

DEPARTMENT OF HUMAN SERVICES
INVITATION FOR BIDS
IN HOME AIDE SERVICES
SSA/IHAS-21-001-S

QUESTIONS AND RESPONSES #3

Question 1: On the B-1 Bid form how do we calculate the average hourly rate, weight and weighted hourly rate?

Response: The Excel spreadsheet calculates the Average Hourly Rate, the Weighted Hourly Rate, and the Composite Weighted Hourly Rate.

Question 2: Can we manually write our figures above each base year on the B-1 Bid form?

Response: The B-1 Bid Form is an Excel Spreadsheet that must be filled-out in Excel. The form may not calculate properly in Google Sheets. The initial values in the B-1 Form are only placeholders. Replace them with the rates you are bidding for each Base Year for Chore, Personal Care, and Respite Care. The B-1 form is a digital form and is not meant to be printed.

Question 3: What are we bidding? Dollar amounts or hours, etc.?

Response: Bidders must respond with a Composite Weighted Hourly Rate on the B-1 Financial Bid form.

Question 4: This program allows access to clients, what else does this program offer?

Response: Please refer to Section 2.2 Background and Purpose of the IFB.

Question 5: Does the winning bid get funds upfront?

Response: No. The payment terms are described in Section 3.3 Invoicing.

Question 6: How does the reimbursement process work?

Response: See response to Question 5.

Question 7: Can a contractor exit the program voluntary before the end of the 5-year period?

Response: The State would prefer that Contractors remain on the Contract for the full term.

Question 8: Can we refuse a case or referral?

Response: See IFB Section 2.3.3 B Conditions Governing Service Delivery, and Section 2.3.14 Performance Measures – Scoring Chart B summary of Performance Measures and Scoring Rubric.

Question 9: What are the advantages and disadvantages of this program?

Response: Pleaser review the Background and Purpose of the IFB.

Question 10: How does a newly entered agency "catch up" after round 2. What is the procedure?

Response: The “Rounds” are simply what eMMA calls updates to the Solicitation.

Question 11: When attaching the documents to our Bid in eMMA, should we attach them separately or as a combined PDF?

Response: The B-1 Bid Form is an Excel spreadsheet and should not be made into a PDF. Submit the B-1 as an Excel file. Otherwise, separate attachments are preferred but not necessary.

Question 12: Are RN assessments included in this contract?

Response: See IFB Section 2.3.6 for RN Nursing Evaluation and Supervision.

Question 13: Do bidders need all the insurances or just the worker's compensation plus one additional insurance (e.g. commercial general liability or professional liability)?

Response: Bidders must meet all the insurance requirements described in Section 3.6 Insurance Requirements.

Question 14: Are agencies required to show and be generating a certain amount of annual revenue to be considered for this contract?

Response: See Section 5.4.8 of the IFB for accepted proofs of Financial Capability.

Question 15: Are the Bidders selected based upon the least cost that is put into the proposal or are they selected based upon their performance based on the three performance criteria measures (service delivery, deliverables and satisfaction surveys)?

Response: Bidders that meet the minimum requirements of the IFB are ranked from the lowest amount to the highest, not based upon the performance measures described in Section 2.3.13. The performance measures listed in Chart A of this Section of the IFB will be applied to the Contractors after award.

Question 16: Does the signature page on Attachment I - Non-Disclosure Agreement (Contractor) have to have a seal?

Response: No. A signature is sufficient.

Question 17: Do the two reference letters come directly from current clients of the Contractor or are they submitted by the Bidder?

Response: Reference letters provided by the Bidder's clients must be submitted by the Bidder through eMMA at the time of submission of their Bid.

Question 18: In the reference letter from clients, what does Name of client organization mean? Is it our agency name or another organization the client may be affiliated with?

Response: The name of client organization is the name of the reference, whether an individual or business.

Question 19: For the references, what is value, type, and description of goods?

Response: **The reference letters should include a full description of the services that the Bidder provided, including the dollar value, type, duration, etc.**

Question 20: If the individual client does not have an email, can we just include their address and phone number? Or do we include contact information from the Support Planner as well?

Response: **If the client does not have an email account the name, title, and telephone number will be sufficient.**

Question 21: Can we get a referral from local DSS we have been working with?

Response: **No. Local Departments of Social Services will not provide references.**

Question 22: We currently only participate with Medicaid waiver programs and private pay. We do not participate with Medicare or Private insurance. Would we bill the State for the services rendered and how much does the state pay us?

Response: **This is not a Medicaid waiver program. The State will pay the Bidder per the rates proposed on the B-1 Bid Form.**

Question 23: In the opening Pre-Bid Conference remarks, it was mentioned that there are approximately 2,000 clients per year. Can you give us a breakdown of the number of clients by jurisdictions?

Response: **Fiscal Year 2020 is the latest for which we have statistics, which is Statewide. Please see the chart below:**

IHAS Client Count SFY 2020

*Active IHAS Cases	
County	# of Clients
Allegany	91
Anne Arundel	283
Baltimore Co	206

Calvert	31
Caroline	54
Carroll	48
Cecil	38
Charles	16
Dorchester	29
Frederick	105
Garrett	17
Harford	35
Howard	11
Kent	13
Montgomery	61
Prince George's	98
Queen Anne's	17
St. Mary's	10
Somerset	43
Talbot	13
Washington	120
Wicomico	18
Worcester	38
Baltimore City	306
Total	1701

***Source: AS07-Annual (7/1/19-6/30/20)**

Question 24: What is the estimated budget for this Solicitation?

Response: The estimated budget includes all jurisdictions and the full term of the contract, which will not be helpful to the Bidder.

Question 25: Regarding the laptops/desktops – Appendix 13. Do these devices need to be given to all of the caregivers who are supplying services? Are they for in-office use or at the client homes? Or is this directed at the office staff or RN?

Response: Desktop, laptops and other devices must be provided by the Contractor to its staff as appropriate to ensure that staff have access to the case information in the field and in the office.

Question 26: Is fingerprinting required as part of the background check?

Response: Fingerprinting is required.

Question 27: Can the respite care services can be completed by LPN/RN's?

Response: Prior to the initiation of Respite Care services, the RN, not the LPN, must evaluate the IHAS client during a joint meeting with the client, the assigned CNA, the client's LDSS case worker and caregiver/informal support person(s) to identify the client's needs and to ensure the client's needs are not beyond the scope of the IHAS program (see IFB Section 2.3.7 Respite Care).

Question 28: In Section 3.10.2, Personnel Experience and Qualifications. Are Licensed Practice Nurse (LPNs) allowed to perform supervision visits under the RN?

Response: No, Licensed Practice Nurses (LPNs) are not allowed to perform supervision visits under the RN.

Question 29: Under the current model of Residential Service Agencies, the State allows agencies to use LPNS because there is a shortage of RNs. The shortage of RNs is growing. The Maryland Board of Nursing currently allows the LPN to perform supervisory visits under the RN. Please provide more investigation or clarity on this question.

Response: Contractors must employ at least one Registered Nurse (RN) and the RN must provide supervision for the CNAs. Under this Contract LPNs cannot perform supervisory visits under the RN.

Question 30: Is there a maximum number of referrals a contractor can receive?

Response: There is not a maximum number of referrals a Contractor can receive.

Question 31: Will an RSA be assigned to Medicare based patients, even though the RSA cannot bill Medicare.

Response: There is no guarantee that a Residential Service Agency (RSA) will be assigned to Medicare based patients.

Question 32: Is it safe to say that the CNA will always be in the home and the RN be in the home as needed for the client served?

Response: The CNA will primarily be providing care to the clients in their home. The RN will provide Nursing Evaluation of the client, make home visits every sixty (60) days to assess the client's condition, and supervise the quality of Personal Care Services provided by the CNA.