

**Request for Application (RFA)
Indian Health Program Grants
Fiscal Years 2022-2023 and
2023-2024**

DHCS



California Department of
Health Care Services

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PROPOSED AWARD SCHEDULE - TENTATIVE DATES

Below is a tentative award schedule for this procurement. All applicants are advised of the following schedule and will be expected to adhere to the required dates and times.

Event	Date	Time (If Applicable)
RFA Release:	November 29, 2022	
RFA Information Teleconference	December 6, 2022	11:00 a.m. – 12:00 p.m.
Deadline to Submit RFA Questions	December 13, 2022	
RFA Question Responses Published by	December 19, 2022	
Applications Due:	January 30, 2023	U.S. Mail, Overnight, Hand Delivered, or Electronically Submitted
Award Notice(s) Released	February 10, 2023	
Appeals Due	February 17, 2023	U.S. Mail, Overnight, Faxed, Hand Delivered
Project Budget Documents Due	February 17, 2023	U.S. Mail, Overnight, Hand Delivered, or Electronically Submitted
Tentative Grant period begins:	February 24, 2023	
Grant period ends:	June 30, 2024	

PART I: PROGRAM PURPOSE AND ELIGIBILITY

A. Introduction & Background

The California Department of Health Care Services (DHCS), Office of Tribal Affairs (OTA) – Indian Health Program (IHP) is pleased to announce the availability of funds for the restoration of the IHP grant program. The IHP grant program will focus on improving the health of American Indians by addressing primary care recruitment and retention in Indian health clinics.

Significant health disparities for American Indians indicate the need to provide infrastructure support to Indian health programs. Recent data shows that American Indians continue to experience lower life expectancy and disproportionate disease burden. In fact, the health status of California Indians is recognized as one of the lowest of any ethnic group in the state with higher prevalence of preterm births, suicide, substance use disorders, drug-induced death, diabetes, and other chronic diseases than that of the general population. Reducing the primary care shortage in Indian health programs will improve access to care, reduce disparities, and improve the health status of American Indians.

B. Overview

This Request for Application (RFA) provides funding to support the recruitment and retention of primary care providers in Indian health clinics with the goals of:

1. Eliminating health disparities by ensuring American Indian have access to quality health care.
2. Supporting the equitable delivery of health care in Indian health clinics by expanding care delivery capacity, focusing on care that is delivered in a culturally appropriate manner, and strengthening Indian health safety net clinic programs.

C. Available Funds

A maximum amount of \$22,852,000 is available to fund the awards resulting from this RFA. Total program funding is anticipated to be limited to the following amounts:

- 1) \$11,426,000 for the budget period of 02/24/2023 through 06/30/2023
- 2) \$11,426,000 for the budget period of 07/01/2023 through 06/30/2024

Funding is subject to state budget appropriation. DHCS reserves the right to initiate amendments as necessary to redistribute funds between fiscal years to meet the needs of the State. Award amounts will be determined annually via an allocation formula.

Funding Sources/Use of Funds

The funds awarded under this RFA are from the California State General Fund. The funds provided through this RFA are awarded for a specifically defined purpose and may not be used for any other use or program that is not delineated in this RFA or in the ensuing grant.

D. Applicant Eligibility

Eligibility Requirements

Failure to meet the following requirements will be grounds for DHCS to deem an applicant nonresponsive and/or ineligible for funding. Evaluators may choose not to thoroughly review or score application packages that fail to meet these requirements. By submitting an application in response to this RFA, each applicant acknowledges it meets the following requirements.

1. Meets definition of primary care clinic or licensure exemptions as identified in Health and

- Safety Code [1204](#) and [1206](#); or a health center operated by the Indian Health Service, an Indian tribe or tribal organization, or an urban Indian organization;
2. Provides comprehensive direct health services including medical, dental, and community health;
 3. Corporations must certify they are in good standing and submit evidence they are qualified to conduct business in California;
 4. Non-profit organizations must certify they are eligible to claim nonprofit status. Applicants must certify they are in good standing with the Office of the Secretary of State and the Office of the Attorney General;
 5. Compliance with Contract Terms and Conditions-Applicant must be willing and able to comply with all terms and conditions outlined in the RFA section entitled "Contractual Terms and Conditions" and those appearing in the cited exhibits accompanying this RFA;
 6. Certify they are financially stable and solvent and have adequate cash reserves to meet all financial obligations while awaiting reimbursement from the State;
 7. Maintains good standing with the Bureau of Indian Affairs (if an Indian tribe);
 8. Maintains a Board of Directors that is comprised of a majority of American Indians, represents the local American Indian community, and functions according to its bylaws (California Code of Regulations, Title 17, Section 1534);
 9. Maintains liability and malpractice insurance in sufficient amounts to meet current state requirements of not less than \$1,000,000 per occurrence for bodily injury and property damage liability combined or Torts claims coverage.

E. Activities to be Funded

The following goals, activities, and staffing requirements will be incorporated into the final grant scope of work.

The IHP will provide grant funds to support the following combined activities:

1. Delivery of prevention oriented primary health care services that are responsive to the health needs of American Indian patients that are provided in a primary care clinic setting, including financial support to improve staffing recruitment and retention of primary care providers including but not limited to compensation considerations, signing or retention incentives, etc.

Primary Health Care Services include preventive health services, diagnostic, treatment, referral, and follow-up services. Primary health care is characterized by a group of health professionals such as: a primary health care physician (general practitioner, family practice doctor, internist, pediatrician), primary care mid-level provider (nurse practitioner, Physician Assistant, certified nurse midwife), mental health practitioner, and dentist to provide patients with a broad spectrum of care across all life stages that results in improved health outcomes and healthcare delivery.

2. Access to Traditional Indian Health that further supports the health needs of American Indian patients.

F. Funding Restrictions

IHP funding alone will not be adequate to sustain a health program. Funds appropriated to carry out the purpose of this RFA shall be supplemental to those available from the federal government and shall not duplicate, or replace, any commitments made by the federal government to provide health services to American Indians and their families in this state who receive health services pursuant to

an urban or rural American Indian health program, per Health and Safety Code Section 124585. Thus, all applicants must demonstrate reliance on multiple funding sources.

G. Applicant Questions

Immediately notify DHCS if clarification is needed regarding the services sought or when questions arise about the RFA and/or its accompanying materials, instructions, or requirements. Put the inquiry in writing and transmit it to DHCS as instructed below. DHCS reserves the right to contact an inquirer to seek clarification of any inquiry received at its discretion.

Applicants that fail to report a known or suspected problem with the RFA and/or its accompanying materials or fail to seek clarification and/or correction of the RFA and/or its accompanying materials shall submit a proposal at their own risk. In addition, if awarded the grant, the successful applicant shall not be entitled to additional compensation for any additional work caused by such problem, including any ambiguity, conflict, discrepancy, omission, or error.

Following the question submission deadline, DHCS will summarize all general questions and issues raised and provide responses to applicants.

To the extent practical, inquiries shall remain as submitted. However, DHCS may consolidate and/or paraphrase similar or related inquiries.

What to include in an inquiry

When submitting questions please include the following:

1. Inquirer's name, name of organization submitting the inquiry, mailing address, email address, area code and telephone number, and fax number.
2. A description of the subject or issue in question or discrepancy found.
3. RFA section, page number or other information useful in identifying the specific problem or issue in question.
4. Remedy sought, if any.

Question Deadline

Applicants must submit questions about the RFA by December 13, 2022. Questions submitted via U.S. mail must be postmarked before or on December 13, 2022. Errors in the RFA or its instructions may be reported up to the application submission date. At its discretion, DHCS may contact an inquirer to seek clarification of any inquiry received.

Question Submission

Submit inquiries using one of the following methods:

U.S. Mail, Hand Delivery or Overnight Express:	Email or Fax:
Department of Health Care Services Office of Tribal Affairs Andrea Zubiata, Acting Chief 1501 Capitol Avenue, Suite 71.4089, MS 8502 PO Box 997413 Sacramento, CA 95899-7413	Department of Health Care Services Office of Tribal Affairs Andrea Zubiata, Acting Chief Email: andrea.zubiata@dhcs.ca.gov Fax: OTA@dhcs.ca.gov

Applicants submitting inquiries by fax or email are responsible for confirming the receipt of all materials by the question deadline. **Please contact Emily Tillisch at (916) 713-8622 to confirm faxed or emailed transmissions.**

H. Reasonable Accommodations

For individuals with disabilities, DHCS will provide assistive services such as sign-language interpretation, real-time captioning, note takers, reading or writing assistance, and conversion of RFA Application Teleconference handouts, Request for Application (RFA), questions/answers, RFA Addenda, or other Administrative Notices into Braille, large print, audio cassette, computer disk, or CD. To request such services or copies in an alternate format, please call the number below.

Emily Tillisch, Indian Health Program
Program telephone number: (916) 713-8622
(TTY) California Relay telephone number: 711 - 1-800-735-2929

NOTE: The range of assistive services available may be limited if requestors cannot allow 3 State working days prior to the date the alternate format material is needed.

I. Application Deadline

The IHP must receive an original application package and one (1) copy on or before January 30, 2023. The package can be delivered, mailed, or electronically submitted.

The application package must be received by **January 30, 2023** at the following address:

U.S. Mail, Hand Delivery or Overnight Express:	Email:
Department of Health Care Services Office of Tribal Affairs Andrea Zubiata, Acting Chief 1501 Capitol Avenue, Suite 71.4089, MS 8502 PO Box 997413 Sacramento, CA 95899-7413	Department of Health Care Services Office of Tribal Affairs Email: TribalAffairs@dhcs.ca.gov

Proof of Timely Receipt

To be timely, the IHP must receive each application package at the stated delivery address on the proposal submission due date. If submitting via U.S. Mail, application packages must be postmarked on or before the due date. Applications postmarked after the due date will not be accepted.

PART II: APPLICATION INSTRUCTIONS

J. General Instructions

Read all instructions carefully. Be sure to include all of the information required in the RFA, including all attachments. Applicants must return the application package according to the format and instructions stated herein. Failure to follow these format instructions or failure to return the required forms and materials may deem an application package as non-responsive and may cause that application to be eliminated from further consideration.

The application package may not be submitted in a binder or folder. Use a staple, binder clip, or other means to bind your application.

1. The type font size is to be no less than 12 points;
2. The application should be single-spaced unless otherwise instructed in this document;
3. Write "Original" on the front page of the original application set; and
4. Write "Duplicate" on the front page of one additional copy.

All RFA forms and attachments that require signatures may be signed electronically, unless noted otherwise. Signature stamps are not acceptable. The additional application set may reflect photocopied signatures.

K. Required Attachments and Supporting Documents

Required Attachments

Each application requires submission of the following attachments:

1. Attachment A: Application Checklist
2. Attachment B: Application Forms
3. Attachment C: Contractors Certification Clause (CCC) Form
4. Attachment D: Standard 204-Payee Data Record
5. Attachment E: Performance Measures Data Sheet
6. Attachment F: Budget Forms
7. Attachment G: Authorization to Bind Corporation and Payment Request Approval Form
8. Attachment H: Certification of Terms and Conditions of Advance Payment

Required Supporting Documents

Each application requires submission of the following supporting documents:

1. Job descriptions for all personnel proposed for funding
2. Copies of licensure for all personnel proposed for funding or within 30 days of hiring
3. Organizational chart that identifies vacancies
4. The most recent quarterly or monthly financial statement that includes all corporate debts and incoming funds for the program
5. Current evidence of liability insurance or statement of reliance on Torts claims coverage
6. A copy of the appropriate "indirect cost" document must be submitted
7. Current Corporate By Laws sent to the Registry of Charitable Trusts, Office of the Attorney General, State of California, and/or Tribal Charter
8. List of current Board of Directors including affiliation and contact information
9. Project budget (this is due after the award notices are released and should be based on the funding approved for FY 2022-23)

Cost of Application

The cost of developing applications is entirely the responsibility of the applicant and shall not be chargeable to the State of California or included in any cost elements of the application.

Verification of Applicant information

By submitting an application package, applicants agree to authorize DHCS to verify any and all claims made by the Applicant.

L. Evaluation and Selection Criteria

Application Review

Each application received by IHP by the specified date and time will be reviewed for eligibility, minimum application requirements, completeness, and compliance with the RFA instructions. Applications deemed non-eligible will not be considered. DHCS may waive any immaterial deviation in any application. This waiver of any immaterial deviation shall not excuse an applicant from full compliance with the grant terms if a grant is awarded.

Applications will be reviewed by two (2) evaluators using the attached evaluation and scoring tool (**see Appendix A**). It is the applicant's responsibility to demonstrate possession of the required knowledge and experience essential to provide primary care services to American Indian clients in a culturally appropriate manner.

Evaluators will assess the quality of an application package solely by evaluating the document submitted in response to this RFA.

M. Awards

DHCS shall issue award notices to all funded applicants that successfully responded to this RFA and were deemed qualified and eligible for funding. Successful applicants (grantees) will be notified via telephone, FAX, and letter, anticipated to be before close of business on February 10, 2023.

DHCS will confirm all awards with each Applicant selected for funding after the appeal deadline or if no appeals are received. DHCS personnel may confirm an award verbally or in writing via mail, email or fax. An appeal filed by any applicant shall not delay awards to other applicants.

Applicants not selected for funding will be notified of funding denial and supplied with an explanation for the reasons that the application was not chosen for funding.

Number of Awards

IHP expects to make awards to all eligible and qualified applicants identified in this RFA. The funding Program reserves the right to determine the appropriate funding level to be awarded to each eligible and qualified applicant to ensure an even geographic dispersion of funds.

N. Appeal Process

Who Can Appeal

- 1) Only non-funded applicants that submit a timely application that complies with the RFA instructions may file an appeal.

2) Grounds for appeal

Appeals are limited to the grounds that DHCS failed to correctly apply the standards for reviewing applications in accordance with this RFA. Applicants may not appeal solely on the basis of funding level. There is no appeal process for late or substantially incomplete/nonresponsive applications. The receipt of an appeal by one applicant shall not hinder or delay an award to another applicant.

3) Appeal content

The written appeal must fully identify the issue(s) in dispute, the practice that the appellant believes DHCS has improperly applied in making its award decision(s), the legal authority or other basis for the appellant’s position, and the remedy sought.

4) Submitting an appeal

Written letters appealing DHCS’ final award selections must be received by **February 17, 2023**.

Hand deliver, mail, or fax an appeal to the address below. Label, address, and submit a letter of appeal using one of the methods described below.

U.S. Mail, Hand Delivery or Overnight Express:	Fax:
René Mollow, Chief Deputy Director Health Care Benefits & Eligibility Department of Health Care Services 1501 Capitol Avenue, MS 4000 Sacramento, CA 95814-5000	Department of Health Care Services Attention: René Mollow, Chief Deputy Director Fax: 916-440-5268

Confirmation of Receipt of Faxed Appeals

Dial the telephone number shown here to confirm receipt of the fax transmission: (916) 440-7800.

Appeal Timeline

Only timely and complete appeals that comply with the instructions herein may be considered. At its sole discretion, DHCS reserves the right to collect additional facts or information to aid in the resolution of any appeal.

The Deputy Director or designee shall review each timely and complete appeal and may resolve the appeal by either considering the contents of the written appeal letter or, at his or her sole discretion, by holding an oral appeal hearing.

The decision of the hearing official shall be final and there will be no further administrative appeal.

Appellants will be notified of the decisions regarding their appeal in writing within fifteen (15) working days of receipt of the written appeal letter, if no hearing will be held.

**O. Requests for Copies
 Disposition of Applications**

All materials submitted in response to this RFA will become the property of the California Department of Health Care Services and, as such, are subject to the Public Records Act (GC Section 6250, et seq.). DHCS will disregard any language purporting to render all or portions of any application confidential. Upon release of Award Notices, all documents submitted in response to this RFA and all documents used in the selection process (e.g., review checklists, scoring sheets, letters of intent,

etc.) will be regarded as public records under the California Public Records Act (Government Code Section 6250 et seq.) and subject to review by the public. However, application contents, applicant correspondence, selection working papers, or any other medium shall be held in the strictest confidence until the Award Notices are released/issued.

Who can inspect or copy application materials

Any person or member of the public can inspect or obtain copies of any application materials.

What can be inspected/copied and when

- 1) After DHCS releases the RFA, any existing Applicants List (i.e., list of firms to whom the RFA is sent) is considered a public record and will be available for inspection or copying.
- 2) After the RFA Information Teleconference, the sign-in or attendance sheet is a public record and will be available for inspection or copying.
- 3) On or after the date DHCS releases/issues Award Notices, all applications, letters of intent, application review checklists and/or scoring/evaluation sheets become public records. These records shall be available for review, inspection and copying during normal business hours.
- 4) This is not an exhaustive list. Any other documents collected throughout the RFA process are subject to the Public Records Act (GC Section 6250, et seq.) and shall be released in accordance with the same.

Persons wishing to view or inspect any application or award related materials must identify the items they wish to inspect and must make an inspection appointment by contacting **Andrea Zubiata** at **(916) 713-8623** or by email at **andrea.zubiata@dhcs.ca.gov**.

Persons wishing to obtain copies of application materials may visit DHCS or mail a written public record access request to the DHCS office identified below. The requestor must identify the specific items they wish to have copied by state staff. Materials will not be released from State premises for the purposes of making copies.

Unless waived by DHCS, a check covering copying and/or mailing costs must accompany the request. Copying costs, when applicable, are charged at a rate of **ten cents** per page. DHCS will fulfill all copy requests as promptly as possible. Submit copy requests as follows:

U.S. Mail, Hand Delivery or Overnight Express:	Email or Fax:
Department of Health Care Services Office of Tribal Affairs Andrea Zubiata, Acting Chief MS 8502 1501 Capitol Avenue, Suite 71.4089 PO Box 997413 Sacramento, CA 95899-7413	Department of Health Care Services Office of Tribal Affairs Andrea Zubiata, Acting Chief <u>andrea.zubiata@dhcs.ca.gov</u> Fax: <u>OTA@dhcs.ca.gov</u>

PART III: DHCS' RIGHTS AND GRANTEE INFORMATION

P. DHCS' Rights

In addition to the rights discussed elsewhere in this RFA, DHCS reserves the following rights.

RFA clarification / correction / alteration

- 1) DHCS reserves the right to do any of the following up to the application submission deadline:
 - a) Modify any date or deadline appearing in this RFA or the RFA Time Schedule.
 - b) Issue clarification notices, addenda, alternate RFA instructions, forms, etc.
 - c) Waive any RFA requirement or instruction for all applicants if DHCS determines that a requirement or instruction was unnecessary, erroneous or unreasonable. If deemed necessary by DHCS, DHCS may also waive any RFA requirement or instruction after the application submission deadline.
 - d) Allow Applicants to submit questions about any RFA change, correction, or addendum. When DHCS allows such questions, specific instructions will appear in the cover letter accompanying the document.

If DHCS decides, just before or on the submission due date, to extend the submission deadline, DHCS may in its sole discretion, choose to notify potential applicants of the extension by fax, email or by telephone in addition to the Internet posting. DHCS will follow-up verbal notices in writing by mail, email, or fax.

Insufficient responsive applications / additional awards / altered awards

If in DHCS' opinion, the state's interests will be better served, DHCS reserves the right at its sole discretion to take any of the actions described below. These actions may be initiated at the onset of various events including but not limited to a determination that an insufficient number of applications are responsive, additional funding becomes available, anticipated funding decreases, geographic service coverage is insufficient, applicant funding needs exceed available funding, etc.

- 1) Offer agreement modifications or amendments to funded organizations for increased or decreased services and/or increased/decreased funding following successful negotiations;
- 2) Open an additional or consecutive application acceptance period to invite additional interested organizations to submit applications for funding;
- 3) Extend the application acceptance period beyond the date indicated in the RFA to invite additional interested organizations to submit applications for funding;
- 4) Conduct a focused RFA process to solicit additional applications;
- 5) Extend the term of any resulting agreement and alter the funding amount;
- 6) Negotiate budget alterations and/or changes to scopes of work or work plans and opt not to make an award if satisfactory agreement cannot be reached.

Collecting information from Applicants

- 1) If deemed necessary, DHCS may request an Applicant to submit additional documentation or clarifying information during or after the Application review and evaluation process. DHCS will advise the Applicants orally, by fax, in writing, or other method of the required documentation/information and the time line for submitting the documentation/information. DHCS will follow-up oral instructions in writing by fax, email, or regular mail. Failure to submit the required documentation/information by the date and time indicated may result in a decreased application score or cause DHCS to deem an applicant nonresponsive.
- 2) DHCS, at its sole discretion, reserves the right to collect, by mail, fax, email, or other method; the following omitted documentation and/or additional information.
 - a) Signed copies of any form submitted without a signature.
 - b) Data or documentation omitted from any submitted RFA attachment/form.
 - c) Information/material needed to clarify or confirm certifications or claims made by an Applicant.

- d) Information/material or form needed to correct or remedy an immaterial defect in an Application.
- 3) The collection/review of additional applicant documentation may cause DHCS to extend the date for posting/issuing Award Notice(s). If DHCS changes the Award Notice posting/issuance date, DHCS will post or issue a notice as described in the DHCS Rights Section O.

Immaterial application defects

- 1) DHCS may waive any immaterial defect in any Application and allow the Applicant to remedy those defects. DHCS reserves the right to use its best judgment to determine what constitutes an immaterial deviation or defect.
- 2) DHCS' waiver of an immaterial defect in an Application shall in no way modify this RFA or excuse an Applicant from full compliance with all procurement requirements.

Correction of clerical or mathematical errors

DHCS reserves the right, at its sole discretion, to overlook, correct or require an Applicant to remedy any obvious clerical or mathematical errors occurring in the narrative portion of an application or on a Budget Attachment or other form.

- 1) If the correction of a mathematical error results in an increase or decrease in the total amount of funding sought, DHCS shall give the Applicant the option to accept the corrected amount or withdraw their application.
- 2) Applicants may be required to initial corrections to costs and dollar figures on any Budget Attachment or form if the correction of an error results in an alteration of the annual costs or total funds sought.
- 3) If a mathematical error occurs in a total or extended price and a unit price is present, DHCS will use the unit price to settle the discrepancy.

Right to remedy errors

DHCS reserves the right to remedy errors caused by:

- 1) DHCS office equipment malfunctions or negligence by agency staff,
- 2) Natural disasters (i.e., floods, fires, earthquakes, etc.)

No Grant Award or RFA cancellation

The issuance of this RFA does not constitute a commitment by DHCS to make one or more awards. DHCS reserves the right to reject all applications and to cancel this RFA if DHCS determines it is in the best interests of DHCS to do so.

Agreement amendments after award

DHCS reserves the right to amend any agreement resulting from this RFA. Amendments may include term extensions, scope of work modifications, budget or funding alterations, etc.

Q. Grantee Information and Final Agreement

Grantee General Requirements

1. Comply with all provisions of the grant agreement including, but not limited to, provisions of the quality and quantity of the direct and subcontracted services specified to the population(s) targeted;
2. Hire sufficient staff with the knowledge, skills, and background sufficient to carry out the terms of this agreement;

3. Ensure appropriate supervision of program staff in accordance with governmental laws and regulations as required by scopes of practice and/or as specified in grant language;
4. Provide services in a culturally sensitive manner;
5. Assure that community members and/or clients participate in the development of policies and procedures on an ongoing basis through their governing Board of Directors;
6. As a primary care clinic program, comply with all governmental laws and regulations appropriate to the operation of such clinic and ensure all sub-grantees also comply.

Grantee Program Requirements

Grantees shall maintain throughout the term of the grant agreement the following requirements:

1. Notify the IHP within 72 hours regarding any situation that would substantially alter the grantee's ability to comply with grant obligations;
2. Participate in relevant evaluation and monitoring activities as determined by the State to identify levels of grant compliance and need for consultation/technical assistance;
3. Participate in program evaluation activities such as surveys or questionnaires;
4. Participate in technical assistance activities identified as needed by the state including, but not limited to, workshops, conferences, individual assistance, etc.;
5. Carry out the provisions of the grant and ensure that all sub-grantees carry out the provisions of the grant in the most cost effective and cost efficient manner possible.

Resolution of language conflicts (RFA vs. final agreement)

If an inconsistency or conflict arises between the terms and conditions appearing in the final agreement and the proposed terms and conditions appearing in this RFA, any inconsistency or conflict will be resolved by giving precedence to the final agreement.

Limitation of State Liability

Payment for performance under the resulting agreement may be dependent upon the availability of future appropriations by the State Legislature or Congress for the purposes of the resulting agreement. No legal liability on the part of the State for any payment may arise under the resulting agreement until funds are made available through an annual appropriation and the Grantee or Grantee is notified accordingly. If an agreement is executed before ascertaining available funding and funding does not become available, DHCS will cancel the agreement.

Funding Reductions in Subsequent Years

If an agreement is executed and full funding does not become available for the second or a subsequent state fiscal year, DHCS will either cancel the agreement or amend it to reflect reduced funding and reduced activities. Continuation of services beyond the first state fiscal year is also subject to successful performance. Without prior DHCS authorization, grantees may not expend funds set aside for one budget period in a subsequent budget period.

Agreement Terms

The term of the resulting agreement(s) are expected to be 18 months and anticipated to be effective from February 24, 2023 through June 30, 2024. The agreement term may change if DHCS cannot execute the agreement in a timely manner due to unforeseen delays.

The resulting agreement(s) will not be in force or effect until signed by both parties and approved by the Department of General Services, if such approval is required. The Grantee is cautioned not to

commence performance until the grant is executed. Should performance commence before all approvals are obtained, said services may be considered to have been volunteered.

DHCS reserves the right to extend or modify the term of the resulting agreement via a formal grant amendment, as necessary, to complete or continue services for time only with no additional funding. DHCS/OTA offers no assurance that funding will be continued at the same level in future years.

Contractual Terms and Conditions

Each funded applicant must enter a written agreement that may contain portions of the Applicant's application (i.e., Budget, Work Plan), Scope of Work, standard contractual provisions, a grant agreement, and the exhibits identified below. Other exhibits, not identified herein, may also appear in the resulting agreement.

The exhibits identified in this section contain contractual terms that require strict adherence to various laws and contracting policies. An Applicant's unwillingness or inability to agree to the proposed terms and conditions shown below or contained in any exhibit identified in this RFA may cause DHCS to deem an Applicant non-responsible and ineligible for an award. DHCS reserves the right to substitute the latest version of any form or exhibit listed below in the resulting agreement if a newer version is available.

The exhibits identified below illustrate many of the terms and conditions that may appear in the final agreement between DHCS and the funded applicants. Other terms and conditions, not specified in the exhibits identified below, may also appear in a resulting agreement. Some terms and conditions are conditional and may only appear in an agreement if certain conditions exist (i.e., agreement total exceeds a certain amount, federal funding is present, etc.).

In general, DHCS will not accept alterations to the General Terms and Conditions (GTC), DHCS' Special Terms and Conditions, the contents of other cited exhibits, or alternate language proposed or submitted by a prospective grantee.

Exhibits	Exhibit Name
Exhibit A1	Grant Agreement (1 page)
Exhibit A	Scope of Work (5 pages)
Exhibit A2	Attachment I - Work Plan (1 Pages)
Exhibit B	Budget Detail and Payment Provisions (3 pages)
Exhibit C	General Terms and Conditions (GTC 04/2017). View or download this document on the Internet at: https://www.dgs.ca.gov/OLS/Resources/Page-Content/Office-of-Legal-Services-Resources-List-Folder/Standard-Contract-Language .
Exhibit D	Special Terms and Conditions (26 pages)
Exhibit E	Additional Provisions (4 pages)
Exhibit F	Contractor's Release (1 page)
Exhibit G	Travel Reimbursement Information (3 pages)
Exhibit H	HIPAA Business Associate Addendum (10 pages)

Federal Certification Clauses-Debarment and Suspension Certification

The Grantee certifies to the best of its knowledge and belief, that it and its principals:

- 1) Are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded by any federal department or agency;
- 2) Have not within a three-year period preceding this proposal been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State or local) transaction or contract under a public transaction; violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;
- 3) Are not presently indicted for or otherwise criminally or civilly charged by a governmental entity (Federal, State or local) with commission of any of the offenses enumerated in paragraph a.2) of this certification;
- 4) Have not within a three-year period preceding this application/proposal had one or more public transactions (Federal, State or local) terminated for cause or default;
- 5) It shall not knowingly enter into any lower tier covered transaction with a person who is proposed for debarment under 48 CFR part 9, subpart 9.4, debarred, suspended, declared ineligible, or voluntarily excluded from participation in such transaction, unless authorized by the State; and
- 6) It will include a clause entitled "Debarment and Suspension Certification" that essentially sets forth the provisions herein, in all lower tier covered transactions and in all solicitations for lower tier covered transactions.

If the Grantee is unable to certify to any of the statements in this certification, the Grantee shall submit an explanation to the program funding this grant.

Lobbying Restrictions and Disclosure

- a. The Grantee certifies, to the best of its knowledge and belief, that:
 - 1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the Grantee, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any federal contract, grant, loan, or cooperative agreement.
 - 2) If any funds other than federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the Grantee shall complete and submit federal Standard Form-LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions.
 - 3) The Grantee shall require that the contents of this certification be collected from the recipients of all subawards, exceeding \$100,000, at all tiers (including subcontracts, subgrants, etc.) and shall be maintained for three years following final payment/settlement of those agreements.
- b. This certification is a material representation of fact upon which reliance was placed when this contract was made and/or entered into. The making of the above certification is a prerequisite for making or entering into this contract pursuant to 31 U.S.C. 1352 (45 CFR 93). Any person who

fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

The Standard Form-LLL may be obtained from various federal agencies, federally sponsored World Wide Web Internet sites, DHCS upon request, or may be copied from Exhibit D entitled, Special Terms and Conditions.

Advance Payments

- a. The Grantee may request an Advance Payment in compliance with [Health and Safety Code Section 124525](#).
- b. An advance payment equal to not more than 25 percent of the total grant award shall be made to the Grantee at the time that the notice of award is issued, subject to the following conditions:
 - 1) Such payments shall be made only to the extent funds are available,
 - 2) The grantee is a non-profit agency,
 - 3) DHCS has evaluated the financial stability of the clinic and found it to be reasonably financially sound,
 - 4) Advance payments be made only to those nonprofit agencies that request an advance in writing, as further described below,
 - 5) The application or proposal contains the terms and conditions set forth in the request for application or the request for proposal,
 - 6) The application or proposal is signed by an authorized person representing the clinic,
 - 7) The amount of the advance payment will be fully liquidated from subsequent grant payments,
 - 8) If the grant is not fully executed, the grantee shall repay the full amount of any outstanding advance.

Prospective Payments

The Grantee shall receive two semiannual prospective payments during a 12-month grant award year provided that the conditions below are met. These payments are contingent upon the State's receipt and approval of satisfactory performance of the Scope of Work (SOW) and budgeted expenditures. Listed below is the payment schedule and required documents to be submitted before payment can be approved:

- a. A first prospective payment equal to, not more than, 50 percent of the total grant award shall be processed for payment to the Grantee upon enactment of the Budget Act, subject to the following conditions:
 - 1) Availability of funds,
 - 2) Formal execution of the grant by the state,
 - 3) Submission by the Grantee of a written request for payment
 - 4) If the grantee was the recipient of a grant for the prior year, Grantee's timely and accurate submission, and the DHCS' approval, of the progress reports required under the grant, budget expenditure report, and annual reconciliation report, from the prior year,
 - 5) The amount of the advance payment will be fully liquidated from subsequent grant payments.

- b. A second prospective payment equal to not more than 40 percent of the total grant award shall be processed for payment to the grantee no earlier than January 1 of the grant year, subject to the following conditions:
 - 1) Submission by the Grantee of a written request for payment, as described below,
 - 2) Grantee's timely and accurate submission, and DHCS' approval, of the progress reports required under the grant and the Budget Expenditure Reports for July through December of the fiscal year. Grantee's satisfactory performance under the grant.

- c. Any remaining amount, which shall be at least 10 percent of the total annual grant award, shall be retained by DHCS pending:
 - 1) Submission by the Grantee of a written request for payment
 - 2) Grantee's timely and accurate submission, and DHCS' approval, of the progress reports required under the grant and the Budget Expenditure Report for January through April of the fiscal year, the Annual Reconciliation Report, and satisfactory performance under the grant.