

REQUEST FOR FUNDING Office of Medicaid Policy & Planning RFF-2022-014

WHEELCHAIR VAN AND LIFT GRANT PROGRAM

COMPETITIVE GRANT PROGRAM

GRANT APPLICATIONS DUE: July 22 August 12, 2022, AT 4:30 PM

EDT

RFF DATE ISSUED: June 14, 2022

RFF Contact: https://docs.ncbs.spendplan@fssa.in.gov
Family and Social Services Administration
Office of Medicaid Policy & Planning
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I. INTRODUCTION

This is a Request for Funding (RFF) issued by the Indiana Family and Social Services Administration, Office of Medicaid Policy and Planning (OMPP). The Home and Community Based Services Stabilization Grants are Phase 1 of the FSSA HCBS Spend Plan. The purpose of these grants is to improve transportation services to members residing in their homes and needing non-emergent care and services within their community that require the use of a wheelchair-accessible vehicle.

As part of this funding, OMPP is making a one-time, federally funded opportunity to cover the cost to purchase wheelchair vans at \$77,000 per grant and wheelchair lifts to be installed in existing fleet at \$9,000 per grant, aimed at increasing Non-Emergency Medical Transportation services. The State is specifically interested in increasing member access to the continuum of care for Hoosiers.

This RFF requests responses from:

- Indiana units of local government;
- IHCP approved public transit companies;
- Existing IHCP transportation providers serving the state of Indiana's Fee For Service Medicaid members; and/or
- New Indiana-based transportation providers* willing to join the above State's network who have:
 - have started submitted a letter of intent (Attachment D LOI) and started the IHCP enrollment process; <u>and</u>
 - if applicable by Indiana Code, have temporary motor carrier certification and have started the permanent process.

Within 180 days of receipt of the grant, the registered vehicles must be fully enrolled in the State's Fee For Service Medicaid Non-Emergency Transportation Network (currently brokered by Southeastrans, Inc.) and must serve homebound, Medicaid waiver members. When unassigned for medical transportation, the van may be used for other purposes.

A. BACKGROUND

1. Funding Appropriation

On March 11, 2021, President Biden signed the American Rescue Plan Act of 2021 (ARP), of which Section 9817 provides qualifying states with a temporary 10 percentage point increase to the federal medical assistance percentage (FMAP) for certain Medicaid expenditures for home and community-based services (HCBS). In accordance with ARP and the additional Centers for Medicare and Medicaid (CMS) guidance issued, the Indiana Family and Social Services Administration (FSSA) plans to use the federal funds attributable to the increased FMAP and state funds equivalent to the amount of federal funds attributable to the increased FMAP to implement the strategies outlined in this Spending Plan to enhance and expand access to, quality of, and capacity of HCBS under the Medicaid program. In response to the COVID-19 Public Health Emergency (PHE), Indiana's FSSA will use these enhanced FMAP funds to increase community living options for qualifying Medicaid beneficiaries, stabilize and support the HCBS workforce

and HCBS provider network, build up the necessary health information technology infrastructure, and accelerate long-term services and supports (LTSS) reform in accordance with Title II of the Americans with Disabilities Act, 42 U.S.C. §§ 12131–12134, as interpreted by the Supreme Court in Olmstead v. L.C., 527 U.S. 581 (1999) and with Title XIX of ARP.

2. OMPP Mission and Need for this RFF

The FSSA Office of Medicaid Policy and Planning efficiently and effectively administers Medicaid programs for the state of Indiana. Medicaid is more than just health coverage—it provides a vital safety net to one in five Hoosiers. OMPP's suite of programs, called the Indiana Health Coverage Programs, includes traditional (fee-for-service) Medicaid, risk-based managed care, and a variety of waiver services tailored to the needs of specific populations.

OMPP has identified a gap in NEMT service delivery to members requiring wheelchair transport. This issue was identified by a higher-than-average rate of unassigned trips due to no provider being available to serve this subset of members. The issue disproportionately impacts HCBS waiver recipients, particularly those who reside in rural counties. By increasing the number of wheelchair-accessible vans, OMPP seeks to reduce the no-provider assigned rate and stabilize NEMT service delivery for this subgroup of members and waiver recipients. As a result, HCBS waiver recipients will have increased ability to access medical care and remain living in their homes.

II. GRANT APPLICATION DETAILS

A. OBJECTIVE

The purpose of this RFF is to enhance NEMT service delivery to members on HCBS waivers, **living in their own homes** and in need of wheelchair accessible transport by expanding the available fleet of wheelchair lift-equipped vans operating in the state's transportation network. This population has especially limited transportation options and experiences the highest rates of missed trips due to a lack of available providers.

Available Funds: A total of \$3.3M has been allocated to this fund to purchase 40 new wheelchair vans and 30 new wheelchair lifts to be installed in existing fleets statewide. Applicants may request to purchase up to 2 vans and 3 wheelchair lifts total, so long as all program requirements can be met.

Participation Requirements:

- 1. Active IHCP transportation providers must be appropriately licensed to operate the vehicles and must be actively enrolled as a transportation provider in the State's Medicaid Fee-for-Service NEMT program, currently administered by Southeastrans, Inc.
- 2. New transportation provider applicants willing to join the above network who have:
 - 1. submitted a letter of intent (Attachment D) and started the IHCP enrollment process; and
 - 2. if applicable by Indiana Code, have temporary motor carrier certification and have started the permanent process.

- 3. All applicants must be willing to pick up any member, not just members who are enrolled in the organization's programs and cannot require members to participate in any additional services.
- 4. All applicants must have an Indiana location and use the vehicles to transport Indiana residents only
- 5. All applicants must submit a quarterly usage report and an annual impact report to OMPP.
- 6. All applicants must schedule and bill for services according to the State and NEMT broker policies.

Key Ownership Requirements:

- 1. The grant is limited to the purchase wheelchair vans and/or the purchase and installation of wheelchair lifts. The grantee must accept full ownership responsibility for the following expenses, including but not limited to
 - a. Registration and titling
 - b. Fuel and routine maintenance
 - c. Driver salary, training, and credentialing
 - d. Repairs and unplanned maintenance
- 2. The grantee must own and operate the vehicle for at least 3 years through the entire HCBS special funding period, which ends December 31, 2024.
- 3. The grantee is actively enrolled and participating in Indiana Medicaid's Fee-for-Service NEMT program, currently administered by Southeastrans, Inc.
- 4. The applicant must purchase the vans and lifts within 2 months of receiving notice of the award and have the vehicle in service within 5 months of purchase. If the grantee experiences any delays in receiving or installing the lift, then they must contact FSSS/OMPP to request an extension.
- 5. If the applicant goes out of business, leaves the OMPP provider network (voluntarily or by suspension/termination) then FSSA reserves the right to request a pro-rated repayment of the initial award amount.
- 6. The grantee must notify FSSA within 10 business days if the vehicle is totaled in an accident and is no longer safe for use.

Priority Point Objectives:

Applicants may be eligible for Priority Points if they meet the following objectives in addition to the requirements outlined above. Additional information regarding award of priority points can be found in Section III.C.

- 1. Service Allen, Grant, Lake, Tippecanoe, Starke and/or Vanderburgh counties.
- 2. Accept long-distance trips of 80+ miles one-way.
- 3. Service delivery that crosses stateliness to ensure access to Medicaid approved providers in neighboring states (Illinois, Kentucky, Michigan, and/or Ohio).
- 4. Proof that the vans and/or lifts will be purchased from and installed by an Indiana company.

Timing: Applicants should plan to purchase their vehicle immediately after the signed grant agreement has been executed and have the vehicle in circulation as soon as possible, unless other arrangements have been made with OMPP due to supply limitations. FSSA will

issue payments as a lump sum upfront payment. The Applicant must provide proof of purchase by no later than November 18, 2022.

Key Performance Indicators (KPIs): This grant is for the purchase of goods; thus, there are no performance indicators attached to it. Applicants must provide proof of purchase and, if requested, vehicle registration to OMPP. Quarterly reporting demonstrating the usage of the vehicle for Medicaid members will be required. Grantees will be required to submit a Quarterly Report (Attachment C) through December 31, 2024.

Grant Match: There is no match requirement for this grant.

Applicants must be prepared to track and show how State objectives, including but not limited to the RFF Objectives, were met as a result of the funding received. Please note, as explained in *Section II.A*, only eligible entities may utilize grant funding to support their proposed projects. All funding must be used by eligible entities to fulfill the Objectives of the RFF.

- **B.** USE OF FUNDS: Funds under this award may only be used for the purchase of new wheelchair vans and/or the purchase of wheelchair lifts to be installed in pre-owned vehicles.
- **C. GRANT PERIOD:** All grants are expected to begin on or around August 15, 2022 September 7, 2022. If all funds are not utilized in the first round, FSSA may issue a second round of funding. The grant period of this funding runs until December 31, 2024. Applicants must retain ownership and operation of all vehicles and/or wheelchair lifts purchased with these funds through the grant period end date
- **D. PAYMENT OF FUNDS:** Payment will be made by the Medicaid fiscal agent and based upon the provider's Pay-To Address on file. Please double-check that your IHCP profile information is up to date when you apply. Applicants must submit the following exactly as listed in IHCP:
 - 1. Provider Name
 - 2. Provider Point of Contact
 - 3. Medicaid Provider ID

E. SAMPLE GRANT AGREEMENT

Applicants must agree to the terms and conditions of the Sample Grant Agreement in Attachment E. All grant recipients will be required to sign this grant agreement in order to receive funding. The entity that applies on behalf of the county/community coalitions must be able to sign and execute the grant agreement with the State to fund the projects awarded to the entities in the coalition. The grant agreement outlines the State's terms and conditions that must be followed by an awardee when receiving the grant. Each recipient's proposal will also become a component of the grant agreement.

Applicants will be required to complete the necessary paperwork for contracting in the event that the applicant is awarded. For those applicants who may have previously contracted with the State, the applicant should ensure the documentation and registrations are active and up-to-date and that the applicant is in good standing with the Department of Revenue and Department of

Workforce Development. Required documentation for contracting with the State of Indiana includes the following items, and all three can be completed from this link https://www.in.gov/idoa/2463.htm:

- Registration with the Indiana Department of Administration for a Bidder ID
- Completion of payment forms with the Auditor of State for a *Peoplesoft ID*
- Registration with the Indiana Secretary of State (applicable to limited liability partnerships, limited partnerships, corporations, S-corporations, nonprofit corporations, and limited liability corporations; religious organizations are exempt)

F. GRANT APPLICATION SUBMISSION INSTRUCTIONS

Any interested applicant must submit a complete grant application no later than 4:30 p.m. Eastern Standard Time on July 22, 2022, August 12, 2022, to be eligible for an award. Any applicant that does not submit a complete grant application on time may not be considered.

OMPP will utilize the existing Medicaid NEMT email box to receive grant applications for and questions related to this RFF. All components of the grant application should be submitted, in electronic format, via email to hcbs.spendplan@fssa.in.gov with the subject "OMPP RFF-2022-014 – Wheelchair Lift Grant Program." Applicants will be expected to answer all questions as well as submit all forms associated with the application that is provided for completion as part of this RFF package.

Applicants shall fill out each component of the application, including the Technical Proposal and Grant Budget Proposal. Applicants will be asked to submit all components of the application as detailed in the Grant Application Components table in *Section II.H* below.

Once the application is submitted, the applicant will receive an automatic reply email to the email address that the applicant used to submit their application confirming that the application has been submitted. If the applicant does not appear to have received the confirmation email, they should 1) confirm they submitted the application via email to the correct email address and 2) check all spam and promotions folders for the email address the applicant used to submit their application.

G. GRANT APPLICATION SUBMISSION COMPONENT OVERVIEW

As part of the grant application, the applicant must submit all Grant Application Components, which are listed in the following table. Instructions regarding how to complete each component are detailed in *Section III*.

Grant Application Technical Proposal (Attachment A)

- 1. Applicant Information
- 2. Must be signed by an authorized representative
 - a. <u>For coalitions:</u> Executive Director/CEO or President of the Board of Directors or Facility Owner or Program Director of the Prime Grantee
 - b. For individual providers: Facility Owner or Program Director
- 3. NEMT History
- 4. Residential Service Delivery Commitment

- 5. Sustainability & Maintenance Plan
- 6. Priority Points Service Delivery

Grant Budget Proposal and Grant Budget Narrative (Attachment B)

A completed Grant Budget Proposal and Grant Budget Narrative must be submitted. The applicant must describe other grant awards it has received within the past 18 months.

H. GRANT APPLICATION TIME FRAME

The overall grant application timeline can be found in the table below. Applicants must submit their grant application by the proposal deadline to be eligible for receiving a grant. Further instructions on submitting a completed grant application can be found in *Section II.F* and *II.G*. The timeline is subject to change.

Date	Event
June 14, 2022	RFF posted online
July 22, 2022	RFF proposals due at 4:30 p.m. ET
August 12, 2022	
August 15, 2022	Approximate award decisions released and grant start date*
September 7, 2022	

^{*}Depending on how many applications OMPP receives, the award date and grant effective date may change to allow for adequate time for evaluation.

To remain current with any updates to this timeline, it is recommended applicants check the following OMPP website frequently where any amendments to this RFF will be posted: https://www.in.gov/fssa/ompp/hcbs-enhanced-fmap-spending-plan/. The State aims to provide updates to this timeline over email from https://www.in.gov/fssa/ompp/hcbs-enhanced-fmap-spending-plan/. The State aims to provide updates to this timeline over email from https://www.in.gov/fssa/ompp/hcbs-enhanced-fmap-spending-plan/.

I. SUBMISSION OF APPLICATION QUESTION

All questions regarding the content of this RFF must be submitted to hcbs.spendplan@fssa.in.gov.

III. GRANT APPLICATION COMPONENTS

This section provides specific instructions related to each application component. Applicants must review the requirements for each component thoroughly.

A. TECHNICAL PROPOSAL

1. TECHNICAL PROPOSAL COMPONENTS

The Technical Proposal (Attachment A) narrative should be less than 12,500 words. Applicants should use their discretion in allocating word counts to each narrative section. All sections outlined below must be addressed thoroughly. Applicants are expected to adequately answer and provide specific details and examples to demonstrate the thought that went into crafting the response.

i. Applicant Information

Provide the following background information.

- a. Applicant Information
 - 1. Applicant Type: Type of Entity (Non-Profit, Local Unity of Government, or Health System OR County/Community Coalition)
 - 2. County
 - 3. Applicant Name
 - 4. Number of Wheelchair Vans Requested
 - 5. Number of Wheelchair Lifts Requested
- b. Title of Application
- c. Single Point of Contact for all Communication Regarding the RFF
 - 1. Contact Name
 - 2. Contact Title
 - 3. Contact Phone
 - 4. Contact Email Address
 - 5. Contact Mailing Address
- d. Signature of Authorized Representative

The authorized representative must provide an electronic signature certifying that the information contained in the application is correct and that the applicant agrees to the terms and conditions of the FSSA Sample Grant Contract (Attachment E).

- 1. Designated Representative (Printed Name)
- 2. Designated Representative Title
- 3. Date

ii. NEMT History

Provide a summary of your history providing NEMT services as a provider under Southeastrans, Inc., which may include information as a provider for an MCE or other state's broker, and/or as an independent provider before June 2019. Please detail the types of modalities your agency has accommodated, i.e., ambulatory, wheelchair, bariatric wheelchair, and stretcher.

iii. Residential Service Delivery Commitments

Residential pick-up poses unique challenges to transportation including physical access issues. FSSA is committed to helping HCBS waiver participants by offering home accessibility grants that may assist with items such as ramps, and to expanding telehealth when appropriate. However, these members must receive transportation to in-person medical appointments. Explain how your agency will be able to overcome physical access issues, increase staff knowledge of other funding to improve access and ensure that transport from residences is successfully provided when scheduled

Please also list all counties that you will serve fully and/or partially. For counties where only partial coverage is provided, please explain your specific service delivery areas and why some areas will not be covered.

iv. Sustainability & Maintenance Plan

Describe how your program will support maintaining the vehicle and provide the necessary staff to operate the service. Describe your plan to ensure the longevity and sustainability of your project beyond the grant period.

v. Priority Points - Service Delivery

For each area below, explain if you will provide services to the impact areas and, if applicable, which geographic locations you will cover.

- O The number of full counties that will be served by one vehicle; if requesting two vehicles, please be sure to respond for each vehicle. You may list partial counties served separately.
- Willingness to cross county lines such as pick-up members in Boone County and transporting them to appointments in Marion County.
- Willingness to take early morning and/or after hours appointments, including, but not limited to evening hospital discharge support.

2. TECHNICAL PROPOSAL POINTS

A breakdown of the maximum points each section of the Technical Proposal can receive is outlined in the table below.

Sectio	Title	Maximum Points Available		
n				
i.	Applicant Information	5 Points		
ii.	NEMT History	10 Points		
iii.	Residential Service Delivery	25 Points		
	Commitments			
v.	Sustainability & Maintenance Plan	10 Points		
Total Technical Proposa		50 Points		
	Points:			
*All Priority Points will be added to the total score.				

B. GRANT BUDGET PROPOSAL

This section provides instructions for the completion of the Grant Budget Proposal and the Grant Budget Narrative explaining the request for funds.

Allowable Expenses: Project funds must be used for activities that directly support the accomplishment of the RFF Objectives. All expenditures must be consistent with applicable state and federal laws, regulations, and guidance. Please refer to *Section II.B* for more information on the allowed use of funds.

- 1. Grant Budget Proposal: Complete a detailed budget for the total grant amount you are requesting by submitting a completed Attachment B Grant Budget Proposal.

 County/community coalitions shall complete a budget that encompasses the total proposed grant amount the coalition is requesting. The completed Grant Budget Proposal shall be submitted with the Technical Proposal as described in Section II.F. The grant amount requested will not be scored. Applicants may submit supplemental documentation to support their requested grant amount.
- **2. Grant Budget Narrative**: Provide a narrative explaining how you secured bids and attach a detailed invoice for the vehicle(s) and/or wheelchair lifts you are requesting to purchase. The Grant Budget Narrative should be less than 2,500 words. Your Grant Budget Narrative should describe your business plan, including additional funds that you will leverage to support maintenance and staffing needs. The Grant Budget Narrative will be worth **10 points**.

C. PRIORITY POINTS

Applicants are eligible to receive up to **20 additional Priority Points** for meeting certain needs or priorities as follows. Applicants will be asked to indicate which of these criteria they meet in their response to the Technical Proposal and Grant Budget Proposal. Priority Points will be awarded as follows:

- 5. Applicants may receive **2 per county for 10 total Priority Points** for agreeing to serve Grant, Lake, Tippecanoe, Starke and/or Vanderburgh counties.
- 6. Applicants may receive **5 Priority Points** for agreeing to accept long-distance trips of 80+ miles one-way.
- 7. Applicants may receive **3 Priority Points** for service delivery that crosses stateliness to ensure access to Medicaid approved providers in neighboring states (Illinois, Kentucky, Michigan, and/or Ohio).
- 8. Applicants may receive **2 Priority Points** for proof that the vans and /or lifts will be purchased from and installed by an Indiana company.

IV. EVALUATION CRITERIA

Proposals will be evaluated based upon the proven ability of the applicant to satisfy the requirements of the RFF. Each of the evaluation criteria categories is described below with a brief explanation of the basis for evaluation in that category. The points associated with each category are indicated following the category name (total maximum points = 15). If one or more of the listed criteria on which the responses to this RFF will be evaluated are found to be inconsistent or incompatible with applicable federal laws, regulations, or policies, the specific criteria will be disregarded, and the responses will be evaluated and scored without considering such criteria or disqualified altogether.

The State reserves the right to make all final award decisions, including selecting recipients based on the State's evaluation, total evaluation score, and other factors to be determined by the State. The State may incorporate strategic considerations when making award decisions. The State will only issue as many grants as funding allows and reserves the right to issue a partial

award or no award. Finally, the State reserves the right to disqualify and not score incomplete proposals that do not provide all the required items as detailed in this RFF.

A. RFF EVALUATION CRITERIA

Step 1: Review for Mandatory Requirements and Complete Application

In this step, proposals will be evaluated to ensure that they adhere to all grant requirements, including applicant eligibility and county eligibility. Applicants must submit all information required by this RFF. Incomplete proposals may be disqualified. Further, any applications received after the deadline set forth in the RFF may be disqualified.

Step 2: Qualitative Review (Technical and Grant Budget Proposals)

Complete proposals will be scored based on the specifications set forth in *Section III.A* and *Section III.B*. This scoring will have a maximum possible score of 60 points (50 Technical Proposal points and 10 Grant Budget Proposal points). Step 2 may include one or more rounds of grant proposal clarifications or discussions (oral and/or written) between the State and the applicant focused on the details of the Technical and/or Grant Budget Proposal. Note that Grant Budget Proposals will not be scored based on the grant funding amount requested. Grant Budget Proposals will be scored based on the narrative provided in the Grant Budget Narrative.

Step 3: Priority Points

Applicants may receive up to 20 Priority Points as outlined in *Section III.C.* The State will review the applicant's responses to the Priority Points section and calculate the total Priority Points earned. Priority Points will be added to the total points received for the Technical Proposal and Grant Budget Proposal to create a final score for each applicant.

Step 4: Award Recommendation and Notification

All proposals will be ranked based on their scores. The committee responsible for reviewing the proposals will make grant award recommendations based upon the highest scoring applications. The State reserves the right to make all final award determinations and to determine the budget line items included in the award. FSSA intends to notify grant applicants of the award when evaluations are completed.

B. APPLICATION POINTS

The following table demonstrates the maximum points available for each grant application.

Crite ria	Maximum Points Available
1. Adherence to Grant Requirements	Pass/Fail
2. Technical Proposal	50 Points
3. Grant Budget Proposal	10 Points

4. Priority Points		20 Points
	Total Points:	80 Points