraph IV (Procurement Timetable) of this RFP.

LaGena Hayes, Quality Assurance Coordinator
Family Planning Program
Women's Health Section
Maternal and Child Health Branch
Department of Health
741-A Sunset Avenue, Room 100
Honolulu, Hawaii 96816
Phone: (808) 733-9030
Email: lagenahayes@fhsd.health.state.hi.us

III. Scope of Work

The scope of work encompasses the following tasks and responsibilities:

A. Service Activities
(Minimum and/or mandatory tasks and responsibilities.)

1. Family Planning Services

- a. The awardee shall provide high quality clinical family planning ("FP") and related preventive health services to the target population that include, but are not limited to, initial and annual family planning health assessments and physical examinations,

provision of a highly effective Food Drug Administration (“FDA”) approved contraceptive method, pap smears, chlamydia and gonorrhea screening, HIV risk assessment, routine visits, health education, preconception and interconception care, pregnancy screening and counseling, follow up, care coordination, and referral. (Refer to Section 5, Attachment C, “Family Planning Services Summary of Visit Types”.)

- b. The awardee shall screen for risk factors that could impact care or choice of contraceptive method. These risk factors include, but are not limited to: overweight (Body mass index 25.0 – 29.9), obesity (Body mass index 30.0 and above), smoking, alcohol use, and drug use. Appropriate counseling will be provided, interventions initiated, and referrals will be made as needed and desired.
- c. The client’s written informed voluntary consent to receive services must be obtained. In addition, if a client chooses a prescription method of contraception, a method specific consent must be obtained. (See Section 1 Administrative Overview, Paragraph II, Website Reference for Federal Program Guidelines [“FPG”], page 16.)
- d. Client confidentiality must be assured, as required by the federal and state Privacy Acts, i.e. Privacy Act of 1974, HIPAA, HRS 577A-3.
- e. The awardee must have written policies and protocols for client education. Family planning client education and counseling must be documented in the client record. (See Section 1 Administrative Overview, Paragraph II, Website Reference for FPG, page 17.)
- f. Adolescents seeking contraceptive services must be informed about all methods of contraception, including abstinence. Counseling must include: information regarding safer sex practices and options to reduce risks for pregnancy and STDs such as HIV; resisting sexual coercion; mandated reporting laws; and encouragement of family involvement. (See Section 1 Administrative Overview, Paragraph II, Website Reference for Title X FPG, page 25 and Attachment D, Title X Assurance of Compliance.)
- g. The awardee shall adopt or develop policies and protocols to address intimate partner violence and sexual assault. The protocols shall address screening and assessment, intervention, documentation, staff training, and follow up.

- h. To facilitate community awareness of and access to family planning services, clinics shall implement activities whereby their services are made known to the community. There must be a written plan of action, including an annual estimation of the number of individuals in the community to be contacted with clinic and FP related information. The awardee must collaborate with FP community health educators to increase the educator's knowledge about access to clinical care. (See Section 1 Administrative Overview; Paragraph II, Website Reference for FPG, pages 11-12.)

B. Management Requirements (Minimum and/or mandatory requirements)

1. Personnel

- a. The clinical care component of the services must operate under the responsibility of a medical director who is a licensed and qualified physician with special training or experience in family planning. (See Section 1 Administrative Overview; Paragraph II, Website Reference for FPG, page 9.)
- b. For clinical services, advanced practice nurses (nurse practitioners, certified nurse midwives, clinical nurse specialists), registered nurses, physician assistants, pharmacists, social workers, and physicians providing FP services must have unencumbered licenses to practice in the State of Hawaii.
- c. Medical assistants who provide family planning health information to clients as well as health educators and community outreach workers must have training in: family planning; use of contraceptive methods including emergency contraception; effectiveness of contraceptive methods; risk screening and reduction; reproductive health care, preconception and interconception care, and FP data collection.
- d. Clinic staff should be broadly representative of the population to be served and should be sensitive to and able to deal effectively with the cultural and other characteristics of the client population.
- e. The FP clinic staff shall have an orientation to the Title X Program and program data collection. FP staff shall participate in trainings sponsored and offered by FPP and Region IX's FP training center, the Center for Health Training, as applicable and/or required. FPP must be notified for changes in staff involved in providing FP services.

- f. Project personnel must be informed that they may be subject to prosecution under Federal law if they coerce or endeavor to coerce any person to undergo an abortion or sterilization procedure.

2. Administrative

- a. The awardee shall designate a FP contact person who will be the liaison between the FPP and the awardee.
- b. Quarterly Videoconference meetings in collaboration with family planning community health educators will be held. These provider meetings will include appropriate training and opportunities to strengthen approaches to increase utilization and access to family planning services statewide. The FP contact person or the contact person's alternate must attend all four meetings a year.
- c. The awardee must comply with Federal regulations regarding the use of Title X clients in research. (See Section 1 Administrative Overview; Paragraph II, Website Reference for Title 45 CFR, Part 46.)
- d. Family planning clinic services used by clients must be solely on a voluntary basis. Individuals must not be subjected to coercion to receive services or to use or not to use any particular method of birth control. Acceptance of family planning services must not be a prerequisite to eligibility for, or receipt of, any other service or assistance from or participation in any other programs of the applicant. (See Section 1 Administrative Overview, Paragraph II, Website Reference for FPG, Page 5 and Attachment D, Title X Assurance of Compliance.)
- e. The awardee shall adopt or develop workplace violence guidelines to assure safety of employees, clients and visitors.
- f. The awardee shall acknowledge the DOH, Maternal and Child Health Branch, Women's Health Section, FPP, and Title X as the awardee's program sponsors. This acknowledgement shall appear on all printed materials for which the DOH is a program sponsor.
- g. The awardee shall be responsible for its own determination and compliance efforts in regards to the HIPAA.
- h. The awardee shall comply with all applicable policies of the DOH, including Attachment E, Interpersonal Relationships between Staff and Clients.

i. Financial Management

1. Awardees must maintain a financial management system that meets the standards specified in Subpart C of 45 Code of Federal Regulations (“CFR”) Part 74 or Subpart C of 45 CFR Part 92, and which complies with Federal standards to safeguard the use of funds. Documentation and records of all income and expenditures must be maintained as required.
2. The Awardee is responsible for the development and implementation of policies and procedures for charging, billing, and collecting funds for the services provided by the project.
3. Clients must not be denied project services or be subjected to any variation in quality of services because of the inability to pay. Billing and collection procedures must have the following characteristics:
 - a. Charges must be based on cost analysis of all services provided by the project. At the time of services, clients who are responsible for paying any fee for their services must be given bills directly.
 - b. A schedule of discounts must be developed and implemented with sufficient proportional increments so that inability to pay is never a barrier to service. A schedule of discounts is required for individuals with family incomes between 101% and 250% of the Federal poverty level.
 - c. Clients whose documented income is at or below 100% of the Federal poverty level must not be charged, and projects must bill all third parties authorized or legally obligated to pay for services.
 - d. Fees must be waived for individuals with family incomes above 250% of the Federal poverty level who, as determined by the service site project director, are unable, for good cause, to pay for family planning services.
 - e. Eligibility for discounts for minors who receive confidential services must be based on the income of the minor.

- f. Bills to clients must show total charges less any allowable discounts.

(For 1-3, See Section 1 Administrative Overview, Paragraph II, Website Reference for FPG, pp 7-8.)

3. Quality assurance and evaluation specifications

A quality assurance system must be in place that provides for ongoing evaluation of project personnel and services. (See Section 1 Administrative Overview, Paragraph II, Website Reference for FPG, page 30.)

The Provider shall conform to established standards of care and practice, including, but not limited to, the following:

- a. Federal Program Guidelines for Project Grants for Family Planning Services, U.S Department of Health and Human Services, Office of Population Affairs, Office of Family Planning. (See Section 1 Administrative Overview, Paragraph II, Website Reference for FPG.)
- b. Office of Population Affairs Program Instructional Series.
- c. Uniform Requirements for Government and Non-Profits, 45CFR92 & 74.
- d. Office of Management and Budget (“OMB”) Circulars, A-87, A-102, A-110, A-122, A-133.
- e. Hawaii Department of Health Family Planning Policies and Guidelines. (Available on request from the FPP RFP contact, Section 2, Paragraph II, F.)
- f. Family Planning Services Summary of Visit Types. (Attachment C.)
- g. Recognized professional organizations that establish national standards of care, e.g. American College of Obstetricians and Gynecologists (“ACOG”), the American Cancer Society (“ACS”), and the U.S. Preventive Services Task Force (“USPSTF”).
- h. Current Centers for Disease Control and Prevention (“CDC”) and State and Regional STD Guidelines.

4. Output and performance/outcome measurements

The DOH requires reporting of output and performance measures. The performance measures are linked to requirements of the federal FP guidelines and federal law. Performance measures are estimated on Table A – Performance Measures. (Attachment F.)

The annual number of family planning clients and family planning visits will be projected on Table B – Output Measures. (Attachment G.)

The provider must report all clients served by the FPP, regardless of paying source for the visits.

5. Experience

The applicant shall demonstrate that it has the necessary skills, abilities, knowledge of, and experience relating to the delivery of the proposed services.

6. Coordination of services

Few agencies have total expertise and experience in working with hard-to-reach populations and in providing clinical family planning services. Therefore, the importance of coordination as an integral component of service delivery is emphasized. Collaboration can facilitate ease of access to available service. This is accomplished through collaborative arrangements established between organizations and/or programs. Referrals should be available for services to assist in meeting the client's needs, such as, but not limited to: screening, assessments, prenatal care, HIV/AIDS related care, counseling, financial, and other assistance programs.

7. Reporting requirements for program and fiscal data

- a. The awardee shall submit a monthly invoice and expenditure report based on the approved budget. (Attachment H, FP 100 Expenditure Report.)
- b. An individual client visit record (“CVR”) will be completed for all FP client visits made to the agency. Family planning client visits include uninsured, Medicaid (Fee-For-Service and Med-QUEST), military, private insurance, and private pay clients. The CVR data will be inputted into the FP software by the awardee. (Attachment I.)

- c. The awardee will submit CVR data monthly to DOH's FP Data Unit of the Maternal and Child Health Branch. If awardee's data collection system is used, the awardee is responsible for costs to use their own system, including upgrades and changes to accommodate the FP program data collection.
- d. The awardee will submit a quarterly report documenting abnormal pap smears, positive HIV screening, and number of community health education contacts. (Attachment J.)
- e. The awardee will submit an annual calendar year report as required by the federal governing body at a time determined by the State. (Attachment K.)
- f. The awardee shall submit to the DOH an annual variance report within 60 calendar days after the end of the fiscal year in the format requested by the DOH. The report will document the organization's achievement toward the planned output and performance measures (objectives) for the budget period and explain any significant variances (+/-10%).
- g. The applicant will project the number of unduplicated clients to be served. The expectation is that services will be provided the full contract year even if the agreed upon client number is met prior to the end of the year. In order to earn the full contracted amount, a minimum number of clients, as specified in the contract, must be served. (Attachment G.)
- h. The following budget form(s) shall be submitted with the Proposal Application: SPO-H-205, 206A, 206B, 206C, 206D, 206 E, 206F, 206G, 206H, 206I, 206J.

All budget forms, instructions and samples are located on the SPO website. (See Section 1 Administrative Overview, Paragraph II, Website Reference.)

All of the above will adhere to the format set by the DOH.

8. Pricing structure or pricing methodology to be used

Applicants shall submit a cost proposal utilizing the pricing structure designated by the Title X Family Planning Program. The cost proposal shall be attached to the Proposal Application.

a. Pricing Structure Based on Cost Reimbursement

The cost reimbursement pricing structure reflects a purchase arrangement in which the purchasing agency pays the provider for budgeted agreed-upon costs that are actually incurred in delivering the services specified in the contract, up to a stated maximum obligation.

Family Planning Program operates on a Total Program Concept, i.e., Family Planning Program funds (federal and state) are used to leverage additional resources for a comprehensive family planning program to be contracted. The provider will report all clients served by the family planning program and who receive any of the covered services included in the contract. All related revenues and expenditures from these family planning client services will be reported. Revenues/funding sources that partially support the family planning program may include, but not be limited to: Title V, client fees, client donations, private insurance, Medicaid (Fee-For-Service and Med-QUEST), Maternal Child Health block grant, tobacco tax funds, other federal funds or agency contributions. With the exception of the contributions provided by the Provider of its own funds, Family Planning Program is the funding source of last resort. Non-expended funds will be returned to the State.

Reimbursement cannot be made in excess of the actual cost of services provided under this contract.

b. Prohibited Costs

The following costs are not allowed:

1. For awardees receiving other federal awards, indirect costs based on a rate that has not been negotiated with the federal government are not allowed. (A valid copy of the written agreement with the federal agency for the negotiated rate must be provided to the State.)
2. Depreciation of Assets acquired through the state or federal government.

c. Travel Out of State

An out of state trip must be pre-approved by the FPP office. The request must be adequately justified on form SPO-H-206D (Budget Justification – Travel – Out of State). The FPP will review requests for out of state travel using the following guidelines:

1. Travel is essential to the implementation of the FP program.
2. Personal attendance is preferable to conducting FP business through email, FAX transmission, correspondence, telephone or other telecommunication method.

9. Units of service and unit rate

Not Applicable.

10. Method of compensation and payment

Payments will be made based on receipt of a monthly invoice and expenditure report submitted to Family Planning Program.
(Attachment H, FP 100 – Expenditure Report.)

IV. Facilities

Facilities must be clean and well-kept, be accessible to clients and staff, and be specially equipped to provide the full range of FP services.

Section 3

Proposal Application Instructions

Section 3

Proposal Application Instructions

General instructions for completing applications:

- *Proposal Applications shall be submitted to the state purchasing agency using the prescribed format outlined in this section.*
- *The numerical outline for the application, the titles/subtitles, and the applicant organization and RFP identification information on the top right hand corner of each page should be retained. The instructions for each section however may be omitted.*
- *Page numbering of the Proposal Application should be consecutive, beginning with page one and continuing through for each section. **See sample table of contents in Section 5.***
- *Proposals may be submitted in a three ring binder (Optional).*
- *Tabbing of sections (Recommended).*
- *Applicants must also include a Table of Contents with the Proposal Application. A sample format is reflected in Section 5, Attachment B of this RFP.*
- *A written response is required for **each** item unless indicated otherwise. Failure to answer any of the items will impact upon an applicant's score.*
- *Applicants are **strongly** encouraged to review evaluation criteria in Section 4, Proposal Evaluation when completing the proposal.*
- *This form (SPO-H-200A) is available on the SPO website (See Section 1, Paragraph II, Website Reference). However, the form will not include items specific to each RFP. If using the website form, the applicant must include all items listed in this section.*

The Proposal Application comprises the following sections:

- *Proposal Application Identification Form*
- *Table of Contents*
- *Program Overview*
- *Experience and Capability*
- *Project Organization and Staffing*
- *Service Delivery*
- *Financial*
- *Other*

I. Program Overview

The applicant shall give a brief overview to orient evaluators to the agency's family planning program and services being offered.

II. Experience and Capability

A. Necessary Skills

The applicant shall demonstrate that it has the necessary skills, abilities, knowledge of, and experience relating to the delivery of the proposed services. The applicant shall demonstrate abilities in working with various population groups, such as uninsured or underinsured persons, immigrants, males, persons with limited English proficiency, homeless persons, substance abusers, persons with disabilities, and adolescents. The applicant shall also demonstrate the ability to incorporate cultural competency in service delivery requirements.

B. Experience

The applicant shall provide a listing of verifiable experiences with projects or contracts for the most recent five years that are pertinent to the proposed services. The applicant shall include points of contact, addresses, email, and phone numbers. The description shall include the number of participants served and work with various cultural and ethnic groups. The applicant shall also demonstrate experiences in achieving similar programmatic goals and interventions for improving family planning services through coordination of services. The State reserves the right to contact references to verify experience.

C. Quality Assurance and Evaluation

The applicant shall describe its quality assurance and evaluation plans to ensure high quality proposed services, including methodology.

Quality assurance plans shall be in the proposal, but are not limited to assuring:

1. Accurate and complete data and billing forms (i.e. invoices, budgets, and expenditure reports) are submitted to Family Planning Program ("FPP") to ensure timely processing of payments to the Provider.
2. Management and supervision of personnel performing family planning ("FP") services and documentation of activities.
3. Family planning objectives are being implemented to meet performance measure outcomes.
4. Adherence to FPP scope of services, program supervision, staffing, and that accounting system practices are followed.
5. Quality assurance plan must include an annual customer survey. This survey at a minimum needs to include questions regarding satisfaction

with services; how did the patient find out about your FP services; was the patient referred by a FP Community Health Educator.

D. Coordination of Services

The applicant shall demonstrate the capability to coordinate FP services within the agency, (e.g., satellite clinics) and with other agencies and resources in the community. Describe the process for follow-up and referral criteria, guidelines, and protocols that facilitate links with supportive specialists, community programs, and support agencies.

Applicant should describe any coordination of service that occurs or will occur between other DOH managed programs such as the Perinatal Support Services, Healthy Start, and Baby S.A.F.E. Programs (as applicable).

E. Facilities

The applicant shall provide a description of its facilities to demonstrate its adequacy in relation to the proposed services. If facilities are not presently available, describe plans to secure facilities. Also describe how the facilities meet ADA requirements, as applicable and any special equipment required for the services.

If proposed services will be provided at more than one site, describe each site.

III. Project Organization and Staffing

A. Staffing

1. Proposed Staffing

The applicant shall describe the proposed staffing pattern, client/staff ratio, and proposed caseload capacity appropriate for the viability of the FP and related preventive health services.

If satellite sites will also provide FP services, include description of staffing.

2. Staff Qualifications

The applicant shall provide the minimum qualifications (including experience) for staff assigned to the program. The applicant shall submit position descriptions of qualified personnel to be hired and/or of staff assigned to provide overall program supervision and those to perform FP services activities.

- a. The clinical care component of the services must operate under the responsibility of a medical director who is a licensed and qualified physician with special training or experience in family planning. (See Section 1 Administrative Overview; Paragraph II, Website Reference for FPG, page 9.)
- b. For clinical services, advanced practice nurses (nurse practitioners, certified nurse midwives, clinical nurse specialists), registered nurses, physician assistants, pharmacists, social workers, and physicians providing FP services must have unencumbered licenses to practice in the State of Hawaii.
- c. Medical assistants who provide family planning health information to clients as well as health educators and community outreach workers must have training in: family planning; use of contraceptive methods including emergency contraception; effectiveness of contraceptive methods; risk screening and reduction; reproductive health care, preconception and interconception care, and FP data collection.
- d. Clinic staff should be broadly representative of the population to be served and should be sensitive to and able to deal effectively with the cultural and other characteristics of the client population.
- e. The FP clinic staff shall have an orientation to the Title X Family Planning Program and program data collection. FP staff shall participate in trainings sponsored and offered by FPP and Region IX's FP training center, the Center for Health Training, as applicable and/or required.
- f. Project personnel must be informed that they may be subject to prosecution under Federal law if they coerce or endeavor to coerce any person to undergo an abortion or sterilization procedure.

B. Project Organization

1. Supervision and Training

The applicant shall describe its ability to supervise, train, and provide administrative direction relative to the delivery of the proposed services.

2. Organization Chart

The applicant shall reflect the position of each staff and line of responsibility/supervision. (Include position title, name, and full time equivalency) Both the "Organization-wide" and "Program" organization

charts shall be attached to the Proposal Application. FPP must be informed of changes in staff involved in providing FP services.

IV. Service Delivery

The applicant shall include a detailed discussion of the applicant's approach to applicable service activities and management requirements from Section 2, Paragraph III, Scope of Work, including (if indicated) a work plan of all service activities and tasks to be completed, related work assignments/responsibilities, and timelines/schedules. The applicant shall emphasize the demographics, service needs, and unique characteristics of the specific geographic area to provide FP services. The applicant shall include a description of the approach for achieving FPP performance and output measures. (Attachment F and G.)

If services are provided at more than one site, describe how the applicant will ensure meeting FPP requirements at all sites.

A. Service Activities

The applicant shall describe thoroughly how they plan to provide the following activities:

1. Provide high quality clinical family planning and related preventive health services that include, but are not limited to, initial and annual family planning health assessments and physical examinations, provision of a highly effective Food Drug Administration ("FDA") approved contraceptive method, pap smears, chlamydia and gonorrhea screening, Human Immunodeficiency Virus ("HIV") risk assessment, routine visits, health education, preconception and interconception care, pregnancy screening and counseling, follow up, care coordination, and referral. Include the type of professional(s) and paraprofessional(s) responsible for providing each service. Refer to Section 5, Attachment C, "Family Planning Services Summary of Visit Types" for further descriptions of visit types.
2. Screen for risk factors that could impact care or choice of contraceptive method. These risk factors include, but are not limited to: overweight, obesity, smoking, alcohol use, and drug use. Appropriate counseling will be provided, interventions initiated, and referrals will be made as needed and desired.
3. Obtain client's written informed voluntary consent to receive services. In addition, if a client chooses a prescription method of contraception, a method specific consent must be obtained. (See Section 1 Administrative Overview, Paragraph II, Website Reference for Federal Program Guidelines ["FPG"], page 16.)

4. Assure client confidentiality, as required by the federal and state Privacy Acts, particularly for at-risk populations such as adolescents.
5. Maintain written policies and protocols for client education. Family planning client education and counseling must be documented in the client record. (See Section 1 Administrative Overview, Paragraph II, Website Reference for FPG, page 17.)
6. Inform adolescents seeking contraceptive services about all methods of contraception, including abstinence. Adolescent counseling must include: information regarding safer sex practices and options to reduce risks for pregnancy and STDs such as HIV; resisting sexual coercion; mandated reporting laws; and encouragement of family involvement. (See Section 1 Administrative Overview, Paragraph II, Website Reference for Title X FPG, page 25 and Attachment D, Title X Assurance of Compliance.)
7. Adopt or develop policies and protocols to address intimate partner violence and sexual assault. The protocols shall address screening and assessment, intervention, documentation, staff training, and follow up.
8. Facilitate community awareness of and access to family planning services by implementing activities whereby FP services are made known to the community. There must be a written plan of action, including an annual estimation of the number of individuals in the community to be contacted with clinic and FP related information. The applicant must collaborate with FP community health educators to increase the educator's knowledge about access to clinical care. (See Section 1 Administrative Overview; Paragraph II, Website Reference for FPG, pages 11-12.)

B. Management Requirements

1. Applicants shall describe how they will fulfill the personnel requirements of the Title X Program. Also, the applicant shall keep FPP informed of personnel changes that impact the program. (See Section 2, Paragraph III, B. 1.)
2. Applicants shall describe how they will administratively fulfill the requirements of the Title X Program.
 - a. Designate a FP contact person who will be the liaison between the FPP and the applicant.
 - b. Attend Quarterly Videoconference meetings held in collaboration with family planning community health educators. These provider meetings will include appropriate training and opportunities to

strengthen approaches to increase utilization and access to family planning services statewide The FP contact person or the contact person's alternate must attend all four meetings a year.

- c. Comply with Federal regulations regarding the use of Title X clients in research. (See Section 1 Administrative Overview; Paragraph II, Website Reference for Title 45 CFR, Part 46.)
 - d. Provide family planning services to clients solely on a voluntary basis. Individuals must not be subjected to coercion to receive services or to use or not to use any particular method of birth control. Acceptance of family planning services must not be a prerequisite for a client to be eligible for, or to receive any other service or assistance from or participation in any other programs of the applicant. (Administrative Overview, Paragraph II, Website Reference for FPG, Page 5 and Attachment D, Title X Assurance of Compliance.)
 - e. Adopt or develop workplace violence guidelines to assure safety of employees, clients and visitors.
 - f. Acknowledge the DOH, Maternal and Child Health Branch, Women's Health Section, FPP, and Title X as the applicant's program sponsors. This acknowledgement shall appear on all applicants' printed materials for which the DOH is a program sponsor.
3. The applicant shall describe how they will fulfill the financial management requirements of the Title X Program that meets the standards specified in Subpart C of 45 Code of Federal Regulations ("CFR") Part 74 or Subpart C of 45 CFR Part 92, and which complies with Federal standards to safeguard the use of funds.
 - a. Documentation and records of all income and expenditures must be maintained as required.
 - b. Describe current policies and procedures for charging, billing, and collecting funds for the services provided by the project or develop and implement new policies and procedures as appropriate.
 4. Billing and collection procedures must have the following characteristics:
 - a. Clients must not be denied project services or be subjected to any variation in quality of services because of the inability to pay.

- b. Charges must be based on cost analysis of all services provided by the project. At the time of services, clients who are responsible for paying any fee for their services must be given bills directly.
 - c. A schedule of discounts must be developed and implemented with sufficient proportional increments so that inability to pay is never a barrier to service. A schedule of discounts is required for individuals with family incomes between 101% and 250% of the federal poverty level.
 - d. Clients whose documented income is at or below 100% of the federal poverty level must not be charged, and projects must bill all third parties authorized or legally obligated to pay for services.
 - e. Bills to clients must show total charges less any allowable discounts.
 - f. Eligibility for discounts for minors who receive confidential services must be based on the income of the minor.
 - g. Fees must be waived for individuals with family incomes above 250% of the federal poverty level who, as determined by the service site project director, are unable, for good cause, to pay for family planning services.
6. Applicants shall describe their quality assurance program and plans for ongoing evaluation of their FP Program. The Applicant shall conform to established standards of care and practice, including, but not limited to, the following:
- a. Federal Program Guidelines for Project Grants for Family Planning Services, U.S Department of Health and Human Services, Office of Population Affairs, Office of Family Planning. (See Section 1 Administrative Overview, Paragraph II, Website Reference for FPG.)
 - b. Office of Population Affairs Program Instructional Series.
 - c. Uniform Requirements for Government and Non-Profits, 45CFR92 & 74.
 - d. Office of Management and Budget (“OMB”) Circulars, A-87, A-102, A-110, A-122, A-133.

- e. Hawaii Department of Health Family Planning Policies and Guidelines. (Available on request from the FPP RFP contact, Section 2, Paragraph II, F.)
 - f. Family Planning Services Summary of Visit Types. (Attachment C.)
 - g. Recognized professional organizations that establish national standards of care, e.g. American College of Obstetricians and Gynecologists (“ACOG”), the American Cancer Society (“ACS”), and the U.S. Preventive Services Task Force (“USPSTF”).
 - h. Current Centers for Disease Control and Prevention (“CDC”) and State and Regional STD Guidelines.
7. The applicants shall identify their baseline for the FP output and performance measures. The applicant shall formulate both reasonable and achievable performance objectives, and describe the approach to be taken in meeting these objectives for the multi-year contract period. Refer to Section 5, Attachment F and G. These tables must be completed and attached to the Application Proposal.

V. Financial

A. Pricing Structure

The applicant shall submit a cost proposal utilizing the pricing structure designated by the state purchasing agency. The cost proposal shall be attached to the Proposal Application. (See Section 2, Paragraph III, 7 and 8, pages 2-7 to 2-11.)

Budget forms, instructions and samples are located on the SPO website. (See Section 1 Administrative Overview, Paragraph II, Website Reference.)

The following budget form(s) shall be submitted with the Proposal Application:

SPO-H-205, 206A, 206B, 206C, 206D, 206E, 206F, 206G, 206H, 206I, 206J.

VI. Other

A. Litigation

The applicant shall disclose any pending litigation to which they are a party, including the disclosure of any outstanding judgment. If applicable, please explain.

Section 4

Proposal Evaluation

Section 4 Proposal Evaluation

I. Introduction

The evaluation of proposals received in response to the RFP will be conducted comprehensively, fairly and impartially. Structural, quantitative scoring techniques will be utilized to maximize the objectivity of the evaluation.

II. Evaluation Process

The procurement officer or an evaluation committee of designated reviewers selected by the head of the state purchasing agency or procurement officer shall review and evaluate the proposals. When an evaluation committee is utilized, the committee will be comprised of individuals with experience in, knowledge of, and program responsibility for program service and financing.

The evaluation will be conducted in three phases as follows:

- Phase 1 - Evaluation of Proposal Requirements.
- Phase 2 - Evaluation of Proposal Application.
- Phase 3 - Recommendation for Award.

Evaluation Categories and Thresholds

| <u>Evaluation Categories</u> | <u>Possible Points</u> |
|------------------------------------|------------------------|
| <i>Administrative Requirements</i> | |
| | |
| <i>Proposal Application</i> | |
| Program Overview | 0 Points |
| Experience and Capability | 20 Points |
| Project Organization and Staffing | 15 Points |
| Service Delivery | 55 Points |
| Financial | 10 Points |
| | |
| TOTAL POSSIBLE POINTS | 100 Points |

III. Evaluation Criteria

A. Phase 1 - Evaluation of Proposal Requirements

1. Administrative Requirements

- Application Checklist.
- Registration (if not pre-registered with the State Procurement Office).
- Federal Certifications.

2. Proposal Application Requirements

- Proposal Application Identification Form (Form SPO-H-200).
- Table of Contents.
- Program Overview.
- Experience and Capability.
- Project Organization and Staffing.
- Service Delivery.
- Financial (All required forms and documents).
- Program Specific Requirements (as applicable).

B. Phase 2 - Evaluation of Proposal Application (100 Points)

Program Overview:

The applicant has demonstrated a thorough understanding of the purpose and scope of the service activity. The goals and objectives are in alignment with the proposed service activity. The applicant has described how the proposed service is designed to meet the pertinent issues and problems related to the service activity.

No Points are assigned to Program Overview. The intent is to give the applicant an opportunity to orient evaluators as to the service(s) being offered.

A five (5)-point rating scale will be used to rate the proposal content. Only whole numbers will be assigned (1, 2, 3, 4, or 5), half numbers are not utilized in this five (5)-point rating scale. This scale is based on the semantic differential developed by William E. Arnold, James C. McCroskey, and Samuel V.O. Prichard of the University of Connecticut, as well as the Information Skills Rating Scale developed by the Oak Harbor Schools and Jamie McKenzie.

| | |
|--------------------------------|--|
| 5 – Outstanding | <ul style="list-style-type: none"> ▪ Each bullet identified and addressed clearly. ▪ Consistently exceeded required elements by clearly proposing additional services or strategies for implementation to achieve the RFP requirements. |
| 4 – Above Average | <ul style="list-style-type: none"> ▪ Bullets addressed clearly in subheading under the appropriate numbered heading. ▪ More than met expectations by providing additional details or specific examples of the services or strategies for implementation. |
| 3 – Satisfactory | <ul style="list-style-type: none"> ▪ Competent; general description of “what we do” for all required elements. ▪ No additional details, specific examples, or additional services or strategies to achieve RFP. |
| 2 – Marginally Adequate | <ul style="list-style-type: none"> ▪ Not all bullets or all components of a bullet were evident under the appropriate numbered heading of the RFP. ▪ Did not answer the question completely in terms of approach, strategies, services, or descriptions. |
| 1 – Unsatisfactory | <ul style="list-style-type: none"> ▪ Not all bullets or components of a bullet were addressed or evident in the proposal. ▪ Only reiterated the wording of RFP or other attached DOH materials. |

1. Experience and Capability (20 Points)

The State will evaluate the applicant’s experience and capability relevant to the proposal contract, which shall include:

a. Necessary Skills

- Demonstrated skills, abilities, and knowledge relating to the delivery of the proposed services. **2 Points**

- Demonstrate ability to work with various population groups, such as uninsured or underinsured persons, immigrants, males, persons with limited English proficiency, homeless persons, substance abusers, persons with disabilities, and adolescents. **2 Points**

- Demonstrate ability to incorporate cultural competency in the service delivery requirements. **1 Point**

- b. Experience**
 - Demonstrated FP experience with projects or contracts for the most recent five years that are pertinent to the proposed services. **2 Points**
 - Possess relevant skills, abilities, knowledge of, and experience related to delivery of proposed services. **1 Point**

- c. Quality Assurance and Evaluation**
 - Sufficiency of quality assurance and evaluation plans for the proposed services, including methodology. **2 Points**
 - Sufficiently describes quality assurance plans that include the following: data/billing forms and submission of invoices; staff supervision; meeting performance/output measures; and compliance with applicable guidelines. **2 Points**
 - Quality assurance plan describes an annual customer survey. The survey includes, at a minimum, questions regarding satisfaction with services; how did the patient find out about your service; were they referred by a FP Community Health Educator. **2 Points**

- d. Coordination of Services**
 - Demonstrated capability to coordinate services with other agencies and resources in the community. **4 Points**

- e. Facilities**
 - Adequacy of facilities relative to the proposed services. **3 Points**

1. ***Project Organization and Staffing (15 Points)***

The State will evaluate the applicant’s overall staffing approach to the services that shall include:

a. Staffing

- Proposed Staffing: That the proposed staffing pattern, client/staff ratio, and proposed caseload capacity is reasonable to insure viability of the FP and related preventive health services. **4 Points**
- Staff Qualifications: Minimum qualifications (including experience) for staff assigned to the program. **5 Points**

b. Project Organization

- Supervision and Training: Demonstrated ability to supervise, train, and provide administrative direction to staff relative to the delivery of the proposed services. **4 Points**
- Organization Chart: Approach and rationale for the structure, functions, and staffing of the proposed organization for the FP service activities and tasks. **2 Points**

3. ***Service Delivery (55 Points)***

Evaluation criteria for this section will assess the applicant’s approach to the service activities and management requirements outlined in the Proposal Application.

a. Services Activities

- The applicant clearly describes the clinical FP and related preventive health services including approach to provide comprehensive assessment, care coordination, health education, and referral for priority populations to be served. **15 Points**

- Adequacy of applicant’s community education and outreach plans, and projected number of individuals in the community to be contacted to facilitate community awareness of and access to family planning services. **15 Points**

b. Management Requirements (Output and Performance Objectives)

- Are the applicant’s performance objectives both reasonable and achievable, and approach is adequate to meet them. **8 Points**
- The applicant’s output measures are reasonably achievable and are in line with the Total Program Concept. **8 Points**
- The applicant adequately addresses the Total Program Concept. **9 Points**

4. Financial (10 Points)

a. Pricing structure based on cost based reimbursement:

- Personnel costs are reasonable and comparable to positions in the community. Non-personnel costs are reasonable and adequately justified. **3 Points**
- The budget fully supports the scope of service and requirements of the Request for Proposal. **4 Points**
- The applicant adequately describes cost reimbursement pricing structure. **3 Points**

C. Phase 3 - Recommendation for Award

Each notice of award shall contain a statement of findings and decision for the award or non-award of the contract to each applicant.

Section 5

Attachments

Attachment

Document

| | |
|---|--|
| A | Proposal Application Checklist |
| B | Proposal Application - Sample Table of Contents |
| C | Family Planning Services Summary of Visit Types |
| D | Title X Assurance of Compliance |
| E | Interpersonal Relationships between Staff and Clients/Patients (DOH Policy) |
| F | Table A – Performance Measures |
| G | Table B – Output Measures |
| H | FP 100 - Expenditure Report |
| I | Client Visit Record (CVR) |
| J | Quarterly Report Form |
| K | Table 14 - Family Planning Annual Report |
| L | Federal Certifications |

ATTACHMENT A

Proposal Application Checklist

The applicant's proposal must contain the following components in the order shown below. This checklist must be signed, dated and returned to the state purchasing agency as part of the Proposal Application. *SPO-H forms are located on the web at <http://www.spo.hawaii.gov> Click *Procurement of Health and Human Services* and *For Private Providers*.*

| Item | Reference in RFP | Format/Instructions Provided | Required by Purchasing Agency | Completed by Applicant |
|--|-------------------------|---|--------------------------------------|-------------------------------|
| General: | | | | |
| Proposal Application Identification Form (SPO-H-200) | Section 1, RFP | SPO Website* | X | |
| Proposal Application Checklist | Section 1, RFP | Attachment A | X | |
| Table of Contents | Section 5, RFP | Section 5, RFP | X | |
| Proposal Application (SPO-H-200A) | Section 3, RFP | SPO Website* | X | |
| Registration Form (SPO-H-100A) | Section 1, RFP | SPO Website* | (Required if not Registered) | |
| Tax Clearance Certificate (Form A-6) | Section 1, RFP | Dept. of Taxation Website (Link on SPO website)* | | |
| Cost Proposal (Budget) | | | | |
| SPO-H-205 | Section 3, RFP | SPO Website* | X | |
| SPO-H-205A | Section 3, RFP | SPO Website* Special Instructions is applicable, Section 5 | | |
| SPO-H-205B | Section 3, RFP | SPO Website* Special Instructions, Section 5 | | |
| SPO-H-206A | Section 3, RFP | SPO Website* | X | |
| SPO-H-206B | Section 3, RFP | SPO Website* | X | |
| SPO-H-206C | Section 3, RFP | SPO Website* | X | |
| SPO-H-206D | Section 3, RFP | SPO Website* | | |
| SPO-H-206E | Section 3, RFP | SPO Website* | | |
| SPO-H-206F | Section 3, RFP | SPO Website* | | |
| SPO-H-206G | Section 3, RFP | SPO Website* | | |
| SPO-H-206H | Section 3, RFP | SPO Website* | X | |
| SPO-H-206I | Section 3, RFP | SPO Website* | X | |
| SPO-H-206J | Section 3, RFP | SPO Website* | | |
| Federal Certifications | | | | |
| Debarment & Suspension | | Section 5, RFP | X | |
| Drug Free Workplace | | Section 5, RFP | X | |
| Lobbying | | Section 5, RFP | X | |
| Program Fraud Civil Remedies Act | | Section 5, RFP | X | |
| Environmental Tobacco Smoke | | Section 5, RFP | X | |
| Program Specific Requirements: | | | | |
| Title X Assurance of Compliance | | Section 5, RFP | X | |
| Interpersonal Relationships | | Section 5, RFP | X | |
| Assurances-Non-Construction Programs | | Section 5, RFP | X | |

 Authorized Signature

 Date

SAMPLE

ATTACHMENT B

**Proposal Application
Table of Contents**

| | | |
|-------------|--|-----------|
| I. | Program Overview..... | 1 |
| II. | Experience and Capability | 1 |
| | A. Necessary Skills | 2 |
| | B. Experience | 4 |
| | C. Quality Assurance and Evaluation..... | 5 |
| | D. Coordination of Services | 6 |
| | E. Facilities..... | 6 |
| III. | Project Organization and Staffing | 7 |
| | A. Staffing | 7 |
| | 1. Proposed Staffing..... | 7 |
| | 2. Staff Qualifications | 9 |
| | B. Project Organization | 10 |
| | 1. Supervision and Training..... | 10 |
| | 2. Organization Chart (Program & Organization-wide) (See Attachments for Organization Charts) | |
| IV. | Service Delivery | 12 |
| V. | Financial | 20 |
| | See Attachments for Cost Proposal | |
| VI. | Litigation | 20 |
| VII. | Attachments | |
| | A. Cost Proposal | |
| | SPO-H-205 Proposal Budget | |
| | SPO-H-206A Budget Justification - Personnel: Salaries & Wages | |
| | SPO-H-206B Budget Justification - Personnel: Payroll Taxes and Assessments, and Fringe Benefits | |
| | SPO-H-206C Budget Justification - Travel: Interisland | |
| | SPO-H-206H Budget Justification – Program Activities | |
| | SPO-H-206I Budget Justification – Equipment Purchases | |
| | B. Other Financial Related Materials | |
| | Financial Audit for fiscal year ended June 30, 2004 | |
| | C. Organization Chart | |
| | Program | |
| | Organization-wide | |
| | D. Performance and Output Measurement Tables | |
| | Table A | |
| | Table B | |
| | E. Program Specific Requirements | |

ATTACHMENT C

**FAMILY PLANNING SERVICES
SUMMARY OF VISIT TYPE**

VISIT TYPE & DESCRIPTION

Comprehensive Family Planning (FP) Exam for Females

- Visit with relevant medical history, height and weight, blood pressure, physical examination including breast and bimanual pelvic exams, Pap smear (initial and as indicated), chlamydia & gonorrhea testing, and other STD/ HIV screening as indicated, colorectal screening as indicated.
- Laboratory tests advised in prescribing information for specific method of contraception must be provided.
- Informed consent and when applicable, a method specific consent form signed by client.
- Birth control, STD and HIV education & counseling.
- Birth control supply for up to one (1) year.
- Importance of health maintenance screening procedures.
- Referral for other medical/social services as indicated.
- Suggested number of visits: One per year.

Comprehensive Family Planning Exam for Males

- Visit with relevant medical history, height, weight, blood pressure, physical examination including genitalia, prostate, instructions for testicular self exam (TSE), R/O hernias, colorectal exam as indicated. STD/HIV screening as indicated.
- Importance of health maintenance screening procedures.
- Birth control, STD and HIV education & counseling.
- Birth control supply.
- Referral for other medical/social services as indicated.
- Suggested number of visits: One per year.

FP Procedure

- IUD or Contraceptive Implant Insertion.
- IUD or Contraceptive Implant Removal.
- Diaphragm or cervical cap fitting.

VISIT TYPE & DESCRIPTION

Routine FP Visit

Contraceptive Management

- Visit includes weight and blood pressure; follow-up on correct, consistent use of birth control method; evaluate for side effects; re-supply contraceptive as needed, including provision of contraceptive injection; assess change in risk for STDs/HIV.

FP Problem

- Assessment and management of problem related to contraceptive use; rule out complications; change method; re-supply as needed; family planning education & counseling.

Pregnancy Test

- History, pregnancy test, counseling on test result, family planning information, education, and referral.
- For clients with a negative pregnancy test:
 - < If pregnancy is undesired, provide contraceptive method and information, and recommend return for on-going effective contraceptive method.
 - < If pregnancy is desired, counsel client about her own fertility and recommend physical exam if none in the last year.
- For clients with a positive pregnancy test:
 - < offer non-directive counseling on pregnancy options,
 - < provide information on good health practices during early pregnancy, and
 - < recommend physical exam within 15 days.

Emergency Contraception

- Provision of emergency contraception, family planning education & counseling about on-going, more effective contraception.

FP Education Visit

- Provide family planning related information, support, education, and/or referral.

ATTACHMENT D

TITLE X ASSURANCE OF COMPLIANCE

_____ assures that it will:
(Name of Organization)

1. Provide services without subjecting individuals to any coercion to accept services or coercion to employ or not to employ any particular methods of family planning. Acceptance of services must be solely on a voluntary basis and may not be made a prerequisite to eligibility for, or receipt of, any other services.
2. Provide services in a manner which protects the dignity of the individual.
3. Provide services without regard to religion, race, color, national origin, handicapping condition, age, sex, number of pregnancies, or marital status.
4. Not provide abortions as a method of family planning.
5. Provide that priority in the provision of services will be given to persons from low income families.

Further: _____ certifies that it will:
(Name of Organization)

1. Encourage family participation in the decision of the minor seeking family planning services.
2. Provide counseling to minors on how to resist coercive attempts to engage in sexual activities.

From Part 59—Grants for Family Planning Services, Subpart A, Section 59.5(a) 2, 3, 4, 5, and 6.

(Signature)

(Title)

(Date)

ATTACHMENT E

LINDA LINGLE
GOVERNOR OF HAWAII



CHIYOME L. FUKINO, M.D.
DIRECTOR OF HEALTH

STATE OF HAWAII
DEPARTMENT OF HEALTH
P. O. BOX 3378
HONOLULU, HI 96801-3378

In reply, please refer to:
File:

INTRA-DEPARTMENTAL DIRECTIVE 04-01
May 3, 2004 Page 1 of 5

TO: All Deputies, Division and Branch Chiefs, Staff Officers, District Health Officers, and Administrators of Attached Agencies

FROM: Chiyome Leinaala Fukino, M.D.
Director of Health *Chiyome Fukino*

SUBJECT: **INTERPERSONAL RELATIONSHIPS BETWEEN STAFF AND CLIENTS/PATIENTS**

04-1.1 **PURPOSE**

This directive provides the policy for the State of Hawaii, Department of Health on interpersonal relationships between staff and clients/patients.

04-1.2 **POLICY**

- A. Staff shall not use their professional position to exploit others for any reason.
- B. Staff shall avoid engaging in dual/multiple relationships with clients/patients or former clients/patients. When dual/multiple relationships are unavoidable, staff shall take steps ensure that the nature of the dual/multiple relationship shall neither harm nor exploit the client/patient.
- C. Sexual relationships with any client/patient or former client/patient are prohibited. Staff shall not have financial relationships with clients/patients or former clients/patients.

Intra-Departmental Directive 04-01
May 3, 2004 Page 2 of 5

- D. Staff are prohibited from engaging in sexual relationships with clients/patients' relatives or other individuals with whom clients/patients maintain close personal relationships, or to whom clients/patients are reliant upon. Staff are required to set clear, appropriate and culturally sensitive boundaries.
- E. Staff shall neither initiate, assume, nor maintain a treatment relationship to individuals with whom they have had prior sexual relationships. Staff shall inform their supervisor if there have been past relationships with potential clients/patients and arrange to have the care of such patients/clients provided by another qualified staff person.
- F. Staff shall not engage in physical contact with clients/patients when there is a possibility of psychological harm to the clients/patients as a result of the contact (such as cradling or caressing clients/patients). In providing services, staff who are required to have physical contact with clients/patients are responsible for setting clear, appropriate and culturally sensitive boundaries that govern such physical contact.
- G. Staff who anticipate the potential for sexual relationships with former clients/patients shall consult in depth with their supervisors, exploring the various risks and concerns.

04-1.3 **SCOPE**

This directive applies to all Department of Health employees, including volunteers, who provide treatment and/or services and individuals or agencies that are contracted to provide treatment and/or services on behalf of the Department of Health.

04-1.4 **DEFINITIONS**

Clients/Patients: Persons under observation, care, treatment, or receiving services.

Department: Department of Health

Director: Director of Health

Intra-Departmental Directive 04-01
May 3, 2004

Page 3 of 5

| | |
|------------------------------|---|
| Dual/multiple relationships: | When an employee has, or has had, more than one relationship with a patient or client, either presently or in the past. These may include professional, business, social, or personal relationships. Dual/multiple relationships can occur simultaneously or consecutively. |
| Staff: | Department employees, including volunteers, and individuals or agencies that are contracted to provide services on behalf of the Department. |
| Health: | Includes physical and mental health. |
| Providers: | Any persons, public or private vendors, agencies, or business concerns authorized by the department to provide health care, services, or activities. |
| Services: | Appropriate assistance provided to a person with a medical illness, developmental disability, mental illness, substance abuse or dependency disorder, or mental retardation. These services include, but are not restricted to assessment, case management, care coordination, treatment, training, vocational support, testing, day treatment, dental treatment, residential treatment, hospital treatment, developmental support, respite care, domestic assistance, attendant care, habilitation, rehabilitation, speech therapy, physical therapy, occupational therapy, nursing counseling, family therapy or counseling, interpretation, transportation, psychotherapy, and counseling to the person and/or to the person's family, guardian or other appropriate representative. |
| Treatment: | The broad range of services and care, including diagnostic valuation, medical, psychiatric, psychological, and social service care, vocational rehabilitation, career counseling, and other special services which may be extended to a person in need or with a disabling condition. |

Intra-Departmental Directive 04-01
May 3, 2004 Page 4 of 5

04-1.5 **RESPONSIBILITIES**

- A. **Director:** Insure this policy is maintained, interpreted, updated, and communicated to all program managers.
- B. **Deputy Directors:** Insure this policy is communicated to, understood and implemented by program managers within their administrations, and insure needed revisions of this policy are communicated to the Director.
- C. **Program Managers:**
 - (1) Insure this policy is communicated to and understood by all vendors, providers, or contractors, and insert a reference to this policy in appropriate contracts.
 - (2) Insure this policy is enforced.
 - (3) Investigate alleged or reported infractions of this policy and take corrective actions as may be indicated.
 - (4) Recommend needed changes to this policy to their Deputy Directors.
- D. **Employees:** Comply with this policy and report alleged infractions of this policy to their supervisors or superiors.
- E. **Providers:** Insure this policy is communicated, understood, and implemented.

04-1.6 **PROVISO**

If there is a conflict between this policy and a collective bargaining agreement, the collective bargaining agreement shall prevail.

Intra-Departmental Directive 04-01
May 3, 2004 Page 5 of 5

04-1.7 **REFERENCES**

- A. Discrimination in Public Accommodations, Chapter 489, Hawaii Revised Statutes, as amended.
- B. Fair treatment, Section 84-13, Hawaii Revised Statutes, as amended.
- C. Rights of persons with developmental or mental retardation, Section 333F-8, Hawaii Revised Statutes, as amended.
- D. Rights of recipients of mental health services, Chapter 334E, Hawaii Revised Statutes, as amended.
- E. Sex Discrimination, Title 12, Chapter 46, Subchapter 4, Hawaii Administrative Rules, as amended.
- F. Disability Discrimination, Chapter 46, Subchapter 9, Hawaii Administrative Rules.

This document should be placed in the Personnel Manual of Policies and Procedures under Section 11, SUBJECT: EMPLOYEE RELATIONS.

ATTACHMENT F

**Table A - Performance Measures
Family Planning Services**

| Column A | Column B | Column C | Column D | Column E |
|---|---|---|---|--|
| Performance Measure Benchmark | Baseline for FY 2007 | Annual Performance Objectives for Fiscal Year 2009 | Annual Performance Objectives for Fiscal Year 2010 | Applicant's approach in meeting the performance objectives, including the methodology proposed for data collection and reporting (Attach additional sheets as necessary) |
| 1. 90% of female patients age 25 years old and under received a comprehensive examination and at least one test for chlamydia within the last 12 months. | _____ % of female patients age 25 years old and under received a comprehensive examination and at least one test for chlamydia within the last 12 months. | We estimate _____ % of female patients age 25 years old and under received a comprehensive examination and at least one test for chlamydia within the last 12 months. | We estimate _____ % of female patients age 25 years old and under received a comprehensive examination and at least one test for chlamydia within the last 12 months. | |
| 2. At least 95% of all patients receiving a birth control method have chart documentation to show that adequate information was provided with the method. | a) _____ % of all patients receiving a birth control method have chart documentation to show that adequate information was provided with the method. b) _____ % of female patients receiving a birth control method have chart documentation which shows that adequate information was provided with the method. c) _____ % of male patients receiving a birth control method have chart documentation which shows that adequate information was provided with the method. | a) We estimate _____ % of all patients receiving a birth control method have chart documentation to show that adequate information was provided with the method. b) We estimate _____ % of female patients receiving a birth control method have chart documentation which shows that adequate information was provided with the method. c) We estimate _____ % of male patients receiving a birth control method have chart documentation which shows that adequate information was provided with the method. | a) We estimate _____ % of all patients receiving a birth control method have chart documentation to show that adequate information was provided with the method. b) We estimate _____ % of female patients receiving a birth control method have chart documentation which shows that adequate information was provided with the method. c) We estimate _____ % of male patients receiving a birth control method have chart documentation which shows that adequate information was provided with the method. | |
| 3. 100% of all patients under 18 years of age seeking family planning services without parental knowledge receive counseling encouraging involvement of parent(s)/guardian in decisions regarding sexuality and contraception. | a) _____ % of all minor patients seeking FP services without parental knowledge or participation receive counseling encouraging involvement of a parent/guardian in decisions regarding sexuality and contraception. b) _____ % of all female patients seeking FP | a) We estimate _____ % of all minor patients seeking FP services without parental knowledge or participation receive counseling encouraging involvement of a parent/guardian in decisions regarding sexuality and contraception. b) We estimate _____ % of all female patients seeking | a) We estimate _____ % of all minor patients seeking FP services without parental knowledge or participation receive counseling encouraging involvement of a parent/guardian in decisions regarding sexuality and contraception. b) We estimate _____ % of all female patients | |

| Column A | Column B | Column C | Column D | Column E |
|-------------------------------|--|---|---|--|
| Performance Measure Benchmark | Baseline for FY 2007 | Annual Performance Objectives for Fiscal Year 2009 | Annual Performance Objectives for Fiscal Year 2010 | Applicant's approach in meeting the performance objectives, including the methodology proposed for data collection and reporting (Attach additional sheets as necessary) |
| | <p>services without parental knowledge or participation receive counseling encouraging involvement of a parent/guardian in decisions regarding sexuality and contraception.</p> <p>c) _____% of all male patients seeking FP services without parental knowledge or participation receive counseling encouraging involvement of a parent/guardian in decisions regarding sexuality and contraception.</p> | <p>FP services without parental knowledge or participation receive counseling encouraging involvement of a parent/guardian in decisions regarding sexuality and contraception.</p> <p>c) We estimate _____% of all male patients seeking FP services without parental knowledge or participation receive counseling encouraging involvement of a parent/guardian in decisions regarding sexuality and contraception.</p> | <p>seeking FP services without parental knowledge or participation receive counseling encouraging involvement of a parent/guardian in decisions regarding sexuality and contraception.</p> <p>c) We estimate _____% of all male patients seeking FP services without parental knowledge or participation receive counseling encouraging involvement of a parent/guardian in decisions regarding sexuality and contraception.</p> | |

ATTACHMENT H

EXPENDITURE REPORT

Provider:
ASO-LOG No#
Month:

| BUDGET CATEGORIES | CURRENT MONTH FP COST | TOTAL CONTRACT BUDGETED | COMMENTS EXPLANATION |
|--|------------------------------|--------------------------------|--|
| A. PERSONNEL COST | | | |
| 1. Salaries | | | |
| 2. Payroll Taxes & Assessments | | | |
| 3. Fringe Benefits | | | |
| TOTAL PERSONNEL COST | 0.00 | | |
| B. CURRENT EXPENSES | | | |
| 1. Airfare, Inter-Island | | | |
| 3. Audit Services | | | |
| 4. Contractual Services - Administrative | | | |
| 5. Contractual Services - Subcontracts | | | |
| 6. Insurance | | | |
| 7. Lease/Rental of Equipment | | | |
| 8. Lease/Rental of Motor Vehicle | | | |
| 9. Lease/Rental of Space | | | |
| 10. Mileage | | | |
| 11. Postage, Freight & Delivery | | | |
| 12. Publication & Printing | | | |
| 13. Repair & Maintenance | | | |
| 14. Staff Training | | | |
| 15. Substance/Per Diem | | | |
| 16. Supplies Medical | | | |
| 17. Supplies Office | | | |
| 18. Supplies Program | | | |
| 17. Telecommunication | | | |
| 18. Transportation | | | |
| 19. Utilities | | | |
| 20 | | | |
| 21 | | | |
| 22 | | | |
| TOTAL CURRENT EXPENSES | 0.00 | | |
| C. EQUIPMENT PURCHASES | | | |
| D. | | | |
| E. TOTAL EXPENSES | 0.00 | | |
| PROGRAM INCOME: | | | Report Prepared By: |
| (a) Client Collections/Self Pay | | | Name (Please type or print) |
| (b) Third Party Payers | | | Signature of Authorized Official |
| (1) Medicaid (Title XIX) | | | Name and Title of Authorized Official (Please type or print) |
| (2) Medicare (Title XVIII) | | | |
| (3) CHIP | | | |
| (4) QUEST | | | |
| (5) Private Health Insurance | | | |
| Total - Third Party Payers | 0.00 | | For Official Use Only |
| (c) Other Revenue | | | |
| (1) Local Government | | | |
| (2) Other (Specify: 330/Donations) | | | |
| Total - Other Revenue | 0.00 | | |
| F. TOTAL REVENUE | 0.00 | | Signature of Fiscal Reviewer |
| G. TOTAL CURRENT DOH BILLING | | | |

ATTACHMENT I

Client ID (REQUIRED): _____ Date of Visit: _____ / _____ / _____

Family Planning Client Visit Record (CVR) Hawaii Department of Health

Last Name: _____ First Name: _____

Date of Birth: _____ / _____ / _____ Zip Code _____ Sex: F ___ M ___

Citizen Status: U.S. Citizen Immigrant Compact States Refugee Student Visa Tourist Visa Other

Hispanic or Latino Origin: No Yes

Ethnicity (select one or more):

- | | | | |
|---|---|---|---|
| <input type="checkbox"/> African American | <input type="checkbox"/> Filipino | <input type="checkbox"/> Marshallese | <input type="checkbox"/> Vietnamese |
| <input type="checkbox"/> American Indian/Alaskan Native | <input type="checkbox"/> Hawaiian/Part Hawaiian | <input type="checkbox"/> Micronesian | <input type="checkbox"/> Other Asian |
| <input type="checkbox"/> Caucasian/White | <input type="checkbox"/> Japanese | <input type="checkbox"/> Portuguese | <input type="checkbox"/> Other Pacific Islander |
| <input type="checkbox"/> Chinese | <input type="checkbox"/> Korean | <input type="checkbox"/> Puerto Rican/Mexican/Cuban | <input type="checkbox"/> Other _____ |
| | | <input type="checkbox"/> Samoan | <input type="checkbox"/> Unknown/Refused |

STAFF TO COMPLETE

Limited English Proficiency: No Yes

Income Level (check one): 100% and below 126 - 150% 176 - 200% Over 250%
 101 - 125% 151 - 175% 201 - 250%

Insurance Status (check one): Uninsured Public Health Ins Private Health Ins Military Insurance
If insurance not used, mark reason: Ins not used due to confidentiality Ins had no FP coverage

CLINICIAN TO COMPLETE

Provider of Service (check one): NP, CNM, or PA Physician RN/LPN Other Provider

Goal for this visit: Avoid Pregnancy Seek Pregnancy

Risk Factors: Overweight Obese Smoking Alcohol Use Drug Use DV/Intimate Partner Violence

Type of Visit (check one): Comprehensive Exam Routine FP Procedure FP Education

SERVICES THIS VISIT

- | | | | | |
|--|---|--|--|---|
| <input type="checkbox"/> BP Screening | Pregnancy Test <input type="checkbox"/> Negative-Planned <input type="checkbox"/> Negative-Unplanned <input type="checkbox"/> Positive - Planned <input type="checkbox"/> Positive - Unplanned | HIV/STD Screening <input type="checkbox"/> Chlamydia <input type="checkbox"/> Gonorrhea <input type="checkbox"/> HIV-Confidential <input type="checkbox"/> Syphilis | Procedures <input type="checkbox"/> Cervical/Diaphragm Fitting <input type="checkbox"/> IUD Insertion/Removal <input type="checkbox"/> Implant Insertion/Removal | Counseling <input type="checkbox"/> FP Ed/Counsel <input type="checkbox"/> Preconception <input type="checkbox"/> Adolescent Counseling <input type="checkbox"/> HIV/STD Ed/Counseling <input type="checkbox"/> HIV Results/Counseling <input type="checkbox"/> Infertility/Level one <input type="checkbox"/> Other Counseling |
| <input type="checkbox"/> Clinical Breast Exam <input type="checkbox"/> WNL <input type="checkbox"/> Referred | <input type="checkbox"/> Pelvic Exam <input type="checkbox"/> Pap Smear | <input type="checkbox"/> Emergency Contraception <input type="checkbox"/> STD Treatment | | |
| <input type="checkbox"/> Testicular Exam | | | | |

PRIMARY CONTRACEPTIVE METHOD AT END OF VISIT -- check only one - most effective method

- | | | | |
|---|---|--|---|
| <input type="checkbox"/> Abstinence | <input type="checkbox"/> Contraceptive Sponge | <input type="checkbox"/> Oral Contraceptive | No Method |
| <input type="checkbox"/> Cervical Cap/Diaphragm | <input type="checkbox"/> Hormonal Implant | <input type="checkbox"/> Spermicide (used alone) | <input type="checkbox"/> Currently Pregnant |
| Condoms | <input type="checkbox"/> Hormonal Patch | <input type="checkbox"/> Vaginal Ring | <input type="checkbox"/> Seeking Pregnancy |
| <input type="checkbox"/> Male | Injection | <input type="checkbox"/> Vasectomy | <input type="checkbox"/> Relying on Female Partner's Method |
| <input type="checkbox"/> Male and Spermicide | <input type="checkbox"/> 3-Month Injection | <input type="checkbox"/> Female Surgical Sterilization | <input type="checkbox"/> Relying on Male Partner's Method |
| <input type="checkbox"/> Female | <input type="checkbox"/> 1-Month Injection | <input type="checkbox"/> Fertility Awareness Method | <input type="checkbox"/> Other Reason |
| <input type="checkbox"/> Female and Spermicide | <input type="checkbox"/> IUD | <input type="checkbox"/> Other Female Method | _____ |
| | | <input type="checkbox"/> Other Male Method | |

INITIALS OF PERSON COMPLETING FORM: _____

ATTACHMENT J

Agency: _____

**Family Planning Program
Clinical & Community Education Quarterly Reports**

| | | | | |
|----------------|-------------------|-------------------|------------------|------------------|
| | <u>Quarter 1</u> | <u>Quarter 2</u> | <u>Quarter 3</u> | <u>Quarter 4</u> |
| (choose one) | July – Sept. | Oct. – Dec. | Jan. – Mar. | Apr. – June |
| (fill in year) | 200__ | 200__ | 2007__ | 200__ |
| due by: | October 31 | January 31 | April 30 | July 31 |

FP Clinical Quarterly Report Data

| Screening Activity | Number of Tests |
|--|-----------------|
| Number of Pap tests with an ASC or higher result * | |
| Number of Pap tests with a HSIL or higher result * | |
| <i>* Based on The 2001 Bethesda System (Abridged) available at http://bethesda2001.cancer.gov/terminology.html</i> | |
| Number of HIV – Positive confidential tests | |
| Number of HIV- Anonymous tests done | |

Community Education Quarterly Report Data

| | |
|--|----------|
| Community Education/Outreach Activities Report | Attached |
|--|----------|

Declaration: I declare that this report has been examined by me and to the best of my knowledge and belief is a true, correct, and complete report made in good faith for the period stated.

Prepared by: _____
(NAME AND TITLE)

Date: _____

| |
|---|
| FP OFFICE USE ONLY Reviewed by: _____ Date: _____ |
|---|

**EDUCATION/OUTREACH ACTIVITIES
QUARTERLY REPORT FORM
FAMILY PLANNING INFORMATION SERVICES**

AGENCY NAME: _____

QUARTER _____ **YEAR** _____

1. EDUCATION/OUTREACH PROGRESS:

Indicate 1st.-4th. & Fiscal Year

DIRECT CONTACTS

| Quarterly Projections | Quarterly Actual | Year-to-Date Projections | Year-to-Date Actual | Year-to-Date +/- Percent |
|-----------------------|------------------|--------------------------|---------------------|--------------------------|
| | | | | |

INDIRECT CONTACTS

| Quarterly Projections | Quarterly Actual | Year-to-Date Projections | Year-to-Date Actual | Year-to-Date +/- Percent |
|-----------------------|------------------|--------------------------|---------------------|--------------------------|
| | | | | |

2. EDUCATION/OUTREACH ACTIVITIES FOR QUARTER:

| General Categories DIRECT CONTACTS | (a) # of DIRECT Programs, Classes, etc. made | (b) # of Individuals contacted DIRECTLY | | |
|---|--|---|--------|-------|
| | | Male | Female | Total |
| Schools | | | | |
| Clubs, Health & Social Service Agencies, etc. | | | | |
| Clinics(Other than users) | | | | |
| *Abstinence Based Programs (Teens) | | | | |
| *Hard to Reach Populations (Specify) | | | | |
| *Title X Priorities/Mandates (Specify) | | | | |
| *Special Population (Specify) | | | | |
| COLUMN TOTALS | | | | |

| Post Test (1 of 4 or 25% of programs) | Number of Tests | 25% of Participants should Demonstrate Knowledge |
|--|---|---|
| | | |
| General Categories INDIRECT CONTACTS | (a) # of fairs, placement announcements | (b) Estimated # of individual exposure to effort (General Population) |
| Health Fairs/Exhibits/Displays | | |
| Posters, flyers, business cards, etc. | | |
| Mass media (T.V., radio, newspaper, periodicals, etc.) | | |
| Other: (Specify) | | |
| TOTALS: | | |

3. HEALTH EDUCATION Technical Assistance: IDENTIFY ANY EDUCATIONAL AND OUTREACH TECHNICAL ASSISTANCE NEEDED. CONTINUE ON ANOTHER SHEET OF PAPER AS NECESSARY.

ATTACHMENT K

FAMILY PLANNING ANNUAL REPORT (FPAR)

**Table 14
Revenue Report**

| FEDERAL GRANTS | | AMOUNT | |
|-----------------------------|---|------------------------|-----------------------------|
| 1 | Title X (family planning services) | \$ | |
| 2 | Bureau of Primary Health Care (BPHC) | \$ | |
| 3 | Other federal grant (Specify: _____) | \$ | |
| 4 | Other federal grant (Specify: _____) | \$ | |
| 5 | TOTAL- FEDERAL GRANTS (SUM ROWS 1 to 4) | \$ | |
| PAYMENT FOR SERVICES | | | |
| 6 | Total Client Collections/Self-Pay | \$ | |
| 7 | Third-Party Payers | PREPAID (A) | NOT PRE-PAID (B) |
| 7a | Medicaid (Title XIX) | \$ | \$ |
| 7b | Medicare (Title XVIII) | \$ | \$ |
| 7c | State Children's Health Insurance Program (state CHIP) | \$ | \$ |
| 7d | Other public health insurance | \$ | \$ |
| 7e | Private health insurance | \$ | \$ |
| 8 | TOTAL - THIRD-PARTY PAYERS (SUM ROWS 7a TO 7E) | \$ | \$ |
| 9 | TOTAL - PAYMENT FOR SERVICES (SUM ROW 6 + CELL 8A + CELL 8B) | \$ | |
| OTHER REVENUE | | | |
| 10 | Title V (MCH Block Grant) | \$ | |
| 11 | Title XX (Social Services Block Grant) | \$ | |
| 12 | Temporary Assistance for Needy Families (TANF) | \$ | |
| 13 | Local government grants and contracts | \$ | |
| 14 | Other (Specify: _____) | \$ | |
| 15 | Other (Specify: _____) | \$ | |
| 16 | Other (Specify: _____) | \$ | |
| 17 | Other (Specify: _____) | \$ | |
| 18 | TOTAL- OTHER REVENUE (SUM ROWS 10 TO 17) | \$ | |
| 19 | TOTAL REVENUE (SUM ROWS 5 + 9 + 18) | \$ | |

ATTACHMENT L

CERTIFICATIONS

1. CERTIFICATION REGARDING DEBARMENT AND SUSPENSION

By signing and submitting this application, the prospective primary participant as defined in 45 CFR Part 76 is providing certification regarding debarment and suspension as set out in Appendix A of 45 CFR Part 76. The applicant agrees that by submitting this application it will include, without modification, the clause in Appendix B of 45 CFR Part 76 in all lower tier covered transaction and in all solicitations for lower tier covered transactions in accordance with 45 CFR Part 76. Should the applicant not certify regarding debarment and suspension, an explanation as to why should be placed after the assurances page in the application package.

2. CERTIFICATION REGARDING DRUG-FREE WORKPLACE REQUIREMENTS

By signing and submitting this application, the applicant is providing certification regarding drug-free workplace requirements as set out in Appendix C to 45 CFR Part 76. For purposes of notification of criminal drug convictions, the DHHS has designated the following central point for receipt of such notices:

Division of Grants Policy and Oversight
Office of Management and Acquisition
Department of Health and Human Services
Room 517-D
200 Independence Avenue, S.W.
Washington, D.C. 20201

3. CERTIFICATION REGARDING LOBBYING

Title 31, United States Code, Section 1352, entitled "Limitation on use of appropriated funds to influence certain Federal contracting and financial transactions," generally prohibits recipients of Federal grants and cooperative agreements from using Federal (appropriated) funds for lobbying the Executive or Legislative Branches of the Federal Government in connection with a SPECIFIC grant or cooperative agreement. Section 1352 also requires that each person who requests or receives a Federal grant or cooperative agreement must disclose lobbying undertaken with non-Federal (non-appropriated) funds. These requirements apply to grants and cooperative agreements EXCEEDING \$100,000 in total costs (45 CFR Part 93).

By signing and submitting this application, the applicant is providing certification set out in Appendix A to 45 CFR Part 93.

4. CERTIFICATION REGARDING PROGRAM FRAUD CIVIL REMEDIES ACT (PFCRA)

The authorized official signing for the applicant organization certifies that the statements herein are true, complete, and accurate to the best of his or her knowledge, and that he or she is aware that any false, fictitious, or fraudulent statements or claims may subject him or her to criminal, civil, or administrative penalties. The official signing agrees that the applicant organization will comply with the DHHS, PHS, and OPHS terms and conditions of award if a grant is awarded as a result of this application.

5. CERTIFICATION REGARDING ENVIRONMENTAL TOBACCO SMOKE

Public Law 103-227, also known as the Pro-Children Act of 1994 (Act), requires that smoking not be permitted in any portion of any indoor facility owned or leased or contracted for by an entity and used routinely or regularly for the provision of health, day care, early childhood development services, education or library services to children under the age of 18, if the services are funded by Federal programs either directly or through State or local governments, by Federal grant, contract, loan, or loan guarantee. The law also applies to children's services that are provided in indoor facilities that are constructed, operated, or maintained with such Federal funds. The law does not apply to children's services provided in private residence, portions of facilities used for inpatient drug or alcohol treatment, service providers whose sole source of applicable Federal funds is Medicare or Medicaid, or facilities where WIC coupons are redeemed.

Failure to comply with the provisions of the law may result in the imposition of a civil monetary penalty of up to \$1,000 for each violation and/or the imposition of an administrative compliance order on the responsible entity.

The authorized official signing for the applicant organization certifies that the applicant organization will comply with the requirements of the Act and will not allow smoking within any portion of any indoor facility used for the provision of services for children as defined by the Act. The applicant organization agrees that it will require that the language of this certification be included in any subawards which contain provisions for children's services and that all subrecipients shall certify accordingly.

OPHS strongly encourages all grant recipients to provide a smoke-free workplace and promote the non-use of tobacco products. This is consistent with the DHHS and OPHS mission to protect and advance the physical and mental health of the American people.

ASSURANCES - NON-CONSTRUCTION PROGRAMS

Public reporting burden for this collection of information is estimated to average 15 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0040), Washington, DC 20503.

PLEASE DO NOT RETURN YOUR COMPLETED FORM TO THE OFFICE OF MANAGEMENT AND BUDGET. SEND IT TO THE ADDRESS PROVIDED BY THE SPONSORING AGENCY.

NOTE: Certain of these assurances may not be applicable to your project or program. If you have questions, please contact the awarding agency. Further, certain Federal awarding agencies may require applicants to certify to additional assurances. If such is the case, you will be notified.

As the duly authorized representative of the applicant, I certify that the applicant:

1. Has the legal authority to apply for Federal assistance and the institutional, managerial and financial capability (including funds sufficient to pay the non-Federal share of project cost) to ensure proper planning, management and completion of the project described in this application.
2. Will give the awarding agency, the Comptroller General of the United States and, if appropriate, the State, through any authorized representative, access to and the right to examine all records, books, papers, or documents related to the award; and will establish a proper accounting system in accordance with generally accepted accounting standards or agency directives.
3. Will establish safeguards to prohibit employees from using their positions for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain.
4. Will initiate and complete the work within the applicable time frame after receipt of approval of the awarding agency.
5. Will comply with the Intergovernmental Personnel Act of 1970 (42 U.S.C. §§4728-4763) relating to prescribed standards for merit systems for programs funded under one of the 19 statutes or regulations specified in Appendix A of OPM's Standards for a Merit System of Personnel Administration (5 C.F.R. 900, Subpart F).
6. Will comply with all Federal statutes relating to nondiscrimination. These include but are not limited to: (a) Title VI of the Civil Rights Act of 1964 (P.L. 88-352) which prohibits discrimination on the basis of race, color or national origin; (b) Title IX of the Education Amendments of 1972, as amended (20 U.S.C. §§1681-1683, and 1685-1686), which prohibits discrimination on the basis of sex; (c) Section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C. §794), which prohibits discrimination on the basis of handicaps; (d) the Age Discrimination Act of 1975, as amended (42 U.S.C. §§6101-6107), which prohibits discrimination on the basis of age; (e) the Drug Abuse Office and Treatment Act of 1972 (P.L. 92-255), as amended, relating to nondiscrimination on the basis of drug abuse; (f) the Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation Act of 1970 (P.L. 91-616), as amended, relating to nondiscrimination on the basis of alcohol abuse or alcoholism; (g) §§523 and 527 of the Public Health Service Act of 1912 (42 U.S.C. §§290 dd-3 and 290 ee 3), as amended, relating to confidentiality of alcohol and drug abuse patient records; (h) Title VIII of the Civil Rights Act of 1968 (42 U.S.C. §§3601 et seq.), as amended, relating to nondiscrimination in the sale, rental or financing of housing; (i) any other nondiscrimination provisions in the specific statute(s) under which application for Federal assistance is being made; and, (j) the requirements of any other nondiscrimination statute(s) which may apply to the application.
7. Will comply, or has already complied, with the requirements of Titles II and III of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 (P.L. 91-646) which provide for fair and equitable treatment of persons displaced or whose property is acquired as a result of Federal or federally-assisted programs. These requirements apply to all interests in real property acquired for project purposes regardless of Federal participation in purchases.

8. Will comply, as applicable, with provisions of the Hatch Act (5 U.S.C. §§1501-1508 and 7324-7328) which limit the political activities of employees whose principal employment activities are funded in whole or in part with Federal funds.
9. Will comply, as applicable, with the provisions of the Davis-Bacon Act (40 U.S.C. §§276a to 276a-7), the Copeland Act (40 U.S.C. §276c and 18 U.S.C. §874), and the Contract Work Hours and Safety Standards Act (40 U.S.C. §§327-333), regarding labor standards for federally-assisted construction subagreements.
10. Will comply, if applicable, with flood insurance purchase requirements of Section 102(a) of the Flood Disaster Protection Act of 1973 (P.L. 93-234) which requires recipients in a special flood hazard area to participate in the program and to purchase flood insurance if the total cost of insurable construction and acquisition is \$10,000 or more.
11. Will comply with environmental standards which may be prescribed pursuant to the following: (a) institution of environmental quality control measures under the National Environmental Policy Act of 1969 (P.L. 91-190) and Executive Order (EO) 11514; (b) notification of violating facilities pursuant to EO 11738; (c) protection of wetlands pursuant to EO 11990; (d) evaluation of flood hazards in floodplains in accordance with EO 11988; (e) assurance of project consistency with the approved State management program developed under the Coastal Zone Management Act of 1972 (16 U.S.C. §§1451 et seq.); (f) conformity of Federal actions to State (Clean Air) Implementation Plans under Section 176(c) of the Clean Air Act of 1955, as amended (42 U.S.C. §§7401 et seq.); (g) protection of underground sources of drinking water under the Safe Drinking Water Act of 1974, as amended (P.L. 93-523); and, (h) protection of endangered species under the Endangered Species Act of 1973, as amended (P.L. 93-205).
12. Will comply with the Wild and Scenic Rivers Act of 1968 (16 U.S.C. §§1271 et seq.) related to protecting components or potential components of the national wild and scenic rivers system.
13. Will assist the awarding agency in assuring compliance with Section 106 of the National Historic Preservation Act of 1966, as amended (16 U.S.C. §470), EO 11593 (identification and protection of historic properties), and the Archaeological and Historic Preservation Act of 1974 (16 U.S.C. §§469a-1 et seq.).
14. Will comply with P.L. 93-348 regarding the protection of human subjects involved in research, development, and related activities supported by this award of assistance.
15. Will comply with the Laboratory Animal Welfare Act of 1966 (P.L. 89-544, as amended, 7 U.S.C. §§2131 et seq.) pertaining to the care, handling, and treatment of warm blooded animals held for research, teaching, or other activities supported by this award of assistance.
16. Will comply with the Lead-Based Paint Poisoning Prevention Act (42 U.S.C. §§4801 et seq.) which prohibits the use of lead-based paint in construction or rehabilitation of residence structures.
17. Will cause to be performed the required financial and compliance audits in accordance with the Single Audit Act Amendments of 1996 and OMB Circular No. A-133, "Audits of States, Local Governments, and Non-Profit Organizations."
18. Will comply with all applicable requirements of all other Federal laws, executive orders, regulations, and policies governing this program.

| | |
|---|----------------|
| SIGNATURE OF AUTHORIZED CERTIFYING OFFICIAL | TITLE |
| APPLICANT ORGANIZATION | DATE SUBMITTED |