

**GRANITE STATE INDEPENDENT LIVING**  
**REQUEST FOR PROPOSALS**

Granite State Independent Living (GSIL), working collaboratively with the Department of Health and Human Services (DHHS), is soliciting proposals from organizations interested in becoming consumer-directed personal care services providers (PSCP). GSIL will select two awarded vendors to support this effort for the time period June 1 through December 31, 2003. Each awarded vendor will receive up to \$50,000 to cover program design and implementation activities. The two awarded vendors will be expected to provide ongoing consumer-directed personal care services to eligible consumers as soon as practicable after June 1<sup>st</sup> but no later than December 31, 2003. In addition, the two awarded vendors will be expected to attend grantee meetings at GSIL and prepare and submit three status reports during the grant period. Consumer-directed personal care assistance services (CD-PCS) will be billed to Medicaid at a rate of \$16/hour.

In order to be considered, proposals shall meet the specifications described in the enclosed RFP package and all attachments shall be completed in full. Please refer to the list of items that must be submitted. **For ease of evaluation, proposals should be presented in a format that corresponds to and references the sections outlined in the RFP.**

Any questions regarding the RFP should be submitted in writing by close of business April 11, 2003 to:

David Robar  
Advocacy Coordinator  
Granite State Independent Living  
PO Box 7268  
Concord, NH 03302-7268  
david.robar@gsil.org

The responses to all questions submitted will be posted on the GSIL website [www.gsil.org](http://www.gsil.org) by close of business April 18, 2003. Requests for alternative format of responses (including hard copy) must be submitted by close of business April 11, 2003.

**The deadline for receipt of proposals is May 9, 2003 at 12:00 p.m. Vendors shall submit one (1) original proposal (with original signatures) clearly labeled "ORIGINAL" and four (4) identical copies clearly labeled "COPY" in a sealed envelope clearly labeled "BID ENCLOSED." Bids should be addressed to:**

David Robar  
Advocacy Coordinator  
Granite State Independent Living  
PO Box 7268  
Concord, NH 03302-7268

**Proposals and attachments shall be sent via certified mail, commercial carrier with proof of receipt requested, or hand delivered.**

**GRANITE STATE INDEPENDENT LIVING**  
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**BACKGROUND**

The New Hampshire Legislature passed a Personal Care Services Provider (PCSP) law, known RSA 161-I, which allows for the use of personal care service providers to provide care to individuals on the Home and Community Based Care for the Elderly and Chronically Ill (HCBC-ECI) Medicaid waiver program. As a result of the legislative process, the law permits the use of PCS provided through either a provider-based model or a consumer-directed model. In order to ensure the availability of the other qualified agencies (OQAs), it is essential that the system components of the model be developed in an efficient and effective manner.

**Delivery of Personal Assistance Services in New Hampshire**

In New Hampshire, social services and health programs are all coordinated through a single umbrella agency, the Department of Health and Human Services (DHHS). DHHS administers Medicaid and coordinates programs relating to developmental disabilities, mental health, substance abuse, disability/chronic illness and child welfare and aging. DHHS' present and historic programs for persons with disabilities are categorized by diagnosis and/or age. As a consequence, personal assistance services vary greatly.

Historically, New Hampshire has offered consumer-directed personal care attendant (PCA) services through the Medicaid state plan option, but only to adults who use wheelchairs and can self-direct their attendants. The agency provider of these services is Granite State Independent Living (GSIL). GSIL, the only Center for Independent Living in New Hampshire, is dedicated to removing the physical, attitudinal, and social barriers to independence for individuals with disabilities. In 2002, 168 individuals received Medicaid personal assistance services through GSIL.

Seniors and individuals with developmental disabilities, physical disabilities, chronic illnesses, and acquired brain disorders may access personal assistance services through four Medicaid 1915 (c) waiver programs. Currently, there are approximately 1800 individuals receiving services through the waiver for older adults and adults with chronic illness or disability (HCBC-ECI) and there is no waiting list.

During the past decade, the State has implemented a number of Self-Determination Initiatives. The first one was implemented by Monadnock Development Services (MDS) in Keene, New Hampshire through the Robert Wood Johnson (RWJ) National Self-Determination Program. Area Agencies that utilize a Self-Determination approach to service delivery often afford persons with developmental disabilities and acquired brain disorders and their families access to consumer-directed support services through the Medicaid Developmental Disabilities (DD) and the Acquired Brain Disabilities (ABD)

waiver options. In some cases, Area Agencies, or their subcontracting agencies, act as Agency with Choice ISOs allowing individuals and their families to be the managing employer of their support service workers while the agency performs the role of common law employer. The DD waiver currently serves 2,565 individuals and the ABD waiver serves 81 individuals. Both waivers have wait lists.

Both the DD and ABD waiver programs offer consumer-directed options for personal assistance services.

Individuals with mental health support needs receive similar services under the state plan rehabilitation option through community-based mental illness management services (MIMS). The Division of Behavioral Health serves 4,036 adults with psychiatric disabilities. In addition, there are 81 adults on the waiting list for mental health services.

Until the passage of RSA 161-I, only through the limited Medicaid state plan PCA program and in the DD and ADB waivers have the principles of consumer-direction and self-determination been implemented, although individuals in all disability groups have expressed a clear desire for it.

Families, individuals with disabilities and seniors who participated in focus groups in January 2000 made it clear that they want to choose by whom, when and how their personal assistance services will be provided. However, few expressed an interest in managing the paperwork required of an employer, in particular, managing the payroll function.

### **Development and Implementation of Consumer-Directed Personal Care Services**

The Personal Care Services Provider (PCSP) law (RSA 161-I), allows for the provision of personal care services by home health and other qualified agencies to persons with disabilities in the Granite State. In particular, the law allows home health and other qualified agencies to provide both agency-directed and consumer-directed PCS. It expands access to consumer-directed PCS to a larger group of individuals (i.e., those enrolled in the HCBC-ECI waiver).

Under this law, the personal care worker must be employed by either a home health agency or an OQA. Under the consumer-directed model, the agency would be the employer of record of the personal care services worker while the consumer or his/her representative is the “managing employer” responsible for selecting, training, supervising and discharging his or her own PCS worker.

In February 2002, amendments to Chapter He-E 800, Part He-E 801, Home and Community-based Care for the Elderly and Chronically Ill rules were adopted. These amendments incorporated the provisions of RSA 161-I into the Medicaid HCBC-ECI rules.

In order to address the service capacity issue, in March 2002, GSIL issued an RFP for the development and implementation of Other Qualified Agencies (OQAs). GSIL awarded start-up grants to three organizations, (1) Monadnock Developmental Services, (2) Area Agency of Greater Nashua (3) Easter Seals of New Hampshire for the period June 1 – December 31, 2002. All three organizations have successfully implemented the OQA function and currently are providing consumer-directed PCS to approximately 150 HCBC-ECI eligible individuals.

Finally, in February 2003, the New Hampshire Legislature adopted DHHS certification rules for OQAs (Chapter He-P 601, Certification of Other OQAs). These rules describe how entities may become and should operate as OQAs in New Hampshire.

### **Key Characteristics of Consumer-Directed Personal Care Services**

Consumer-directed personal care services have certain key characteristics. These include, but are not limited to, allowing consumers (and their representatives, when designated) to:

- Have access to PCS 24 hours a day and seven days a week (i.e., consumers are not limited to only accessing personal care services 9am – 5pm, Monday through Friday),
- Exercise personal choice in the development of their care and service plans,
- Select the agency and the specific personal care service worker providing the services,
- Refer their chosen PCS worker to the agency for hire,
- Train their PCS worker,
- Supervise their PCS worker's daily activities,
- Review and sign their PCS worker's timesheets, and
- Discharge their PCS worker from employment, when appropriate.

Another key component of the consumer-directed PCS model is the type and frequency of quality assurance activities that will be performed and by whom.

Additionally, agencies providing consumer-directed services must offer support services to consumers that include, but are not limited to:

- Assessing and reassessing consumers' service needs and preferences,
- Providing skills and advocacy training for the eligible consumer or representative,

- Assisting consumers or representatives with recruiting, screening, hiring, and training personal care service providers,
- Creating and maintaining PCS worker registries,
- Assisting consumers with developing effective back-up worker plans,
- Providing consumers or representatives with counseling and support, including technical assistance, and
- Monitoring consumer and representative satisfaction with PCS, intermediary services and agency processes.

### **Federal Grants Awarded to New Hampshire Related to Consumer-directed Personal Care Services**

In October 2000, the State of New Hampshire was awarded a grant from the Center for Medicare and Medicaid Services (CMS, previously known as HCFA) entitled the, *Granite Supports Project*. The primary goal of the project is to support people with disabilities in the workplace. Additional objectives include: (1) expansion of the quality of and access to personal assistance services to ensure that individuals participating in the Medicaid for Employed Adults with Disabilities Program (MEAD), also known as the Larry Robinson Program, can access the services needed to support competitive work, (2) enhance local agencies to create and test improvements in the delivery of personal care services, and (3) support this RFP.

In September 2001, GSIL, in collaboration with the DHHS and a number of other collaborating organizations, was awarded a three-year grant from CMS entitled: *Community-Integration Personal Assistance Services and Supports*. The primary goal of the grant is to create comprehensive cross-disability and cross age-group access to consumer-directed personal care. One objective of the grant is to develop and implement a consumer-directed PCS model that will expand access to individuals with disabilities who have historically been denied access to these services (e.g., children with special health care needs and persons who can not self-direct). The challenge for the State is to determine how best to develop and implement an effective and efficient consumer-directed PCS which will afford seniors and individuals with disabilities choice and control over their services and the individuals who provide them, while recognizing the unique needs and desires of each group.

#### **A. PURPOSE**

Granite State Independent Living (GSIL) once again is soliciting proposals from organizations interested in becoming consumer-directed personal care services providers (PSCP). GSIL will select two awarded vendors to support this effort for the time period

June 1 through December 31, 2003. Each awarded vendor will receive up to \$50,000 to cover program design and implementation activities. The two awarded vendors will be expected to provide ongoing consumer-directed personal care services to eligible consumers as soon as practicable after June 1<sup>st</sup> but no later than December 31, 2003. Consumer-directed personal care assistance services (CD-PCS) will be billed to Medicaid at a rate of \$16/hour.

## **B. CONTRACT PERIOD**

The contract period shall be from June 1<sup>st</sup> through December 31, 2003.

## **C. ACRONYMS AND DEFINITIONS**

<b><i>ABD</i></b>	Acquired Brain Disorder
<b><i>ASL</i></b>	American Sign Language
<b><i>Awarded Vendor</i></b>	The organization/individual that is awarded and has an approved contract with DHHS for the services identified in this RFP.
<b><i>Bidder</i></b>	Organization submitting a proposal in response to this RFP.
<b><i>Care Plan</i></b>	A written guide containing specific instructions on providing a defined service to an individual that is developed and maintained by the service provider, based on the authorized DEAS service plan, and that defines the processes and outcomes of direct care.
<b><i>Chapter He-E 801 Home and Community-based Care for the Elderly and Chronically Ill</i></b>	The requirements for eligibility and the services provided through home and community based care for the elderly and chronically ill (HCBC-ECI) program (see Exhibit B).
<b><i>Chapter He-P 601 Certification of Other Qualified Agencies</i></b>	The requirements for becoming and operating as an Other Qualified Agency (see Exhibit C)
<b><i>CMS</i></b>	Centers for Medicare and Medicaid Services (previously known as the Health Care Financing Administration (HCFA).
<b><i>Consumer-directed</i></b>	A philosophy and orientation to the delivery of home and

<b><i>Approach</i></b>	community-based services whereby informed individuals and/or their representatives assess their service needs, determine how and by whom these services should be met, and monitor the quality of services received.
<b><i>Consumer-directed Personal Care Services</i></b>	Personal care services that assist an eligible consumer maintaining him/herself in an eligible setting. Such services may include, but are not limited to, basic personal care and grooming, assistance with toileting and toileting hygiene measures, assistance with oral and topical medications, assistance with nutrition, including meal preparation, and essential household services. An eligible consumer or his/her representative is responsible for exercising personal choice in the development of the consumer's care/service plans, selecting the Agency with Choice provider and the specific personal care service worker providing the PCS, referring the consumer's PCS worker(s) into the Agency with Choice provider for hire, determining their PCS workers' work schedules, supervising their PCS workers' activities including reviewing and signing workers' timesheets and discharging their PCS worker from employment, when appropriate. (As defined in RSA 161-I:2,11.)
<b><i>DEAS</i></b>	Division of Elderly and Adult Services, program administrator for the Personal Care Services Program.
<b><i>DD</i></b>	Developmental Disabilities
<b><i>DHHS</i></b>	The New Hampshire Department of Health and Human Services is the umbrella agency that is the single State Medicaid agency and the grantee of the Granite State Supports Project grant and the Community Integration Personal Assistance Services Grant.
<b><i>Eligible Setting</i></b>	A home, apartment, day program, or other community setting but does not include a hospital, nursing facility, or other institutional setting.
<b><i>GSIL</i></b>	Granite State Independent Living, the sole Center for Independent Living in New Hampshire, provider of Medicaid state plan personal care attendant services and one of the grantees of the Centers for Medicare and Medicaid's Granite Support Project and Community Integration Personal Assistance Services and Supports Grant.
<b><i>HCBC-ECI</i></b>	Home and Community-based Care Waiver for the Elderly and Chronically Ill means a system of long-term care services, as defined in He-E 801 and provided under a waiver of Section

1902(a)(10) and 1915(c) of the Social Security Act for individuals who are elderly or have a disability or chronic illness, in a non-institutional setting.

<b><i>ICF-MR</i></b>	Intermediate Care Facility for the Mentally Retarded
<b><i>Intermediary Service</i></b>	As defined in RSA 161-I, VII.
<b><i>ISO</i></b>	Intermediary service organization that provides intermediary services
<b><i>Larry Robinson Program</i></b>	Medicaid for Employed Adults with Disabilities, otherwise known as the Medicaid Buy-in Program (MEAD).
<b><i>MEAD</i></b>	Medicaid for Employed Adults with Disabilities
<b><i>MIMS</i></b>	Mental Illness Management System
<b><i>Other Qualified Agency (OQA)</i></b>	Entities authorized by DHHS to offer personal care services and/or intermediary services in accordance with rules adopted pursuant to RSA 541-A.
<b><i>Personal Care Services (PCS)</i></b>	Services furnished by a personal care services provider (PSCP) that assist an eligible consumer in maintaining him/herself in an eligible setting. Such services may include, but not be limited to, basic personal care and grooming, assistance with toileting, and toileting hygiene measures, assistance with oral and topical medications, assistance with nutrition, including meal preparation and essential household services.
<b><i>Personal Care Services Provider Law</i></b>	Otherwise known as RSA 161-I (see Exhibit B).
<b><i>Representative</i></b>	A person who is: <ol style="list-style-type: none"><li>(1) Duly appointed or designated in the manner required by law to act on behalf of another individual;</li><li>(2) Acting within the scope of his/her authority pursuant to state law;</li><li>(3) One of the following:<ol style="list-style-type: none"><li>a. An attorney,</li><li>b. A guardian or conservator,</li><li>c. An agency acting under a power of attorney,</li></ol></li></ol>



- d. An authorized representative acting on behalf of an individual in some or all of the aspects of initial and continuing eligibility, or
- e. A representative acting on behalf of an individual pursuant to RSA 161-I, Personal Care Services.

***RFP*** Request for Proposals

***Support Plan*** A written guide of health and supportive care service which:

- (1) Is determined by the individual and/or his/her representative, the case manager, and the registered nurse designated by DEAS,
- (2) Is approved by a physician or by an advanced registered nurse practitioner,
- (3) Specifies the frequency, duration and scope of the HCBC-ECI services to be provided to the individual, based on the covered service described Chapter He-E 800-Medical Services, and
- (4) Authorizes reimbursement to service providers.

***Shall/Must*** Indicates a mandatory requirement. Failure to meet a mandatory requirement may result in the rejection of a proposal as non-responsive.

***State*** State of New Hampshire

***Subcontractor*** Third party not directly employed by the bidder who will provide services identified in this RFP

***TTY*** Telecommunication Typewriter

**D. SCOPE OF SERVICE**

**Scope of Work**

The GSIL seeks two vendors who are willing to become consumer-directed PCS providers as soon as practicable after June 1<sup>st</sup> but no later than December 31, 2003. The two awarded vendors shall be required to perform the following tasks and must address them in their proposals.

The two awarded vendors shall be required to develop their ability and become a consumer-directed PCS provider as soon as practicable after June 1<sup>st</sup> but no later than

December 31, 2003. The implemented program must effectively provide consumer-directed personal care services to eligible individuals, including consumers who wish to work by supporting their entry into the workforce and their ability to remain employed. The consumer-directed PCS model must also be in compliance with the provision included in RSA 161-I, Chapter He-E 801, Home and Community-based Care for the Elderly and Chronically Ill rule, and Chapter He-P 601, Certification of Other Qualified Agencies. Bidders proposals must address how the organization might address the required tasks described below.

### **Develop a Consumer-directed PCS Model**

Key elements in any consumer-directed PCS model must include but not be limited to the following:

- Develop a customer service system that assists consumers in successfully using consumer-directed personal care assistance services. Key features of such a system shall include: (1) a toll free number and a TTY line staffed during business hours, (2) written policies and procedures for returning calls within one working day from the time the call is received, (3) a communications and incidence tracking system, (4) communicating effectively with consumers who have a variety of functional impairments (e.g., foreign language and American Sign Language (ASL) interpreter, telecommunications devices, and large print/alternative format capabilities), (5) preparing and distributing a consumer information manual and other outreach and training materials (available in alternative formats), (6) providing skills and advocacy training and counseling and support services to consumers and their representatives, when appropriate, (7) developing and implementing a PCS worker registry that consumers may use to identify potential PCS workers, (8) assisting consumers in developing effective back-up worker plans, (9) being culturally sensitive in all business practices in order to communicate effectively with a diverse population of participants of all ages and with a variety of disabilities and chronic conditions (including the development of a Consumer's Bill of Rights), and (10) effectively using a consumer-directed approach in all consumer-directed PCS matters, including the ability to provide services 24 hours a day, seven days a week,
- Develop systems and written policies and procedures (e.g., a policies and procedures manual) related to the provision of consumer-directed personal care services including (1) developing of consumers' service and care plans, (2) developing a customer service system, (3) consumers' selecting the Agency with Choice provider and their specific personal care service worker(s) providing the service (4) referring their PCS worker to the Agency with Choice provider for hire specifically for the consumer, (5) consumers' training their PCS worker(s), (6) consumer's determining their PCS worker(s)' work schedule, (7) consumers' supervising the daily activities of their PCS worker(s) including reviewing and signing workers' time sheets, (8) consumers' discharging their PCS worker(s) from their home, when appropriate, (9) developing and distributing consumer outreach and training materials, (10) developing and operating a PCS worker registry, (11) providing

consumer/representative skills and advocacy training, (12) providing consumer/representative counseling and support, (13) developing and implementing general operating policies and procedures required of a service agency and as required by DHHS, (14) assisting consumers with developing back-up worker plans, (15) developing and implementing a quality assurance system that monitors the quality of consumer-directed personal care services and intermediary services and consumer /representative satisfaction, and (16) working with representatives,

- Develop and implement consumer/representative skills and advocacy training procedures and materials,
- Develop and implement a consumer/representative counseling and support system, including technical assistance,
- Develop and implement a PCS workers registry, and
- Develop and implement a quality assurance system that monitors the quality of consumer-directed PCS and intermediary services and consumer/representative satisfaction with these services, including mechanisms for continuous quality improvement in agency processes.

### **Implement the Consumer-directed PCS Model**

The two awarded vendors will have to be able to develop the resources, systems and policies and procedures necessary to implement a consumer-directed PCS as soon as practicable after June 1<sup>st</sup> but no later than December 31, 2003. The consumer-directed PCS services provided must be in compliance with the provisions of RSA 161-I, Chapter He-E 801, Home and Community-based Care for the Elderly and Chronically Ill rule, and Chapter He-P 601, Certification of Other Qualified Agencies.

### **Provide Consumer-directed PCS**

The two awarded vendors will be required to provide consumer-directed PCS as soon as practicable after June 1<sup>st</sup> but no later than December 31, 2003 and forward.

### **Review Feedback From Consumers Who are Using Consumer-directed PCS**

The two awarded vendors will be responsible for collecting, analyzing and reporting feed-back from consumers who are using consumer-directed PCS from June 1, 2003 forward using the prescribed consumer satisfaction survey form (see Exhibit D). Information received will assist the vendor in determining the effectiveness of the program and whether any further refinements should be made to the program design.



- Company background and history and why the bidder is qualified to perform the tasks described in this RFP,
- Length of time the bidder has been providing services described in the RFP to the public or private sector - please describe a brief description,
- Description of catchment area, and
- Resumes for key staff to be responsible for performance of any contract resulting from this RFP.

All primary bidders shall describe how they will meet the following minimum qualifications as soon as practicable after June 1<sup>st</sup> but no later than December 31, 2003 if they become an awarded vendor:

- Be registered with the New Hampshire secretary of state to provide personal care services,
- Have a federal employer identification number, and
- Carry liability insurance for personal care services and provide workers compensation protection.

### **Subcontractor Information**

The primary bidder must state its intent to use one or more subcontractors. If the primary bidder intends to use subcontractors it shall provide the following.

- Identify specific subcontractors and the specific tasks it will be performing as outlined in this RFP,
- Provide the same information for any subcontractors as requested of the primary bidder. If the subcontractor will not provide personal care services directly, then they will not have to be registered in New Hampshire to provide personal care services or carry liability insurance for personal care services and provide workers compensation protection,
- References as specified for the primary bidder described below must also be provided for any proposed subcontractors,
- GSIL will require that the bidder provide proof of payment of any subcontractor used for this contract. Proposals shall include a plan by which GSIL will be notified of such payments, and
- The primary bidder shall not allow any subcontractor to commence work until all insurance required of the subcontractor is obtained.

## **References**

Bidders (and any subcontractors proposed) should provide a minimum of three (3) references from entities that are knowledgeable of their performance in their current capacity (particularly their knowledge of and ability to coordinate and/or provide home and community-based services to the elderly and persons with disabilities and their willingness to apply a consumer-directed approach) within the last three years. Bidders are asked to verify current contact information. Information provided shall include:

- Reference name,
- Name of organization and address, phone number and e-mail address,
- Nature of business, and
- Affiliation, if any, with the vendor and number of years.

## **F. REQUIRED ATTACHMENTS**

Bidders must include the following required attachments in their proposals.

- Cover letter addressed to David Robar, Advocacy Coordinator at GSIL.
- An administrative budget and narrative outlining the costs of operating a consumer-directed PCS.
- Current resume of the individual overseeing the development and implementation of the consumer-directed PCS functions and all key supervisory staff.
- Three (3) references including the information described above.
- A current copy of a Certificate of Good Standing from the NH Secretary of State.
- A statement of organizational purpose.
- A listing of names, positions and addresses of organization's Board of Directors.
- List administrative/program staff to be funded by the Granite State Supports Project.
- Most recent independent audited financial statement.
- Proof of ability to obtain insurance coverage as detailed in the contract should the bidder become an awarded vendor.

## **G. COST PROPOSAL**

Bidders shall submit an administrative budget and narrative outlining the costs of developing a consumer-directed PCS. The budget shall be prepared using the following cost categories:

- Personnel Direct Costs
- Other Direct Costs
  - a) Travel
    - 1. Transportation
    - 2. Per Diem
  - b) Equipment, materials and supplies
  - c) Subcontracts (if applicable)
  - d) Other

Bidders shall describe how the grant funds will be used to achieve the goals and objectives of the RFP.

## **H. CONTRACT REQUIREMENTS**

The two awarded vendors will be required to enter into a standard contract.

## **I. BID REVIEW PROCESS**

The RFP timeline is as follows:

<b>Task</b>	<b>Date/Time</b>
RFP Issued	April 4, 2003
Deadline for Submitting Questions and Request for Receiving Answers to Questions Submitted	April 11, 2003
Answers to all Questions Submitted	On or about April 18, 2003
<b>Deadline for Submission of Proposals</b>	<b>May 9, 2003</b>
Review of Applications	May 9 – May 28, 2003
Selection and Notification of Grantees	On or about May 29, 2003
Implementation of Grants	On or about June 1, 2003

**J. BID CLOSING**

Bidders shall submit one (1) typewritten, original proposal clearly labeled “ BID ORIGINAL” and four (4) identical copies clearly labeled “BID COPY” in a sealed envelope clearly labeled “Bid Enclosed.”

**K. BID REVIEW**

Bidders will be notified in writing as to the outcome of the review process.

**L. EVALUATION AND SCORING CRITERIA AND PROCESS**

Proposals shall be consistently evaluated and scored based on the following criteria:

- Demonstrated competence (20 points)
- Knowledge and/or experience in:
  - Coordinating and/or providing home and community-based services (10 points)
  - Serving the elderly and persons with disabilities of all ages (10 points)
  - Philosophy and application of consumer-direction (20 points)
- Expertise and availability of key personnel (15 points)
- Reasonableness of cost (15 points)
- Conformance with the terms of this RFP (10 points)

The total number of points that a proposal can receive is 100 points.

The proposal evaluation team shall include a representative from GSIL and DHHS’ Division of Elderly and Adult Services (DEAS).

**M. CONTACT PERSON**

Questions and requests for additional information should be addressed to:

David Robar  
Advocacy Coordinator  
Granite State Independent Living  
PO Box 7268  
Concord, NH 03302-7268  
(603) 228-9680



Fax: (603) 225-3304  
david.robar@gsil.org

**N. SUBMITTAL PROCESS AND DATE**

Bidders shall submit one (1) of the typewritten original Bid clearly labeled “BID ENCLOSED-ORIGINAL” and four (4) copies of the Bid clearly labeled “BID ENCLOSED-COPY” in a sealed envelope clearly labeled “BID ENCLOSED” by 12:00 p.m. on May 9, 2003 to:

David Robar  
Advocacy Coordinator  
Granite State Independent Living  
PO Box 7268  
Concord, NH 03302-7268

Proposals and attachments shall be sent via certified mail, commercial carrier with proof of receipt requested, or hand delivered.