



State of Arkansas  
 ARKANSAS DEPARTMENT OF HEALTH  
 4815 W Markham St  
 Little Rock, Arkansas 72205

**NOTICE OF FUNDS**  
**AVAILABILITY**  
 SOLICITATION DOCUMENT

SOLICITATION INFORMATION			
NOFA Number:	DH-22-0017	NOFA Issued:	03/24/2022
Description:	Arkansas Clinical Transformation (ACT) Program		
Agency:	Arkansas Department of Health – Center for Health Advancement, Chronic Disease Prevention and Control Branch		

SUBMISSION DEADLINE FOR RESPONSE	
Application Due Date/Time:	<b>May 05, 2022 @ 2:00 PM CST</b>
Applications <b>shall not</b> be accepted after the due date and time. It is the responsibility of the applicant to submit responses at the designated location on or before the application due date and time. Responses received after the designated application due date and time <b>shall</b> be considered late and <b>shall</b> be returned without further consideration.	

SUBMISSION OF RESPONSE DOCUMENTS	
Delivery Method:	Applications <b>must</b> be submitted electronically to the issuing officer’s email address shown below.

ARKANSAS DEPARTMENT OF HEALTH CONTACT INFORMATION			
Issuing Officer:	Tammy Coney	Phone Number:	501-280-4743
Email Address:	tammy.coney@arkansas.gov	Fax Number:	501-661-2070
OR Issuing Officer:		Phone Number:	
Email Address:		Fax Number:	
ADH Website:	<a href="http://www.healthy.arkansas.gov/aboutADH/Pages/GrantBidOpportunities.aspx">http://www.healthy.arkansas.gov/aboutADH/Pages/GrantBidOpportunities.aspx</a>		

## **SECTION 1 - GENERAL INFORMATION**

- **Do not provide responses to items in this section unless specifically and expressly required.**

### **1.1 PURPOSE**

The Arkansas Department of Health (ADH) issues this Notice of Funds Availability (NOFA) on behalf of the Chronic Disease Prevention and Control Branch to obtain applications for funding primary care practices to participate in the Arkansas Clinical Transformation (ACT) program. This program offers quality improvement and clinic redesign training to clinic teams to improve the management of patients with chronic diseases. Expected outcomes include improved primary and preventive care, reduced episodes of catastrophic chronic disease events, reduced emergency department (ED) and urgent care visits, reduced hospitalizations, and reduced cost of care. Chronic diseases of focus include hypertension, hypercholesterolemia, ischemic vascular disease, and diabetes. The program also emphasizes preventive screening for chronic diseases.

The COVID-19 pandemic has shown that COVID-19 patients with one or more chronic disease conditions are at greater risk of hospitalization and other adverse outcomes compared to COVID-19 patients in general. Primary care physicians and practices now play an even greater role in helping their patients manage their overall health status and health risks.

### **1.2 BACKGROUND**

The ACT program began as the Arkansas Chronic Illness Collaborative in 2003, providing quality improvement (QI) training to Community Health Centers (CHCs), private practices, and hospital-based clinics to improve chronic disease outcomes for patients in primary care settings. ACT is a QI collaborative program that promotes primary care transformation, use of best practices, and achieving systems change through application of Chronic Care Model and National Committee for Quality Assurance Patient-Centered Medical Home (PCMH) principles. In 2019, ACT was restructured to enable ongoing clinic participation. The program is tiered to include a 12-month intensive training phase followed by annual enhanced training to ensure continuity of QI and sustained improvement.

Primary care practices in Arkansas will be selected to participate in ACT based on eligibility criteria outlined in this NOFA and commitment to the program. The award amount for participation in the Intensive Program Phase will be \$20,000 from July 2022 through June 2023. Clinics transition from the 12-month Intensive Phase to the Enhanced Program Phase after June 2023, which is renewable annually. The award amount for participation in the Enhanced Program Phase will be \$5,000 annually for continuing participants subject to state contractual rules and regulations. Clinics are encouraged to continue in the Enhanced Phase of ACT program indefinitely to help improve performance and chronic disease patient outcomes. **Please note:** Practices currently funded by NOFA #DH-19-0015 issued in 2021 are ineligible to apply for this NOFA.

ACT program structure:

- 1) Intensive Program Phase consisting of five Learning Sessions, monthly conference calls or webinars in months when learning sessions are not held, and quarterly performance data submissions from July 2022-June 2023.
- 2) Enhanced Program Phase consisting of one annual Advanced Learning Session and quarterly performance data submissions annually for continuing participants subject to state contractual rules and regulation.

### **1.3 GRANT PERIOD**

- A. The anticipated period **shall** be from July 2022 through June 2023.

### **1.4 AVAILABLE FUNDING**

- A. Grant funding will be awarded by the ADH Chronic Disease and Stroke Prevention Control Branch for up to six (6) eligible primary care practices as follows:
  - 1) Intensive Program Phase: July 2022-June 2023 (FY23): \$20,000
  - 2) Enhanced Program Phase: July 2023: \$5,000 annually for continuing participants subject to state contractual rules and regulations.
  - 3) The maximum amount of funding available to newly participating clinics is \$20,000. Funds will be awarded through a competitive applicant selection process and are based on eligibility criteria, clinic readiness to change and long-term commitment to the program. Funds will be disbursed after learning sessions upon

receipt of an invoice from the grantee by the ADH based on documented completion of the requirements below and subject to approved budget expenses. **Please note:** Failure to meet the Applicant Requirements listed under Section II relating to attendance may result in decreased reimbursements.

- B. Funding is contingent upon review and acceptance of application.
- C. Funds **must** be used in accordance with the budget provided.
- D. ADH reserves the right to determine allowable and non-allowable costs.
- E. Prior to award, ADH may increase the amount of funding in efforts to maximize program support. Recipient(s) **must** submit a revised budget worksheet reflecting changes.

#### 1.5 **ELIGIBILITY & FUNDING REQUIREMENTS**

Up to six (6) recipients will be accepted and funded. Applicants **must** meet the following criteria to be eligible to obtain funding.

- A. Eligible practices must meet one of the following designation criteria:
  - Primary care practices affiliated with a hospital, health system, or practice network/group
  - Independent private primary care practices such as, family medicine, internal medicine clinics
  - Federally Qualified Health Centers (FQHCs), also known as Community Health Centers (CHCs)
- B. Eligible practices must have electronic health records (EHR) system capabilities for day-to-day management of patients and clinical quality measure data extraction capabilities.

#### 1.6 **BUDGET & JUSTIFICATION**

- A. Applicants **must** complete the budget worksheet provided as a separate Excel file. The worksheet will not be included in the scoring of applications.
- B. Recipient(s) **shall** be reimbursed for allowable expenses only. Allowable expenses are those approved by ADH within the budget's itemized listing.

#### 1.7 **ISSUING OFFICER**

The issuing officer is the sole point of contact throughout this solicitation. The ADH contact names listed on page 1 are the sole point of contact throughout this solicitation.

#### 1.8 **DEFINITION OF REQUIREMENT**

- A. The words "**must**" and "**shall**" signify a requirement of this NOFA and that vendor's agreement to and compliance with that item is mandatory.
- B. Applicant may request exceptions to **non-mandatory** items. The requested exception should reference the specific solicitation item number to which the exception applies.

#### 1.9 **DEFINITION OF TERMS**

The issuing officer has made every effort to use industry-accepted terminology in the competitive bid and will attempt to further clarify any point or item in question. The following acronyms will be used throughout the document.

ADH: Arkansas Department of Health  
ACT: Arkansas Clinical Transformation Program  
NOFA: Notice of Funds Availability  
FQHC: Federally Qualified Health Center  
CHC: Community Health Center  
HIT: Health Information Technology  
PCMH: Patient-Centered Medical Home  
QI: Quality Improvement  
EHR: Electronic Health Records  
POF: Population of Focus  
TCP: Total Clinic Population

### 1.10 **APPLICATION INSTRUCTIONS**

- A. The NOFA solicitation document is for informational purposes and includes all details of the sub-grant.
- B. Applicants **must** submit an Application Packet on or before the application due date/time.
- C. The Application Packet should include all the following mandatory items and be arranged as follows:
  - 1. Completed and Signed Application Page (Appendix A)
  - 2. Agreement and Compliance Pages (If included)
  - 3. Proposed Subcontractors Form
  - 4. Restriction of Boycott of Israel Certification
  - 5. SF-LLL Disclosure of Lobbying Activities
  - 6. E.O. 98-04 – Contract and Grant Disclosure and Certification Form, if \$10,000 or greater
  - 7. Clinic Assessment Form (Appendix B)
  - 8. Budget Worksheet (Refer Sample Budget in Appendix C)
  - 9. Copy of Illegal Immigrant Certification <https://www.ark.org/dfa/immigrant/index.php/user/welcome>
  - 10. Business Associate Agreement (AS-4001)
  - 11. Physician Office Assessment of Readiness to Change Clinic Practices (Appendix D)
  - 12. Letter of support from Team Leader (physician champion or APRN) and/or Medical Director documenting organization's commitment for ACT participation.
  - 13. One-page narrative description of practice, population served by clinic, and need for funding to promote change for patients with chronic diseases.

The Application Packet **must** include complete documents including signatures as required.

- D. **DO NOT** include any other documents or ancillary information such as a cover letter or promotional/marketing information.
- E. Label documents and/or information so as to reference the solicitation item number.
- F. If ADH requests additional information, it **must** be delivered within three (3) business days of the request. ADH reserves the right to disqualify applicant's if additional information is not received within the timeframe specified.

### 1.11 **APPLICATION SIGNATURE PAGE**

- A. An official authorized to bind the applicant to a resultant contract **must** sign the Application Signature Page included in the Application Packet.
- B. Applicant's signature on this page **shall** signify vendor's agreement that the following **may** cause the applicant's response to be disqualified:
  - 1. Additional terms or conditions submitted intentionally or inadvertently
  - 2. Any exception that conflicts with a requirement of this Solicitation
  - 3. Incomplete documentation

### 1.12 **AGREEMENT AND COMPLIANCE PAGES**

- A. Applicant **must** sign all Agreement and Compliance Pages relevant to the solicitation document if provided in the Application Packet.
- B. Submission of applicant and applicant's signature on these pages **shall** signify agreement to and compliance with all requirements within the solicitation and application.

### 1.13 **PRIME CONTRACTOR RESPONSIBILITY**

- A. A single recipient **must** be identified as the prime contractor.
- B. The prime contractor **shall** be responsible for the contract and jointly and severally liable with any of its subcontractors, affiliates, or agents to the State for the performance thereof.

### 1.14 **FUNDING ESCALATION**

- A. ADH may increase funding throughout the duration of the contract.

- B. Recipient **must** provide a revised budget reflecting the increase. ADH **shall** have the right to require additional information pertaining to the increase.
- C. ADH **must** approve of all budget revisions.

**1.15 PROPRIETARY INFORMATION**

- A. Submission documents pertaining to this solicitation become the property of the State and are subject to the Arkansas Freedom of Information Act (FOIA).
- B. The vendor **shall** be responsible for identifying all proprietary information and for ensuring the electronic copy is protected against restoration of redacted data.
- C. The redacted copy **shall** be open to public inspection under the Arkansas Freedom of Information Act (FOIA) without further notice to the vendor.
- D. If a redacted copy of the submission documents is not provided with vendor's response packet, a copy of the non-redacted documents, with the exception of financial data, **shall** be released in response to any request made under the Arkansas Freedom of Information Act (FOIA).
- E. If the State deems redacted information to be subject to Arkansas Freedom of Information (FOIA), the vendor will be contacted prior to release of the documents.

**1.16 CAUTION TO RECIPIENTS**

- A. Prior to any contract award, all communication concerning this solicitation **must** be addressed through ADH.
- B. Applicant **must not** alter any language in any solicitation document provided by the State.
- C. All official documents and correspondence related to this solicitation **shall** be included as part of the resultant contract.
- D. Responses **must** be submitted only in the English language.
- E. The State **shall** have the right to award or not award a contract, if it is in the best interest of the State to do so.
- F. Applicant **must** provide clarification of any information in their response documents as requested by ADH.
- G. Qualifications **must** meet or exceed the required specifications as set forth in this solicitation.

**1.17 REQUIREMENT OF ADDENDUM**

- A. This solicitation **shall** be modified only by an addendum written and authorized by ADH.
- B. An addendum posted within three (3) calendar days prior to the application deadline and **shall** extend the due date and may or may not include changes to the solicitation.
- C. The applicant **shall** be responsible for checking the ADH website, <http://www.healthy.arkansas.gov/aboutADH/Pages/GrantBidOpportunities.aspx> for any and all addenda up to application deadline.

**1.18 AWARD CRITERIA AND RESPONSIBILITY**

- A. ADH will provide funding based on the receipt, review, and acceptance of applications.
- B. Any resultant sub-grant of this NOFA shall be subject to State approval processes which may include Legislative review.

**1.19 MINORITY BUSINESS POLICY**

- A. A minority-owned business is defined by Arkansas Code Annotated § 15-4-303 as a business owned by a lawful permanent resident of this State who is:

- African American
- American Indian
- Asian American
- Hispanic American
- Pacific Islander American
- A Service-Disabled Veteran as designated by the United States Department of Veteran Affairs

- B. A women-owned business is defined by Act 1080 of the 91st General Assembly Regular Session 2017 as a business that is at least fifty-one percent (51%) owned by one (1) or more women who are lawful permanent residents of this State.
- C. The Arkansas Economic Development Commission conducts a certification process for minority-owned and women-owned businesses. If certified, the Prospective Contractor's Certification Number should be included on the Application Signature Page.

#### **1.20 PROHIBITION OF EMPLOYMENT OF ILLEGAL IMMIGRANTS**

- A. Pursuant to Arkansas Code Annotated § 19-11-105, prior to the award of a sub-grant, selected recipients must have a current certification on file with ADH stating that they do not employ or contract with illegal immigrants.
- B. Recipients must complete their certification at <https://www.ark.org/dfa/immigrant/index.php/user/welcome> and should submit a hardcopy accompanying application packet.

#### **1.21 RESTRICTION OF BOYCOTT OF ISRAEL**

- A. Pursuant to Arkansas Code Annotated § 25-1-503, a public entity shall not enter into a contract with a company unless the contract includes a written certification that the person or company is not currently engaged in, and agrees for the duration of the contract not to engage in, a boycott of Israel.
- B. This prohibition does not apply to a company which offers to provide the goods or services for at least twenty percent (20%) less than the lowest certifying business.
- C. By signing the Application Packet, the applicant agrees and certifies that they do not, and will not for the duration of the contract, boycott Israel.

#### **1.22 CERTIFICATION REGARDING LOBBYING**

- A. The applicant will comply with Public Law 101-121, Section 319 (Section 1352 of Title 31 U.S.C.) by certifying that appropriated federal funds have not been or will not be used to pay any person to influence or attempt to influence a federal official/employee in connection with awarding of any federal contract, sub-grant, loan or cooperative agreement for an award in excess of \$100,000.
- B. If the applicant has paid or will pay for lobbying using funds other than appropriated federal funds, Standard Form-LLL (Disclosure of Lobbying Activities) shall be completed and included with the Application Packet.

#### **1.23 CERTIFICATION REGARDING DEBARMENT AND SUSPENSION**

- A. The recipient, as a lower tier recipient of federal funds, will comply with Executive Order 12549 (Certification Regarding Debarment, Suspension, Ineligibility, and Voluntary Exclusion – Lower Tier Covered Transactions).
- B. By signing and submitting this application package, the applicant(s) understands and agrees, as defined in 45 CFR Part 76, and 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 from participation in this transaction by any federal department of agency.
  2. Where the prospective lower tier participant is unable to certify to any of the above, such prospective participant shall attach an explanation to this proposal.

#### **1.24 PAST PERFORMANCE**

An applicant's past performance with the State may be used to determine if the applicant is "responsible." Responses submitted by applicant determined to be non-responsible **shall** be disqualified.

#### **1.25 PUBLICITY**

- A. Do not discuss the solicitation nor your proposal response, nor issue statements or comments, nor provide interviews to any public media during the solicitation and award process.

B. Failure to comply with this requirement may be cause an applicant to be disqualified.

#### **1.26 PRIVACY & SECURITY REQUIREMENTS**

The Contractor **shall**:

- A. At all times comply with the requirements of the Arkansas Personal Information Protection Act and any other State/Federal laws, regulations, rules, and policies regarding the privacy and security of information.
- B. Provide for physical and electronic security of all Protected Health Information generated or acquired by the contractor in implementation of the contract, in compliance with Health Insurance Portability and Accountability Act (HIPAA) and the Health Information Technology for Economic and Clinical Health (HITECH) Act, and consistent with the Business Associate Agreement executed between the parties.

#### **1.27 RESERVATION**

The State will not pay costs incurred in the preparation of an application.

### **SECTION 2 – APPLICANT REQUIREMENTS**

- *Do not provide responses to items in this section unless specifically and expressly required.*

#### **2.1 SCOPE OF WORK**

The purpose of this Notice of Funds Available (NOFA) is to identify and award primary care practices to participate in the ACT program and optimally manage chronic disease patients within the context of a medical home. Expected outcomes include improved primary and preventive care, reduced episodes of catastrophic chronic disease events, reduced emergency and urgent care visits, reduced hospitalizations, and reduced cost of care. Chronic diseases of focus include hypertension, hypercholesterolemia, ischemic vascular disease, and diabetes. The program also emphasizes preventive screenings.

This collaborative strives to meet program goals within a 12-month timeframe for the Intensive Program Phase that includes pre-work orientation based on the ACT program manual, five one-day Learning Sessions and approximately seven team conference calls or webinars. The Intensive Program Phase will be followed by an annual one-day Enhanced Learning Sessions for continuing participants subject to state contractual rules and regulations.

Clinic Participation Benefits:

1. Collaborative training by qualified and experienced ACT faculty members and external speakers on most recent techniques for clinical practice redesign and improved delivery of care for chronic disease patients.
2. Application of Chronic Care Model and NCQA PCMH Model concepts for QI, team-based care, care coordination, and practice redesign.
3. Learn to test and implement critical changes that enhance population health management, team-based care delivery, care coordination, risk stratification, advanced use of EHR disease registries, patient engagement, and use of behavioral strategies.
4. Participants will receive up to 48 CME credit hours for the Intensive Program Phase and up to 8 CME credit hours annually for the Enhanced Program Phase.
5. Resources for patient referrals to accredited/recognized preventive health programs:
  - o American Diabetes Association (ADA)-recognized and American Association of Diabetes Educators (AADE)-accredited Diabetes Self-Management Education and Support (DSMES) programs
  - o Centers for Disease Control (CDC)-recognized Diabetes Prevention Programs (DPP)
  - o Tobacco Cessation Counseling services through ADH's Be Well Arkansas Hotline
  - o Technical assistance from ADH staff for interested clinics to become certified DSMEs and/or DPP providers
6. ADH technical assistance throughout the course of the ACT program.
7. Resources to adopt evidence-based programs, such as American Heart Association's (AHA) Target BP™, AHA's Check. Change. Control.®, and AHA/ADA Know Diabetes by Heart™ into clinic practice.

## 2.2 RECIPIENT REQUIREMENTS

Practices must:

1. Use EHRs to:
  - o Extract standard clinical quality measure (National Quality Forum [NQF], eCQM, Quality Payment Program [QPP]) data for performance measurement and reporting of 15 standardized chronic disease measures.
  - o Submit de-identified and aggregated baseline data to the ADH for performance measures listed in the RFA before Learning Session 1.
2. Have a provider panel of at least 750 adult patients.
3. Appoint a practice improvement team consisting of either a Physician or APRN Champion as the Team Leader and two or more relevant clinic team members such as, clinical experts (RN, LPN, and Medical Assistant), care coordinators, practice managers, social workers, etc.
4. Identify a Population of Focus (POF), which is the primary participating provider's patient panel.
5. Attend five virtual and/or in-person ACT Learning Sessions during the Intensive Program Phase. All learning sessions will be held virtually until COVID-19 pandemic conditions subside.
6. Attend one virtual and/or in-person annual Enhanced Learning Session during the Enhanced Program Phase.
7. At least one responsible team member should participate in all seven (7) conference calls and webinars during the Intensive Program Phase.
8. Meet internally weekly to plan and implement QI strategies, such as Plan-Do-Study-Act (PDSA) rapid-change cycles, tests of change, review data to identify gaps in care.
9. Submit monthly de-identified, aggregated POF data for performance measures listed in the RFA to the ADH in provided database on or before the 15<sup>th</sup> of each month during the Intensive and Enhanced Program Phases.
10. Complete ACT's Pre- and Post-Practice Assessment form prior to Learning Session 1 and before or by the end of Learning Session 5.

The following de-identified and aggregated performance measure data are required to be collected and reported in an ADH-provided template monthly along with monthly clinic narratives. Measure benchmarks are provided to assess current status and as potential targets to set clinic goals for ACT. These benchmarks are based on state averages for National Quality Forum (NQF), eCQM measures and average performance from previous participating clinics where NQF measures are unavailable at the state level. Benchmarks are updated annually.

### Required measures and percent goals for ACT clinic teams include:

1. Cardiovascular Disease Measures	Benchmark
1.1 Hypertension: Controlling High Blood Pressure BP <140/90 mm Hg (NQF: 0018)	≥70%
1.2 Ischemic Vascular Disease (IVD): Use of Aspirin or other Antithrombotic (NQF: 0068; Quality ID: 204)	≥60%
1.3 Hypercholesterolemia: Statin Therapy for the Prevention and Treatment of Cardiovascular Disease (Quality ID: 438)	≥70%
2. Comprehensive Diabetes Mellitus Measures	Benchmark
2.1 Diabetes Mellitus: Hemoglobin A1c Poor Control (NQF: 0059; Quality ID: 1)	<25%
2.2 Diabetes Mellitus: Low Density Lipoprotein (LDL-C) Control (NQF: 0064)	≥45%
2.3 Diabetes Mellitus: High Blood Pressure Control (NQF: 0061)	≥60%
2.4 Diabetes Mellitus: Dilated Eye Exam (NQF: 0055; Quality ID: 117)	>65%



2.5	Diabetes Mellitus: Medical Attention for Nephropathy (NQF: 0062; Quality ID: 119)	≥90%
2.6	Diabetes Mellitus: Foot Exam (NQF: 0056; Quality ID: 163)	>65%
3.	Preventive Care Measures	Benchmark
3.1	Preventive Care and Screening: Breast Cancer Screening (NQF: 2372; Quality ID: 112)	≥68%
3.2	Preventive Care and Screening: Cervical Cancer Screening (NQF: 0032; Quality ID: 309)	≥70%
3.3	Preventive Care and Screening: Colorectal Cancer Screening (NQF: 0034; Quality ID: 113)	≥64%
3.4	Preventive Care and Screening: Body Mass Index (BMI) Screening and Follow Up (NQF: 0421; Quality ID: 128)	>65%
3.5	Preventive Care and Screening: Screening for High Blood Pressure and Follow-Up Documented (NQF: N/A; Quality ID: 317)	≥90%
3.6	Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention (NQF: 0028; Quality ID: 226)	≥70%

**NOTE:** Demographic break-ups may be required for some measures

## 2.3 REASONS TO APPLY

### Intensive Training:

- Clinic redesign strategies
- Interdisciplinary team-based care proficiencies
- Evolving QI techniques
- Risk-stratification
- High-risk patient management
- Performance measurement
- Improve clinical quality metrics
- Population health management through use of EHR and health information technology (HIT)
- Learn about referrals to Diabetes Prevention Programs (DPP), Diabetes Self-Management and Education Support (DSMES), and tobacco cessation programs within clinic service areas

### Provider and Clinic Team Improvement:

- Improve chronic disease patient outcomes within ambulatory care settings
- Participation in Arkansas's chronic disease reporting to the Centers for Disease Control and Prevention (CDC) and moving the needle for statewide chronic disease outcomes
- Enhance provider-patient interactions
- CE/CME credits
- Peer-to-peer networking opportunities
- Availability of sub-grant funds to offset out-of-office costs for training time
- Preparation for NCQA Patient Centered Medical Home (PCMH) Certification
- Technical assistance
- ADH recognition certificate for ACT participation and improved performance

## 2.4 PERFORMANCE STANDARDS

- A. State law requires that all contracts for services include Performance Standards for measuring the overall quality of services provided. The Performance Standards table below identifies expected deliverables,

performance measures, or outcomes, and defines the acceptable standards a vendor **must** meet in order to avoid assessment of damages.

- B. The State may be open to negotiations of Performance Standards prior to contract award, prior to the commencement of services, or at times throughout the contract duration.
- C. The State **shall** have the right to modify, add, or delete Performance Standards throughout the term of the contract, should the State determine it is in its best interest to do so. Any changes or additions to performance standards will be made in good faith following acceptable industry standards and may include the input of the vendor so as to establish standards that are reasonably achievable.
- D. All changes made to the Performance Standards **shall** become an official part of the contract.
- E. Performance Standards **shall** continue throughout the term of the contract.
- F. Failure to meet the minimum Performance Standards as specified **shall** result in the assessment of damages.
- G. In the event a Performance Standard is not met, the vendor will have the opportunity to defend or respond to the insufficiency. The State **shall** have the right to waive damages if it determines there were extenuating factors beyond the control of the vendor that hindered the performance of services. In these instances, the State **shall** have final determination of the performance acceptability
- H. Should any compensation be owed to the agency due to the assessment of damages, vendor shall follow the direction of the agency regarding the required compensation process.

Performance Standards		
Service Criteria	Acceptable Performance	Damages for Insufficient Performance
Performance Measures Reporting	Performance (as specified in 2.2 C.) are reported monthly	Failure to report performance measures may result in payment delay and jeopardize consideration for future awards.
Attend ACT Virtual and/or In-Person Learning Sessions	Must attend six (6) virtual and/or in-person ACT Learning Sessions during the Intensive Program Phase	Failure to attend all required sessions may result in payment delay and jeopardize consideration for future awards.
Attend One Virtual and/or In-Person Annual Enhanced Learning Session	Must attend one (1) virtual and/or in-person Enhanced Learning Session.	Failure to attend the Enhanced Learning Session Program Phase may result in payment delay and jeopardize consideration for future awards.

### **SECTION 3 – CRITERIA FOR SELECTION**

- **Do not provide responses to items in this section.**

#### **3.1 APPLICATION REVIEW PROCESS & PROCEDURE**

- A. ADH will collect applications via email and accept the first six (6) applications that meet requirements. The order of receipt of applications will be identified by the State’s email system.
- B. ADH will review each Application Packet to verify requirements. Applications that do not meet requirements will be disqualified.
- C. In the event that an application is disqualified, ADH will review the next consecutive application.

#### **3.2 ACCEPTANCE OF REVIEW TECHNIQUE**

- A. Applicant **must** agree to the review process and procedure as defined in this solicitation.

- B. The submission of an Application Packet signifies the applicant understand and agrees that subjective judgments may be made during the review.

## **SECTION 4 – GENERAL CONTRACTUAL REQUIREMENTS**

***Do not** provide responses to items in this section.*

### **4.1 PAYMENT AND INVOICE PROVISIONS**

- A. Invoices are due monthly by the last day of the month following the reporting month and **shall** be forwarded to:

Arkansas Department of Health  
Attn: Jim Chandler  
Address: 4815 West Markham St., Slot 6  
Little Rock, AR 72205  
501-671-1489  
Jim.Chandler@arkansas.gov

***NOTE:** Final invoices **must** be submitted to (ADH) within fifteen (15) calendar days of contract expiration. Failure to submit final invoices within the allotted time frame may result in non-payment.*

- B. Pursuant to Arkansas Code Annotated 19-4-206, the agency shall certify that services have been performed or the goods received prior to payment being authorized and processed.
- C. Additional documentation may be required when submitting invoices for payment.

### **4.2 USE OF FUNDS**

- A. Funds must be used to meet requirements of the sub-grant.
- B. Funds may not be used for items not identified on the budget with a budget adjustment request and/or prior approvals.

### **4.3 CONDITIONS OF CONTRACT**

- A. Recipient(s) **shall** at all times observe and comply with federal and State of Arkansas laws, local laws, ordinances, orders, and regulations existing at the time of, or enacted subsequent to the execution of a resulting contract which in any manner affect the completion of the work.
- B. Recipient(s) **shall** indemnify and save harmless the agency and all its officers, representatives, agents, and employees against any claim or liability arising from or based upon the violation of any such law, ordinance, regulation, order or decree by an employee, representative, or subcontractor of the vendor.

### **4.4 STATEMENT OF LIABILITY**

- A. The State will demonstrate reasonable care but will not be liable in the event of loss, destruction or theft of recipient-owned equipment or software and technical and business or operations literature to be delivered or to be used in the installation of deliverables and services. The recipient **shall** retain total liability for equipment, software and technical and business or operations literature. The State **shall** not at any time be responsible for or accept liability for any recipient-owned items.
- B. The recipient's liability for damages to the State **shall** be limited to the value of the sub-grant. The foregoing limitation of liability **shall not** apply to claims for infringement of United States patent, copyright, trademarks or trade secrets; to claims for personal injury or damage to property caused by the gross negligence or willful misconduct of the vendor; to claims covered by other specific provisions of the contract calling for damages; or to court costs or attorney's fees awarded by a court in addition to damages after litigation based on the contract. The recipient and the State **shall not** be liable to each other, regardless of the form of action, for consequential, incidental, indirect, or special damages. This limitation of liability **shall not** apply to claims for infringement of United States patent, copyright, trademark or trade secrets; to claims for personal injury or damage to property caused by the gross negligence or willful misconduct of the vendor; to claims covered by

other specific provisions of the contract calling for damages; or to court costs or attorney's fees awarded by a court in addition to damages after litigation based on the contract.

- C. Language in these terms and conditions **shall not** be construed or deemed as the State's waiver of its right of sovereign immunity. The vendor agrees that any claims against the State, whether sounding in tort or in contract, **shall** be brought before the Arkansas Claims Commission as provided by Arkansas law, and **shall** be governed accordingly.

#### 4.5 **RECORD RETENTION**

- A. The applicant **shall** maintain all pertinent financial and accounting records and evidence pertaining to the contract in accordance with generally accepted principles of accounting and as specified by the State of Arkansas Law. Upon request, access **shall** be granted to State or Federal Government entities or any of their duly authorized representatives.
- B. Records **shall** be made available, upon request, to the State of Arkansas's designee(s) at any time during the contract period and any extension thereof, for a period of five (5) years from the date this sub-grant expires, or if an audit is pending at the end of the five-year period, until resolution of the audit. Department access to all books, records, and other documents will be according to the procedures outlined in Section VIII, A, of this sub-grant. HIPAA-related records will be retained for a minimum of six (6) years from the date of sub-grant expiration.

#### 4.6 **ACCESS TO RECORDS**

The recipient will grant access to its records upon request by duly authorized representatives of state or federal government entities. Access will be given to any books, documents, papers, or records of the recipient related to any services performed under the sub-grant.

#### 4.7 **CONFIDENTIALITY**

- A. The applicant, applicant's subsidiaries, and applicant's employees **shall** be bound to all laws and to all requirements set forth in this bid solicitation concerning the confidentiality and secure handling of information of which they may become aware during the course of providing services under a resulting contract.
- B. Consistent and/or uncorrected breaches of confidentiality may constitute grounds for cancellation of a resulting contract, and the State **shall** have the right to cancel the contract on these grounds.
- C. Previous sections of this bid solicitation may contain additional confidentiality Requirements.

#### 4.8 **CONTRACT INTERPRETATION**

Should the State and vendor interpret specifications differently, either party may request clarification. However, if an agreement cannot be reached, the determination of the State **shall** be final and controlling.

#### 4.9 **LEGISLATIVE REVIEW**

- A. Act 1032 of 1999 specifies that no state agency shall award any discretionary sub-grant that exceeds \$10,000.00 prior to review by the Arkansas Legislative Council or the Joint Budget Committee.
- B. If the state agency determines that an emergency exists, the state agency may award the sub-grant prior to review and shall immediately notify the Legislative Council or Joint Budget Committee as to the facts constituting the emergency.
- C. All non-discretionary sub-grants are exempt from review.
- D. Certain discretionary sub-grants are exempt from review. These include:
- Sub-grants to another governmental entity such as a state agency, public educational institution, federal governmental entity or body of a local government
  - Disaster relief sub-grants
  - Sub-grants identified by the Arkansas Legislative Council to be exempt
  - Sub-grants deemed to contain confidential information that would be in violation of disclosure laws
  - Sub-grants for scholarship or financial assistance award to or for a post-secondary student

#### 4.10 **CANCELLATION**

- A. For Cause. The State may cancel any contract resulting from this solicitation for cause when the recipient

fails to perform its obligations under it by giving the recipient written notice of such cancellation at least thirty (30) days prior to the date of proposed cancellation. In any written notice of cancellation for cause, the State will advise the recipient in writing of the reasons why the State is considering cancelling the contract and provide the recipient with an opportunity to avoid cancellation for cause by curing any deficiencies identified in the notice of cancellation for cause prior to the date of proposed cancellation. To the extent permitted by law and at the discretion of the parties, the parties may agree to minor amendments to the contract and avoid the cancellation for cause upon mutual agreement.

- B. For Convenience. The State may cancel any contract resulting from the solicitation by giving the Recipient written notice of such cancellation sixty (60) days prior to the date of cancellation.
- C. If upon cancellation the recipient has provided commodities or services which the State of Arkansas has accepted, and there are no funds legally available to pay for the commodities or services, the recipient may file a claim with the Arkansas Claims Commission under the laws and regulations governing the filing of such claims.

#### 4.11 **SEVERABILITY**

If any provision of the contract, including items incorporated by reference, is declared or found to be illegal, unenforceable, or void, then both the agency and the vendor **shall** be relieved of all obligations arising under such provision. If the remainder of the contract is capable of performance, it **shall not** be affected by such declaration or finding and **shall** be fully performed.

## **SECTION 5 – STANDARD TERMS AND CONDITIONS**

- *Do not provide responses to items in this section.*
- 1. **GENERAL:** Any special terms and conditions included in this solicitation **shall** override these Standard Terms and Conditions. The Standard Terms and Conditions and any special terms and conditions **shall** become part of any contract entered into if any or all parts of the bid are accepted by the State of Arkansas.
- 2. **ACCEPTANCE AND REJECTION:** The State **shall** have the right to accept or reject all or any part of an application or any and all applications, to waive minor technicalities, and to award the sub-grant to best serve the interest of the State.
- 3. **APPLICATION SUBMISSION:** Application Packets **must** be submitted to the Arkansas Department of Health on or before the date and time specified. The Application Packet **must** contain all documents, information, and attachments as specifically and expressly required in the *Solicitation*. The application **must** be typed or printed in ink. The signature **must** be in ink. Unsigned applications **shall** be disqualified. The person signing the application should show title or authority to bind his firm in a contract. Late applications **shall not** be considered under any circumstances.
- 4. **FORCE MAJEURE:** Neither party will be held responsible for the delay or failure to perform any part of this sub-grant when such delay or failure to perform any part of this sub-grant when such delay or failure results from fire, flood, epidemic, war or insurrection, unusually severe weather, or the legal acts of public authorities.
- 5. **STATE AND FEDERAL LAWS:** Performance of this sub-grant by the recipient and the Department must comply with state and federal laws, rules, and regulations. If any statute or regulation is enacted which requires changes in this sub-grant, the recipient will receive notification of the required changes. This sub-grant shall then be amended.
- 6. **COMPLIANCE WITH NONDISCRIMINATION LAWS:** The recipient will comply with all applicable provisions of the following federal regulations related to nondiscrimination, both in service delivery to clients and in employment, including, but not limited to, the following:
  - Title 45 Code of Federal Regulations
    - Part 80 (Nondiscrimination on the Basis of Race or Sex)
    - Part 84 (Nondiscrimination on the Basis of Handicap)
    - Part 90 (Nondiscrimination on the Basis of Age)
  - Americans with Disabilities Act of 1990, U.S.C. Section 12101 et. Seq.
  - Title 28 Code of Federal Regulations
    - Part 35 (Nondiscrimination on the Basis of Disability in State and Local Government Services)
  - Title 41 Code of Federal Regulations
    - Part 60-74 (OFCCP: Affirmative Action Regulations on Handicapped Workers)ADH will furnish a copy of these regulations to the recipient upon request.
- 7. **CONFIDENTIALITY OF CLIENT RECORDS:** The recipient will maintain the confidentiality of all client records. This restriction does not apply to disclosures made with the informed, written consent of the client, or if the client is not a competent adult or is a

minor, with such consent of the client's parent, guardian, or legal representative.

8. **LIMITATION OF THE DEPARTMENT'S OBLIGATION TO PAY:** The Department is not obligated to make payment under this sub-grant if the Department does not receive sufficient monies from the funding source(s) designated in this sub-grant to fund said obligations and other obligations of the Department or is not given legal authority from the Arkansas Legislature to expend these funds. The Department is not obligated to make payment if sufficient state or local matching money is not available at the time the bill is presented for payment.
9. **PAYMENT FROM DEPARTMENT CONSIDERED PAYMENT IN FULL:** Payment received from the Department under this sub-grant shall be payment in full for all services and/or costs covered by the payment. No fee or other charge shall be made against a client or a third party for these services and/or costs. This paragraph does not preclude allocation of costs among two or more funding sources, or payment of portions of a service and/or cost under different funding sources, so long as there is no duplication of payment.
10. **AUDIT REQUIREMENT:** For awards in excess of \$500,000.00 a current audit report is due. Recipient shall comply with the ADH audit requirements as outlined in Arkansas Department of Health "Audit Guidelines."

Arkansas Department of Health  
Internal Audit Section  
4815 West Markham Street, Slot 54  
Little Rock, AR 72205-3867

11. **DEPARTMENTAL RECOVERY OF FUNDS:** The Department shall seek to recover funds not utilized in accordance with the terms and conditions of this sub-grant.
12. **AMENDMENTS:** Any amendment to this sub-grant shall be valid only when in writing and when duly signed by the authorized representative(s) of the Recipient and the Arkansas Department of Health. Recipient and Department acknowledge that no verbal or written representations, other than those contained herein, have been made as an inducement to enter into this agreement and that this writing constitutes the entire agreement.
13. **AWARD:** Term Contract: A contract award will be issued to the successful recipient. It results in a binding obligation without further action by either party. This award does not authorize shipment. Shipment is authorized by the receipt of a purchase order from the ordering agency. Firm Contract: A written State purchase order authorizing shipment will be furnished to the successful vendor.
14. **STATE PROPERTY:** Any specifications, drawings, technical information, dies, cuts, negatives, positives, data or any other commodity furnished to the contractor hereunder or in contemplation hereof or developed by the contractor for use hereunder **shall** remain property of the State, **shall** be kept confidential, **shall** be used only as expressly authorized, and **shall** be returned at the contractor's expense to the F.O.B. point provided by the agency. Vendor **shall** properly identify items being returned.
15. **PATENTS OR COPYRIGHTS:** The contractor **must** agree to indemnify and hold the State harmless from all claims, damages and costs including attorneys' fees, arising from infringement of patents or copyrights.
16. **ASSIGNMENT:** Any contract entered into pursuant to this solicitation **shall not** be assignable nor the duties thereunder delegable by either party without the written consent of the other party of the contract.
17. **CLAIMS:** Only those claims for costs and services specifically authorized under this sub-grant will be allowed by the Department. Any work performed, material furnished, or costs incurred not covered by this sub-grant shall be solely the responsibility of the Recipient.
18. **CANCELLATION:** In the event the State no longer needs the commodities or services specified for any reason (e.g., program changes; changes in laws, rules or regulations; relocation of offices; lack of appropriated funding, etc.), the State **shall** have the right to cancel the contract or purchase order by giving the vendor written notice of such cancellation thirty (30) days prior to the date of cancellation.

**NOTHING IN THIS CONTRACT SHALL BE DEEMED A WAIVER OF THE STATE'S RIGHT TO SOVEREIGN IMMUNITY**

19. **DISCRIMINATION:** In order to comply with the provision of Act 954 of 1977, relating to unfair employment practices, the vendor agrees that: (a) the vendor **shall not** discriminate against any employee or applicant for employment because of race, sex, color, age, religion, handicap, or national origin; (b) in all solicitations or advertisements for employees, the vendor **shall** state that all qualified applicants **shall** receive consideration without regard to race, color, sex, age, religion, handicap, or national origin; (c) the vendor will furnish such relevant information and reports as requested by the Human Resources Commission for the purpose of determining compliance with the statute; (d) failure of the vendor to comply with the statute, the rules and regulations promulgated thereunder and this nondiscrimination clause **shall** be deemed a breach of contract and it may be cancelled, terminated or suspended in whole or in part; (e) the vendor **shall** include the provisions of above items (a) through (d) in every subcontract so that such provisions **shall** be binding upon such subcontractor or vendor.
20. **ETHICAL STANDARDS:** Pursuant to Arkansas Code Annotated §19-11-708(a-c), it **shall** be breach of ethical standards for a person to be retained, or to retain a person, to solicit or secure a state contract upon an agreement or understanding for a commission, percentage, brokerage, or contingent fee, except for retention of bona fide employees or bona fide established commercial selling agencies maintained by the contractor for the purpose of securing business.

- 21. ANTITRUST ASSIGNMENT:** As part of the consideration for entering into any contract pursuant to this solicitation, the vendor named on the *Application Signature Page* for this solicitation, acting herein by the authorized individual or its duly authorized agent, hereby assigns, sells and transfers to the State of Arkansas all rights, title and interest in and to all causes of action it may have under the antitrust laws of the United States or this State for price fixing, which causes of action have accrued prior to the date of this assignment and which relate solely to the particular goods or services purchased or produced by this State pursuant to this contract.
- 22. DISCLOSURE:** Failure to make any disclosure required by Governor's Executive Order 98-04, or any violation of any rule, regulation, or policy adopted pursuant to that order, **shall** be a material breach of the terms of this contract. Any contractor, whether an individual or entity, who fails to make the required disclosure or who violates any rule, regulation, or policy **shall** be subject to all legal remedies available to the agency.