

Scope of Services

The vendor agrees to provide service(s) to clients authorized by the HCAAA staff as identified below, in accordance with the vendor application, all required assurances, licenses, certifications, and rate setting documents, as applicable.

I. Services: Caregiver Respite Care- Institutional

II. Service Definition: Temporary relief for caregivers including an array of services provided in a congregate or residential setting (e.g., hospital, nursing home, and adult day center) to dependent older individuals who are in need of supervision. Services are offered on a short-term, temporary basis while the primary caregiver is unavailable or needs relief. Where appropriate, services may include meals, social and recreational activities, personal care, monitoring of health status, medical procedures and/or transportation.

III. Service Delivery: The provision of services to provide individuals who have physical, emotional, or social disabilities that prohibit them from performing basic activities of daily living. No service shall commence prior to approval from the HCAAA. The HCAAA will not pay for any services without prior approval. Proposer should also have emergency preparedness/evacuation procedures addressing situation such as fire, floods, and hurricanes, relative to client continued access to service. Compliance with procedures established by THSC in, Chapter 83.3 is mandatory.

IV. Service Activities:

Respite Care-Institutional services must be rendered by trained and supervised personnel and or volunteers. Respite care may include homemaker and personal assistance activities.

V. Unit Definition: One Hour. Does not include travel time, unless it is directly related to the older individual's care plan

VI. Service Area: Harris County

VII. Services & Reimbursement Methodology: **Interfaith Care Partners**

Service	Fixed Rate
Caregiver Respite Care Institutional	

The term of this Purchase Order shall be from the date of issuance through September 30, 2023.

VIII. Service Delivery Locations (s):

A. As authorized, services shall be provided in the provider's place of business.

IX. Service Authorization:

- A. **No service shall commence prior to approval from the HCAAA. The HCAAA will not pay for any services without prior approval.** Compliance with procedures established by THHSC in 40TAC, Chapter 83.3 is mandatory.
- B. Upon receipt of referral package, perspective agency shall start services within 14 days.
- C. If perspective agency is unable to provide services, agency must send the referral documentation within 3 business days.
- D. The referral for each consumer will include:
 - 1. Consumer's name
 - 2. Consumer's ID number
 - 3. Consumer's contact information
 - 4. Approved hours, duration and frequency
 - 5. Approved unit rate
 - 6. Consumer's need for services

X. Communication:

When communicating with HCAAA representatives Contractor and/or Sub-recipient agencies must utilize a form 2067. The form 2067 is used to communicate any issues or concerns regarding a consumer. The form may be transmitted via fax or encrypted email. Before sending an email ensure the email is properly encrypted, to meet HIPAA requirements and ensure your fax machine is in a secured location.

XI. Billing and Reimbursement:

- Submit billings with appropriate documentation to HCAAA as follows:

A. Required Documentation:

For reimbursement purposes, Vendor must submit the following documents:

- Vendor Information Form (VIF) as determined by HCAAA; a new form must be submitted to indicate changes in personnel, telephone numbers, e-mail addresses, etc. as they occur during each fiscal year;
 - Roster of participants served, where applicable;
 - Electronic reports and summaries established by the HCAAA; and
 - Match reports
- B. Reporting periods for billing will be established by (HCAAA). Vendor and each professional performing a service shall properly sign all documents. The accuracy and completeness of each document is vital to justify reimbursement for any service(s)

rendered. All required documents for reimbursements must be submitted to the Houston Health Department according to the schedule established by the HCAAA.

Contractors/Sub-recipients must submit completed monthly invoices in a timely and accurate manner. Invoices should be submitted electronically via email to Accounts.PayableHHD@houstontx.gov and invoicedesk@houstontx.gov with appropriate documentation and authorized signature, as required by HCAAA, by the close of business on the 8th day of each month. If the 8th day falls on a weekend or holiday, the information shall be submitted electronically by the close of business on the preceding business day.

If invoices are mailed they must be mailed to the following address:

**CITY OF HOUSTON HEALTH DEPARTMENT
ATTN: ACCOUNTS PAYABLE
8000 N. STADIUM DRIVE, 7TH FLOOR
HOUSTON, TX 77054**

**** HCAAA Fax numbers 832-393-5213 and 832-393-5214**

If Sub-recipients/Contractors are unable to submit their invoices by the due date, a request for an extension must be submitted in writing to the assigned Program Manager on or before the date and time the invoice is due with an explanation for the extension request. (Note: No late supplementals will be approved after September 8th due to State reporting requirements.) The length of the extension may be negotiated. However, assigned Program Managers make the final decision regarding what is a reasonable and necessary extension period.

- Repeated failure to submit invoices within the required time frame (either by the 8th day of the month or approved extension due date) will result in the issuance of a written corrective action notice.
- No supplemental invoices will be accepted after the dates noted for the recorded quarters in the following table:

Billing Period	Final acceptance date
June, July, August	September 8 th
September, October November	December 8 th
December, January February	March 8 th
March, April, May	June 8 th

- Continued repeated failure to submit invoices, as required, may result in sanction, in accordance with the Texas Administrative Code (TAC) 40, Part 1, Rule §81.13; could negatively impact the contractors/sub-recipients' designation of risk level; and will be weighted in the evaluation of past performance for those who submit proposals during any future Request for Proposal (RFP) or other procurement or selection process.

Administrative Changes:

Contractors or Sub-recipients must provide HCAAA with notification of any executive management changes within 24 hours of the change. Upon receipt of the notification the preceptive agency will be required to submit the following g updated document:

- ✓ AAA Contractor Information Form
- ✓ Agency Board Member Information
- ✓ 911 After Hrs. Contractor Information Form
- ✓

SCOPE PROGRAM REQUIREMENTS

1. Provide service(s) as designated in service authorizations and/or approvals or care plans developed by staff of the HCAAAA, where applicable.
2. Complete criminal background checks on all staff and volunteers involved in service provision as it relates to service(s).
3. Provide the HCAAAA a copy of a current license for applicable services.
4. Service(s) will be provided Monday through Friday from 8:00 a.m. to 5:00 p.m., however, service hours can be extended if approved by the Harris County Area Agency on Aging. Caregivers and elders can access staff 24 hours a day, where applicable.
5. Provide a designated telephone number to handle inquiries and complaints. In addition, the Contractor must provide participants written and verbal information on how to address complaints with the contractor and any subcontractors. A copy of the participant's rights and responsibilities must be provided to the HCAAAA.
6. Complete all approved services by the end of each fiscal year, which is September 30th.
7. Provide staff training and orientation according to State mandates.
8. Provide evaluations and assessments in accordance with the Texas Administrative Code.
9. Provide service(s) in accordance with care plans or service authorization forms completed by staff of the HCAAAA.
10. Provide service(s) in accordance with guidelines established in the Texas Administrative Code. Trained and supervised personnel involving assistance with personal care activities, supervision while at the center, recreational activities and meal preparation while the consumers are under the care of the center.
11. Develop and maintain a file on each participant, including service authorizations and service delivery records.
12. Develop and update Disaster/Emergency Preparedness procedures with emphasis on assisting frail older adults.
13. Develop and maintain program policies and procedures.
14. Acknowledge the City and its designation as the Harris County Area Agency on Aging all publicity and promotions for services, projects or programs funded by the Area Agency on Aging. The Texas Health and Human Services Commission may also be acknowledged when practical and feasible. The credit line should read: "This program is supported, in part, by the Harris County Area Agency on Aging and the Texas Health and Human Services Commission." All publicity and promotional

material and media, whether audio or visual, must be submitted 30 days prior to event/activities for review and authorization.

15. Attend HCAAA technical assistance and/or informational meetings/workshops necessary to ensure coordination of services and contract compliance.
16. Submit a written report to Harris County Area Agency on Aging of denial of services to participants for any reason, within five (5) working days of service being denied.
17. Complete an annual Risk Assessment form. Program staff of the HCAAA will determine the format and provide instructions to the contractor regarding the completion and submission deadline.
18. Complete a client satisfaction survey referencing HCAAA participants. A summary report, including the number of participants surveyed, shall be submitted to the HCAAA no later than April 30 of the contract year.
19. Respond to HCAAA inquiries within established timeframes listed on each request, including denial of service.
20. Notify the HCAAA of any closures that affect service delivery. The notification must be in writing, indicating the length and reason for any closures other than approved City of Houston holidays. In the event of an emergency closure, the HCAAA must be notified as soon as reasonably possible.
- 21. Immediately submit donations and/or contributions to the HCAAA upon receipt. The Contractor shall not solicit any contributions from HCAAA participants. If a contribution is submitted to and received by the Contractor, the contribution shall be forwarded to program staff of the HCAAA within ten (10) working days.**
22. HCAAA will annually monitor Subrecipients and Contractors through on-site or desk reviews for contract compliance.
23. Provide a copy of any sub-contractor agreements or professional services contracts/agreements to the HCAAA
24. Comply with "Sanction and Penalty Rules" as established by the Harris County Area Agency on Aging and the Texas Department on Aging.