Questions and Answers

1. Will preferential treatment be given to applications submitted by organizations currently participating in the Nursing Home Transition and Diversion or Traumatic Brain Injury waiver programs as Regional Resource Development Centers (RRDC)? Such entities have some, if not all, of the preferred qualifications listed in section II.B and are already conducting some of the program activities outlined in section III.B.

**Answer:** No. Any applicant meeting the minimum eligibility requirements listed in Section II.A of the RFA may apply. Applicants should also possess the preferred qualifications listed in Section II.B.

2. If preferential treatment will be given to such entities, will additional organizations be considered eligible for funding under this Demonstration? Will their applications be examined any differently from RRDCs in the competitive process?

**Answer:** Preferential treatment will not be given to current RRDC contractors. Please see response to Question #1.

3. Is a not-for-profit home care provider eligible to participate in this Demonstration? If so, are there any special requirements they must meet?

**Answer:** Any not-for-profit entity meeting the minimum eligibility requirements listed in Section II.A of the RFA may apply. There are no additional special requirements.

4. Is it permissible to attach Letters of Support?

**Answer:** It is permissible to attach Letters of Support; however, Letters of Support will not be evaluated.

5. The following questions refer to Section I. Introduction, Part A. Description of Program, paragraphs 1 and 2 and Section III. Project Narrative/Work Plan Outcomes, Part B. Program Activities, B.1 Contact select nursing home residents and provide objective information about home and community based long term care options and B.2 Make referrals to and work with the nursing home discharge planner as requested by the nursing home resident and/or his/her legal guardian.
a) Could a not-for-profit skilled nursing facility, through its Long Term Home Health Care program, use grant funds to hire a social worker specifically for the purpose of transitioning out residents into the community from its own two nursing homes or must it adhere just to the list of identified residents supplied by the DOH?

Answer: As stated in Section I.A (page 4), the purpose of this RFA is “to identify and outreach to select nursing home residents to provide them with objective information about home and community-based options and make referrals as requested.” As stated in Section III.B.1 (page 9), contractor(s) selected under this RFA must use a peer-based approach to contact nursing home residents. Selected contractor(s) may either employ or subcontract with persons with disabilities and seniors to perform this activity. [Note: Such persons with disabilities and seniors are considered to be peers for the purpose of this RFA.]

As stated in Section III.B.1 (page 9), “DOH will provide the names of nursing home residents to contractor(s) selected under this RFA.” Selected contractor(s) must adhere to list of identified residents supplied by DOH.

b) Would it be possible for this social worker position to transition out the organization’s own SNF residents if he/she also transitioned out residents from other long-term facilities as identified by the DOH? If so, is there a quota as to how many DOH-identified residents would need to be placed?

Answer: Please see response to Question 5.a. The purpose of this RFA is to provide objective information about home and community-based options and make referrals, not to complete the transition of residents out of nursing homes. In addition, selected contractors(s) must adhere to the list of identified residents supplied by DOH. There is no quota associated with completed transitions from institutional to community based care.

c) If it’s permissible to do the above-mentioned, would the social worker position be allowed to include the organization’s own community-based services (home care, adult day program, etc.) when offering/arranging all other available resources to help the resident live safely and securely in the community?

Answer: Please see responses to Question 5.a and 5.b.; the RFA does not include “arranging community based services as a primary responsibility”. In addition, as stated in Section III.B.1 (page 9) contractor(s) selected under this RFA must use a peer-based approach to contact nursing home residents. As stated in Section V.A.4.a.1 (page 20), the applicant should “discuss how your agency will avoid any duplication of effort if it is currently conducting similar outreach efforts. Also include the procedures that your organization would implement and follow to prevent conflicts of interest and assure against influence in regard to referrals.” Section V.A.4.b.1 (page 22) states applicants must “describe a plan to assure information is provided to nursing home residents and/or their legal guardians in an objective manner so as not to influence any
decisions made by nursing home residents, especially if the applicant is a provider of services.” The selected contractors may include information about the organization’s own community-based services, however, according to Section V.A.4.b.1 (page 22), “the information to be provided should include a range of available home and community based long term care options, not just those home and community based services provided by the applicant.”

6. Are there limitations on the types of entities that we can partner with (i.e., subcontract with) to participate in the programmatic activities? For instance, is it permissible to subcontract with a local ombudsman program or the agency in which it is housed to conduct peer outreach activities with the nursing home residents?

**Answer:** There are no limitations of the types of entities that a selected contractor can partner with (i.e. subcontract with) to participate in programmatic activities. It is permissible to subcontract with a local ombudsman program, or the agency in which it is housed, to conduct peer outreach activities. Please refer to Page 6 of the RFA which pertains to organizations applying as a consortium for a regional contract.

7. Is there a word/page limit to the proposal, e.g. the Narrative?

**Answer:** There is no word or page limit.

8. According to the RFP [sic] text (page 5, section C), persons in the catchment area of Albany, Columbia, Greene, Rensselaer, Schenectady, and Schoharie Counties, who are prospective consumers needing community placement, are identified in the “Minimum Data Set.” Our organization has consumers who contact us directly seeking services or advocacy to help them move to the community. Could these individuals who may not be identified in the DOH database be considered for services from staff funded under the grant?

**Answer:** No. According to Section V.A.5, “funding for this contract may only be used for expanded and/or new activities pursuant to this RFA and may not supplant existing funds for current staff or activities.”

9. I have incorporated my service as a Limit [sic] Liability company and I have started the process for filing as a not-for-profit organization. Can I still apply for the grant while awaiting paper work processing for not-for-profit recognition?

**Answer:** No. An applicant must be a not-for-profit corporation at the time the applicant submits an application. Please see Section II.A (page 8) for the minimum eligibility requirements regarding who may apply.

10. We have come up with a grant figure of $160,000. This allows us to operate as a non-profit for a year. This way we can provide our service to the public without a charge to the families. However, is our proposal more feasible if we ask for a lower amount? This would mean a cost to our clients.
**Answer:** As stated in Section V.A.5 (page 23), "all costs must be related to the provision of Identification of and Outreach to Nursing Home Residents, as well as be consistent with the scope of services, reasonable and cost effective." In addition, as stated in Section V.C. (page 24), an important consideration in the application review process will be "a clear and appropriate budget justification and how consistent the proposed budget is with the scope of activities to be conducted including the overall staffing pattern." Please also note that funding provided under this RFA can only be used to perform activities set forth in this RFA. In addition, selected contractor(s) may not bill families for activities being performed through a contract awarded under this RFA.

11. **Assuming that I receive the Grant Monies from NYS, what qualifications are there for paying independent contractors?** For example, my “transition team” recommends hand rails in a client’s apartment. I hire and pay an independent contractor (handy man type) to buy and install them. I write the individual a check from my LLC account to pay for the purchase of the parts, as well as a flat fee for his labor. Are there certain qualifications that he must have, such as contractor license/insurance/bonding? Does it matter if he is a union or non-union individual? Is it ok to use a “less expensive” handyman, that many not have any of the listed qualifications?

**Answer:** As stated in Section I.A (page 4) of this RFA, the purpose of this RFA is to provide select nursing home residents with objective information about home and community-based options and make referrals as requested," not to provide direct services, such as environmental modifications, to individuals transitioning from nursing homes. Additionally, as stated in Section III.B.2 (page 10), selected contractor(s) will "make referrals to and work with the nursing home discharge planner as requested by the nursing home resident and/or his/her legal guardian."

12. **Section I.A second paragraph – The time line indicates a possible two year plan, will this continue beyond 2011?**

**Answer:** No.

13. **Section I.B first paragraph states “...will provide enhanced Federal Medical Assistance Percentage (FMAP) reimbursement for select services for 365 days to persons who have...” How much is enhanced and how will the person access the money? Will it go to the individual or provider? How could a provider access this, let’s say for example if someone needs extra money to do a security deposit and buy furniture for an apartment. How could that be done?**

**Answer:** The enhanced FMAP that the State receives is used to fund long term care rebalancing initiatives, such as this Money Follows the Person Identification of and Outreach to Nursing Home Residents Project. Individuals and providers cannot access the enhanced FMAP.
14. Section II Regional Areas and Estimated Funding Levels...."Note section". If you know the size of the eligible population residing in our area, we would like to have that number also, so that we could write a better informed proposal.

Answer: Please visit the New York State Department of Health’s website at http://nursinghomes.nyhealth.gov/ to obtain information on the number of nursing homes and certified beds in each region. Given that contracts funded under this RFA are not expected to begin until 10/1/09, the actual number of nursing home residents to be contacted through this project is not available at this time.

15. Section III.B.1 (page 9) states that one of the activities is to provide objective information about home and community based long term care options. We assume there will be no conflict between being awarded this program and the NHTD [sic] since with neither do we make money from participants. We also assume there will not be a conflict in having the MFP staff being supervised by staff that is being compensated by the NHTD and TBI waivers.

Answer: It is not a conflict; however, it may present a possible duplication of efforts. Please refer to Section V.A.4.1 (page 20) which advises applicants to “discuss how your agency will avoid any duplication of effort if it is currently conducting similar outreach efforts. Also include the procedures that your organization would implement and follow to prevent conflicts of interest and assure against influence in regard to referrals.” Please also note that Section V.A.4.b.1 (page 22) states that “applicants should describe a plan to assure information is provided to nursing home residents and/or their legal guardians in an objective manner so as not to influence any decisions made by nursing home residents, especially if the applicant is a provider of services.”

16. Section III.B.1 (page 9) refers to using a “peer-based approach”. We would like a further definition of “peer based” in regard to senior citizens and persons with disabilities. This is the only section that peer based is mentioned. Is it anticipated that we might use different staff for this first program activity and could that peer based staff work per diem?

Answer: As stated in Section III.B.1 (page 9), “the peer-based approach utilized by contractors may be cross-disability and/or cross-generational. Contractor(s) may employ or subcontract with persons with disabilities and seniors to provide this activity.” This means that the contractor must use peers, either persons with disabilities or seniors” to “contact select nursing home residents and provide objective information about home and community based long term care options.” Please see Section III.B.A (page 9) for a description of this activity. Given that the peer-based approach may be cross-disability and/or cross-generational, peers that are seniors may contact select nursing home residents who are persons with disabilities and vice versa. Peers may work per diem for selected contractor(s). As stated in Section V.C. (page 24), an important consideration in the application review process will be “a clear and appropriate budget justification and how consistent the proposed budget is with the scope of activities to be conducted including the overall
staffing pattern.” Additionally, “the ability to provide peer based services” is a preferred qualification listed in Section II.B (page 8).

17. Will there be any money in MFP specifically for housing? Will there be a new component in NHTD for housing? Note: We anticipate this to be the hardest section of the plan to set up, not only because it may be the least funded, but because there may be no one who may be specifically in charge of that component…not the CHHA, or EISEP, not Adult Care, etc.

Answer: The Money Follows the Person (MFP) Demonstration Identification of and Outreach to Nursing Home Residents Project is separate and apart from the Nursing Home Transition and Diversion (NHTD) waiver. As stated in Section I.A (page 4), the purpose of this RFA is “to identify and outreach to select nursing home residents to provide them with objective information about home and community-based options and make referrals as requested.” Funding for housing is not available through this project. For answers to specific questions regarding the NHTD waiver, please contact the DOH NHTD Waiver Management Staff at NHTDWaiver@health.state.ny.us

18. Will there be preprinted materials available from DOH to use in publicizing this program and/or will there be a significant anticipated section in this budget write up for advertising?

Answer: DOH will not make preprinted advertising materials for this project available to the selected contractor(s). As stated in Section III.B.1 (page 9), “DOH will provide the names of nursing home residents to contractor(s) selected under this Request for Application (RFA).” In addition, as stated in Section V.A.4.b (page 21), “applicants should describe plans for contacting nursing home residents, legal guardians, and key nursing home staff.” As stated in Section V.C. (page 24), an important consideration in the application review process will be “a clear and appropriate budget justification and how consistent the proposed budget is with the scope of activities to be conducted including the overall staffing pattern.”