STATE OF TENNESSEE
DEPARTMENT OF INTELLECTUAL AND DEVELOPMENTAL DISABILITIES

REQUEST FOR QUALIFICATIONS
FOR
CONSERVATOR GUARDIANSHIP SERVICES

RFQ # 34401-99194

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1. **INTRODUCTION**

The State of Tennessee, Central Procurement Office, hereinafter referred to as “the State,” issues this Request for Qualifications (“RFQ”) to define mandatory goods or services requirements; solicit responses; detail response requirements; and, outline the State’s process for evaluating responses.

Through this RFQ or any subsequent solicitation, the State seeks to buy the requested goods or services at the most favorable, competitive prices and to give ALL qualified respondents, including those that are owned by minorities, women, service-disabled veterans, persons with disabilities, and small business enterprises, the opportunity to do business with the state as contractors or subcontractors.

1.1. **Statement of Procurement Purpose**

The State of Tennessee, Department of Intellectual and Developmental Disabilities hereinafter referred to as “the State,” has issued this Request for Qualifications (RFQ) with the intent to award multiple contracts for conservatorship and guardianship services primarily for residents of DIDD Community Homes, Harold Jordan Center, and for individuals served by DIDD’s East, Middle, and West Tennessee Regional Offices who reside in various communities that are in need of conservatorship/guardianship services. Approximately eight hundred (800) individuals are provided conservatorship/guardianship services under DIDD’s existing contracts. The State is in contractual relationships with two (2) providers of these services and desires to maintain multiple providers to offer service recipients or any interested party of the person with a disability utilizing this service a choice of service providers. The basis for such fiduciary relationships with persons with a disability is established only by formal court order(s). These arrangements may only be removed or modified by further court order(s). Thus, it is anticipated that those persons/entities currently operating under a DIDD contract to serve as a conservator/guardian will remain in that capacity until a request from the individual served/person with a disability or another interested party of the person with a disability served request a change of service provider. Upon final approval of a contract(s) awarded under this RFQ, Contractors when utilized will be recommended to State courts based upon the choice of the individuals served by DIDD or, when necessary, the choice of the involved DIDD Regional Office or any interested party of the individual, upon any special requirements of the individual served and, whenever feasible, the location of an available conservator in relation to the location of the individual served. If more than one available conservator is available based on location, the selection may be based on the cost of the service. The State intends to award three (3) contracts to Respondents that can provide the services outlined in this RFQ.

1.2. **Notice of Intent to Respond**

Before the Notice of Intent to Respond Deadline detailed in RFQ § 2, Schedule of Events, potential Respondents should submit to the Solicitation Coordinator a Notice of Intent to Respond in the form of a simple e-mail or other written communication. Such notice should include the following information: the business or individual’s name (as appropriate), a contact person’s name and title, the contact person’s mailing address, telephone number, facsimile, number, and e-mail address. Filing a Notice of Intent to Respond is not a prerequisite for submitting a response; however, it is necessary to ensure receipt of notices and communications relating to this RFQ.

1.3. **Definitions and Abbreviations**

<table>
<thead>
<tr>
<th>TERM</th>
<th>DEFINITION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Conservator or Guardian</td>
<td>A person or persons appointed by the court to provide partial or full supervision, protection and assistance of the person or property or both of a person with a disability age 18 and over.</td>
</tr>
</tbody>
</table>
2. **RFQ SCHEDULE OF EVENTS**

The following schedule represents the State’s best estimates for this RFQ; however, the State reserves the right, at its sole discretion, to adjust the schedule at any time, or cancel and reissue a similar solicitation. Nothing in this RFQ is intended by the State to create any property rights or expectations of a property right in any Respondent.

<table>
<thead>
<tr>
<th>EVENT</th>
<th>TIME</th>
<th>DATE</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. RFQ Issued</td>
<td></td>
<td>February 1, 2021</td>
</tr>
<tr>
<td>2. Disability Accommodation Request Deadline</td>
<td>2:00 p.m.</td>
<td>February 4, 2021</td>
</tr>
<tr>
<td>3. Notice of Intent to Respond Deadline</td>
<td>2:00 p.m.</td>
<td>February 5, 2021</td>
</tr>
<tr>
<td>4. Written “Questions &amp; Comments” Deadline</td>
<td>2:00 p.m.</td>
<td>February 12, 2021</td>
</tr>
<tr>
<td>5. State response to written “Questions &amp; Comments”</td>
<td></td>
<td>February 24, 2021</td>
</tr>
<tr>
<td>6. RFQ Technical Response Deadline</td>
<td>12:00 p.m.</td>
<td>March 5, 2021</td>
</tr>
<tr>
<td>7. RFQ Negotiations</td>
<td></td>
<td>March 18, 2021</td>
</tr>
<tr>
<td>8. State Notice of Intent to Award Released and RFQ Files Opened for Public Inspection</td>
<td></td>
<td>March 24, 2021</td>
</tr>
<tr>
<td>9. End of Open File Period</td>
<td></td>
<td>March 31, 2021</td>
</tr>
<tr>
<td>10. State sends contract to Contractor for signature</td>
<td></td>
<td>April 1, 2021</td>
</tr>
<tr>
<td>11. Contractor Signature Deadline</td>
<td>2:00 p.m.</td>
<td>April 7, 2021</td>
</tr>
<tr>
<td>12. Contractor Anticipated Start Date</td>
<td></td>
<td>April 15, 2021</td>
</tr>
</tbody>
</table>
3. **RESPONSE REQUIREMENTS**

3.1. **Response Contents**: A response to this RFQ should address the following:

3.1.1. **Mandatory Requirements**: This section details the mandatory technical, functional, and experience requirements that must be demonstrated in the response to this RFQ in order to be passed on to Phase II of the Technical Response evaluation. A Respondent must duplicate and use RFQ Attachment A as a guide to organize responses for the Mandatory Requirements of the RFQ response. The Respondent should reference the page location of the information within the response in the indicated column of the table. This section is included in the State’s evaluation as to whether or not a Respondent meets mandatory qualifications (Phase I).

3.1.2. **General Qualifications & Experience**: This section is included in the State’s evaluation of Phase II of the Technical Response Evaluation and details general information and qualifications that must be demonstrated in the response to this RFQ. A Respondent must duplicate and use RFQ Attachment B as a guide to organize responses for this portion of the RFQ response. The Respondent should reference the page location of the information within the response in the indicated column of the table.

3.1.3. **Technical Qualifications, Experience & Approach**: This section is also included in the State’s evaluation of Phase II of the Technical Response Evaluation and details technical qualifications, experience, and approach items that must be demonstrated in the response to this RFQ. A Respondent must duplicate and use RFQ Attachment C as a guide to organize responses for this portion of the RFQ response. The Respondent should reference the page location of the information within the response in the indicated column of the table.

3.2. **Response Delivery Location**

A Respondent must ensure that the State receives a Response to this RFQ no later than the Response Deadline time and dates detailed in the RFQ § 2, Schedule of Events. All responses must be delivered to:

Kayla R. Cook  
Central Procurement Office  
Tennessee Tower, 3rd Floor  
312 Rosa L. Parks Ave.  
Nashville, TN 37243

3.3. **Response Format**

3.3.1. A Respondent must ensure that the original response meets all form and content requirements detailed within this RFQ.

3.3.2. A Respondent must submit their response in one of the two formats as specified below.

3.3.2.1. **Digital Media Submission**

3.3.2.1.1. The Technical Response document should be in the form of one (1) digital document in “PDF” format properly recorded on its own otherwise blank, standard CD-R recordable disc or USB flash drive and should be clearly identified as the:

“RFQ #33501-202012 TECHNICAL RESPONSE ORIGINAL”

and five (5) copies of the Technical Response each in the form of one (1) digital document in “PDF” format properly recorded on its own otherwise blank, standard CD-R recordable disc or USB flash drive labeled:
The digital media submission should not include copies of the sealed customer references or cost information in the general and technical evaluation phase. The customer references should be delivered by each reference in accordance with RFP Attachment B, Section B.17.

3.3.2.2. E-Mail Submission

3.3.2.2.1. Technical Response

The Technical Response document should be in the form of one (1) digital document in "PDF" format or other easily accessible digital format attached to an e-mail to the Solicitation Coordinator. Both the subject and file name should both be clearly identified as follows:

"RFP #33501-219101 TECHNICAL RESPONSE"

The customer references should be delivered by each reference in accordance with RFP Attachment B, Section B.17.

3.4. Response Prohibitions: A response to this RFQ shall not:

3.4.1. Restrict the rights of the State or otherwise qualify the response to this RFQ;

3.4.2. Include, for consideration in this procurement process or subsequent contract negotiations, incorrect information that the Respondent knew or should have known was materially incorrect;

3.4.3. Include more than one response, per Respondent, to this RFQ;

3.4.4. Include any information concerning costs (in specific dollars or numbers) associated with the Technical Response;

3.4.5. Include the respondent’s own contract terms and conditions (unless specifically requested by the RFQ); or

3.4.6. Include the respondent as a prime contractor while also permitting one or more other respondents to offer the respondent as a subcontractor in their own responses.

3.5. Response Errors & Revisions

A Respondent is responsible for any and all errors or omissions in its response to this RFQ. A Respondent will not be allowed to alter or revise its response after the Response Deadline time and dates as detailed in RFQ § 2, Schedule of Events, unless such is formally requested in writing by the State (e.g., through a request for clarification, etc.).

3.6. Response Withdrawal

A Respondent may withdraw a response at any time before the Response Deadline time and date as detailed in RFQ § 2, Schedule of Events, by submitting a written signed request by an authorized representative of the Respondent. After withdrawing a response, a Respondent may submit another Response at any time before the Response Deadline time and date as detailed in RFQ § 2, Schedule of Events.

3.7. Response Preparation Costs

The State will not pay any costs associated with the preparation, submittal, or presentation of any response. Each Respondent is solely responsible for the costs it incurs in responding to this RFQ.

3.8. Response Risk
Respondents must assume the risk of the method of dispatching any communication or response to the State. The State assumes no responsibility for delays or delivery failures resulting from the Respondent’s method of dispatch; however, there will be a presumption of timely delivery to the State by the Response Deadline if properly addressed and postmarked within three (3) business days of Response Deadline if sent ordinary mail or if sent within (1) day of Response Deadline if sent next day delivery with tracking. The State reserves the right to ask Respondent’s for proof of postmark. Failure to provide evidence of timely submission may result in a Respondent being deemed non-responsive.
4. GENERAL INFORMATION & REQUIREMENTS

4.1. Communications

4.1.1. Respondents shall reference RFQ #34401-99194 in all communications relating to this solicitation, and direct any such communications to the following person designated as the Solicitation Coordinator:

Kayla R. Cook, Sourcing Account Specialist
312 Rosa L. Parks Avenue
Tennessee Tower, 3rd Floor
615-741-9496
Kayla.R.Cook@tn.gov

The State will convey all official responses and communications related to this RFQ to the potential respondents from whom the State has received a Notice of Intent to Respond (refer to RFQ Section 1.3.).

4.1.2. Potential respondents with a handicap or disability may receive accommodation relating to the communication of this RFQ and participating in the RFQ process. Potential respondents may contact the RFQ Coordinator to request such reasonable accommodation no later than the Disability Accommodation Request Deadline detailed in RFQ § 2, Schedule of Events.

4.1.3. Unauthorized contact about this RFQ with other employees or officials of the State of Tennessee may result in disqualification from contract award consideration.

4.1.4. Notwithstanding the foregoing, potential Respondents may also contact the following as appropriate:

4.1.4.1. Staff of the Governor’s Office of Diversity Business Enterprise may be contacted for assistance with respect to available minority-owned, woman-owned, service-disabled veteran-owned, businesses owned by persons with disabilities and small business enterprises as well as general public information relating to this request; or

4.1.4.2. The following individual designated by the State to coordinate compliance with the nondiscrimination requirements of the State of Tennessee, Title VI of the Civil Rights Act of 1964, the Americans with Disabilities Act of 1990, and associated federal regulations:

VICKEY COLEMAN
UBS TOWER, 8th FLOOR
315 DEADERICK STREET
NASHVILLE, TN 37423
901-356-6324
VICKEY.COLEMAN@TN.GOV

4.2. Nondiscrimination

No person shall be excluded from participation in, be denied benefits of, or be otherwise subjected to discrimination in the performance of a contract pursuant to this solicitation or in the employment practices of the Contractor on the grounds of handicap or disability, age, race, creed, color, religion (subject to Tenn. Code Ann. §§ 4-21-401 and 405), sex, national origin, or any other classification protected by federal, Tennessee state constitutional, or statutory law. The Contractor pursuant to this solicitation shall post in conspicuous places, available to all employees and applicants, notices of nondiscrimination.

4.3. Conflict of Interest

4.3.1. The State may not consider a proposal from an individual who is, or within the past six (6) months has been, a State employee. For these purposes,
4.3.1.1. An individual shall be deemed a State employee until such time as all compensation for salary, termination pay, and annual leave has been paid;

4.3.1.2. A contract with or a proposal from a company, corporation, or any other contracting entity in which a controlling interest is held by any State employee shall be considered to be a contract with or proposal from the employee; and

4.3.1.3. A contract with or a proposal from a company, corporation, or any other contracting entity that employs an individual who is, or within the past six months has been, a State employee shall not be considered a contract with or a proposal from the employee and shall not constitute a prohibited conflict of interest.

4.3.2. This RFQ is also subject to Tenn. Code Ann. § 12-4-101.

4.4. **Respondent Required Review & Waiver of Objections**

4.4.1. Each potential respondent must carefully review this RFQ, including but not limited to, attachments, the RFQ Attachment G, pro forma Contract, and any amendments for questions, comments, defects, objections, or any other matter requiring clarification or correction (collectively called “questions and comments”).

4.4.2. Any potential respondent having questions and comments concerning this RFQ must provide such in writing to the State no later than the written “Questions & Comments Deadline” detailed in RFQ § 2, Schedule of Events.

4.4.3. Protests based on any objection shall be considered waived and invalid if the objection has not been brought to the attention of the State, in writing, by the written “Questions & Comments Deadline.”

4.5. **Disclosure of Response Contents**

4.5.1. All materials submitted to the State in response to this solicitation become property of the State of Tennessee. Selection for award does not affect this right. By submitting a response, a Respondent acknowledges and accepts that the full contents and associated documents submitted in response to this request will become open to public inspection in accordance with the laws of the State of Tennessee. Refer to RFQ § 2, Schedule of Events.

4.5.2. The RFQ responses will be available for public inspection only after the completion of evaluation of the RFQ or any resulting solicitation which this RFQ becomes a part of, whichever is later.

4.6. **Notice of Professional Licensure, Insurance, and Department of Revenue Registration Requirements**

4.6.1. All persons, agencies, firms or other entities that provide legal or financial opinions, which a Respondent provides for consideration and evaluation by the State as part of a response to this RFQ, shall be properly licensed to render such opinions.

4.6.2. Before the Contract resulting from this RFQ is signed, the apparent successful Respondent (and Respondent employees and subcontractors, as applicable) must hold all necessary, appropriate business and professional licenses to provide service as required. The State may require any Respondent to submit evidence of proper licensure.

4.6.3. Before the Contract resulting from this RFQ is signed, the apparent successful Respondent must provide a valid, Certificate of Insurance indicating current insurance coverage meeting minimum requirements as may be specified by the RFQ.

4.6.4. Before the Contract resulting from this RFQ is signed, the apparent successful Respondent must be registered with the Department of Revenue for the collection of Tennessee sales and use tax. The State shall not approve a contract unless the Respondent provides proof of such registration or provides documentation from the Department of Revenue that the Contractor is exempt from this registration requirement. The foregoing is a mandatory requirement of an award of a contract pursuant to this solicitation. To register, please visit the Department of Revenue’s Tennessee Taxpayer

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Access Point (TNTAP) website for Online Registration and the Vendor Contract Questionnaire. These resources are available at the following: https://tntap.tn.gov/eservices/#1

4.7. **RFQ Amendments & Cancellation**

4.7.1. The State reserves the right to amend this RFQ at any time, provided that it is amended in writing. However, prior to any such amendment, the State will consider whether it would negatively impact the ability of potential respondents to meet the deadlines and revise the RFQ Schedule of Events if deemed appropriate. If a RFQ amendment is issued, the State will convey it to potential respondents who submitted a Notice of Intent to Respond (refer to RFQ § 1.3). A response must address the final RFQ (including its attachments) as may be amended.

4.7.2. The State reserves the right, at its sole discretion, to cancel or to cancel and reissue this RFQ in accordance with applicable laws and regulations.

4.8. **State Right of Rejection**

4.8.1. Subject to applicable laws and regulations, the State reserves the right to reject, at its sole discretion, any and all proposals.

4.8.2. The State may deem as nonresponsive and reject any proposal that does not comply with all terms, conditions, and performance requirements of this RFQ. Notwithstanding the foregoing, the State reserves the right to seek clarifications or to waive, at its sole discretion, a response’s minor variances from full compliance with this RFQ. If the State waives variances in a response, such waiver shall not modify the RFQ requirements or excuse the Respondent from full compliance with such, and the State may hold any resulting vendor to strict compliance with this RFQ.

4.8.3. The State will review the response evaluation record and any other available information pertinent to whether or not each respondent is responsive and responsible. If the evaluation team identifies any respondent that appears not to meet the responsive and responsible thresholds such that the team would not recommend the respondent for potential contract award, this determination will be fully documented for the record. (“Responsive” is defined as submitting a response that conforms in all material respects to the RFQ. “Responsible” is defined as having the capacity in all respects to perform fully the contract requirements, and the integrity and reliability which will assure good faith performance.)

4.9. **Assignment & Subcontracting**

4.9.1. The vendor may not subcontract, transfer, or assign any portion of the Contract awarded as a result of this RFQ without prior approval of the State. The State reserves the right to refuse approval, at its sole discretion, of any subcontract, transfer, or assignment.

4.9.2. If a Respondent intends to use subcontractors, the response to this RFQ must specifically identify the scope and portions of the work each subcontractor will perform (refer to RFQ Attachment B, Item B.14.).

4.9.3. Subcontractors identified within a response to this RFQ will be deemed as approved by the State unless the State expressly disapproves one or more of the proposed subcontractors prior to signing the Contract.

4.9.4. The Contractor resulting from this RFQ may only substitute another subcontractor for a proposed subcontractor at the discretion of the State and with the State’s prior, written approval.

4.9.5. Notwithstanding any State approval relating to subcontracts, the Contractor resulting from this RFQ will be the prime contractor and will be responsible for all work under the Contract.

4.10. **Next Ranked Respondent**
The State reserves the right to initiate negotiations with the next ranked respondent should the State cease doing business with any respondent selected via this RFQ process.

5. **PROCUREMENT PROCESS & CONTRACT AWARD**

5.1. The complete vendor selection will be based on the Qualification of Technical Responses. Any contract award is subject to successful contract negotiation.

5.2. **Qualification of Technical Responses:** Technical Responses will be short-listed for further evaluation, analysis or negotiation if they are apparently responsive, responsible, and within the competitive range. A Technical Response will be deemed within the competitive range based on the following criterion:

**Phase I:** The State will evaluate the Mandatory Requirements set forth in RFQ Attachment A on a pass/fail basis.

**Phase II:** Following the Phase I evaluation, the State will apply a standard equitable evaluation model, which will represent a qualitative assessment of each response. Each response will be scored by Evaluation Team members according to the Technical Response & Evaluation Guides (See RFQ Attachments B & C).

The Solicitation Coordinator will total the average score from the evaluation team for each responsive and responsible Respondent’s Technical Response Points for RFQ Attachments B & C to determine which of the Respondents are considered Qualified and within the competitive range.

The competitive range shall be a minimum of eighty (80) points scored between RFQ Attachments B & C. The top three (3) scoring proposals will be awarded a contract.

5.3. **Clarifications and Negotiations:** The State reserves the right to award a contract on the basis of initial responses received; therefore, each response should contain the respondent's best terms from a technical and cost standpoint. However, the State reserves the right to conduct clarifications or negotiations with respondents. All communications, clarifications, and negotiations shall be conducted in a manner that supports fairness in response improvement.

5.3.1. **Clarifications:** The State may identify areas of a response that may require further clarification or areas in which it is apparent that there may have been miscommunications or misunderstandings as to the State’s specifications or requirements. The State may seek to clarify those issues identified during one or multiple clarification round(s). Each clarification sought by the State may be unique to an individual respondent.

5.3.2. **Negotiations:** The State may elect to negotiate with Qualified Respondents, within the competitive range, by requesting revised responses, negotiating costs, or finalizing contract terms and conditions. The State reserves the right to conduct multiple negotiation rounds.

5.3.2.1. **Cost Negotiations:** All responsive respondents within the competitive range will be given equivalent information with respect to cost negotiations. All cost negotiations will be documented for the procurement file. Additionally, the State may conduct target pricing and other goods or services level negotiations. Target pricing may be based on considerations such as current pricing, market considerations, benchmarks, budget availability, or other methods that do not reveal individual respondent pricing. During target price negotiations, respondents are not obligated to meet or beat target prices, but will not be allowed to increase prices.

5.4.2.2. If the State determines costs and contract finalization discussions and negotiations are not productive, the State reserves the right to bypass the apparent best evaluated Respondent and enter into contract negotiations with the next apparent best evaluated Respondent.
5.5. Evaluation Guide

The State will consider qualifications, experience, technical approach, and cost (if applicable) in the evaluation of responses and award points in each of the categories detailed below. The maximum evaluation points possible for each category are detailed below.

<table>
<thead>
<tr>
<th>Evaluation Category</th>
<th>Maximum Points Possible</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mandatory Requirements (refer to RFQ Attachment A)</td>
<td>Pass/Fail</td>
</tr>
<tr>
<td>General Qualifications, Experience, Technical Qualifications, Experience &amp; Approach (refer to RFQ Attachment B)</td>
<td>40</td>
</tr>
<tr>
<td>Technical Qualifications, Experience &amp; Approach (refer to RFQ Attachment C)</td>
<td>60</td>
</tr>
</tbody>
</table>
**TECHNICAL RESPONSE & EVALUATION GUIDE**

All Respondents must address all items detailed below and provide, in sequence, the information and documentation as required (referenced with the associated item references). All Respondents must also detail the response page number for each item in the appropriate space below.

The Solicitation Coordinator will review all responses to determine if the Mandatory Requirement Items are addressed as required and mark each with pass or fail. For each item that is not addressed as required, the Evaluation Team must review the responses and attach a written determination. In addition to the Mandatory Requirement Items, the Solicitation Coordinator will review each response for compliance with all RFQ requirements.

<table>
<thead>
<tr>
<th>RESPONSIBLE LEGAL ENTITY NAME:</th>
<th>Section A— Mandatory Requirement Items</th>
<th>Pass/Fail</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Response Page #</strong> <em>(Respondent completes)</em></td>
<td><strong>Item Ref.</strong></td>
<td></td>
</tr>
<tr>
<td><strong>A.1.</strong></td>
<td>Provide the Statement of Certifications and Assurances (RFQ Attachment E) completed and signed by an individual empowered to bind the Respondent to the provisions of this RFQ and any resulting contract. The document must be signed without exception or qualification.</td>
<td></td>
</tr>
</tbody>
</table>
| **A.2.** | Provide a statement, based upon reasonable inquiry, of whether the Respondent or any individual who shall perform work under the contract has a possible conflict of interest *(e.g., employment by the State of Tennessee)* and, if so, the nature of that conflict.  
**NOTE:** Any questions of conflict of interest shall be solely within the discretion of the State, and the State reserves the right to cancel any award. |  |  |
<p>| <strong>A.3.</strong> | Provide a current bank reference indicating that the Respondent’s business relationship with the financial institution is in positive standing. Such reference must be written in the form of a standard business letter, signed, and dated within the past three (3) months. |  |  |
| <strong>A.4.</strong> | Provide two current positive credit references from vendors with which the Respondent has done business written in the form of standard business letters, signed, and dated within the past three (3) months. |  |  |
| <strong>A.5.</strong> | Provide an official document or letter from an accredited credit bureau, verified and dated within the last three (3) months and |  |  |</p>
<table>
<thead>
<tr>
<th>Response Page # (Respondent completes)</th>
<th>Item Ref.</th>
<th>Section A—Mandatory Requirement Items</th>
<th>Pass/Fail</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>indicating a positive credit rating for the Respondent (NOTE: A credit bureau report number without the full report is insufficient and will not be considered responsive.)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>A.6.</td>
<td>Provide a statement verifying the respondent can comply with section A.6. Minimum Standards of the pro forma contract.</td>
<td></td>
</tr>
</tbody>
</table>

*State Use – RFQ Coordinator Signature, Printed Name & Date:*
## TECHNICAL RESPONSE & EVALUATION GUIDE

### SECTION B: GENERAL QUALIFICATIONS & EXPERIENCE

The Respondent must address all items detailed below and provide, in sequence, the information and documentation as required (referenced with the associated item references). The Respondent must also detail the response page number for each item in the appropriate space below. Evaluation Team members will independently evaluate and assign one score for all responses to Section B—General Qualifications & Experience Items.

<table>
<thead>
<tr>
<th>RESPONDENT LEGAL ENTITY NAME:</th>
<th>Section B— General Qualifications &amp; Experience Items</th>
</tr>
</thead>
<tbody>
<tr>
<td>Response Page # (Respondent completes)</td>
<td>Item Ref.</td>
</tr>
<tr>
<td></td>
<td>B.1. Detail the name, e-mail address, mailing address, telephone number, and facsimile number of the person the State should contact regarding the response.</td>
</tr>
<tr>
<td></td>
<td>B.2. Describe the Respondent’s form of business (i.e., individual, sole proprietor, corporation, non-profit corporation, partnership, limited liability company) and business location (physical location or domicile).</td>
</tr>
<tr>
<td></td>
<td>B.3. Detail the number of years the Respondent has been in business.</td>
</tr>
<tr>
<td></td>
<td>B.4. Briefly describe how long the Respondent has been performing the goods or services required by this RFQ.</td>
</tr>
<tr>
<td></td>
<td>B.5. Describe the Respondent’s number of employees, client base, and location of offices.</td>
</tr>
<tr>
<td></td>
<td>B.6. Provide a statement of whether there have been any mergers, acquisitions, or sales of the Respondent within the last ten (10) years. If so, include an explanation providing relevant details.</td>
</tr>
<tr>
<td></td>
<td>B.7. Provide a statement of whether the Respondent or, to the Respondent’s knowledge, any of the Respondent’s employees, agents, independent contractors, or subcontractors, proposed to provide work on a contract pursuant to this RFQ, have been convicted of, pled guilty to, or pled <em>nolo contendere</em> to any felony. If so, include an explanation providing relevant details.</td>
</tr>
<tr>
<td></td>
<td>B.8. Provide a statement of whether, in the last ten (10) years, the Respondent has filed (or had filed against it) any bankruptcy or insolvency proceeding, whether voluntary or involuntary, or undergone the appointment of a receiver, trustee, or assignee for the benefit of creditors. If so, include an explanation providing relevant details.</td>
</tr>
<tr>
<td></td>
<td>B.9. Provide a statement of whether there is any material, pending litigation against the Respondent that the Respondent should reasonably believe could adversely affect its ability to meet contract requirements pursuant to this RFQ or is likely to have a material adverse effect on the Respondent’s financial condition. If such exists, list each separately, explain the relevant details, and attach the opinion of counsel addressing whether and to what extent it would impair the Respondent’s performance in a contract pursuant to this RFQ.</td>
</tr>
</tbody>
</table>

**NOTE:** All persons, agencies, firms, or other entities that provide legal opinions regarding the Respondent must be properly licensed to render such opinions. The State may require the Respondent to submit proof of such licensure detailing the state of licensure and licensure number for each person or entity that renders such opinions.

Provide a statement of whether there is any pending or in progress Securities Exchange Commission investigations involving the Respondent. If such exists, list each separately.
<table>
<thead>
<tr>
<th>Item</th>
<th>Section B— General Qualifications &amp; Experience Items</th>
</tr>
</thead>
<tbody>
<tr>
<td>B.10.</td>
<td>explain the relevant details, and attach the opinion of counsel addressing whether and to what extent it will impair the Respondent’s performance in a contract pursuant to this RFQ. NOTE: All persons, agencies, firms, or other entities that provide legal opinions regarding the Respondent must be properly licensed to render such opinions. The State may require the Respondent to submit proof of such licensure detailing the state of licensure and licensure number for each person or entity that renders such opinions.</td>
</tr>
<tr>
<td>B.11.</td>
<td>Provide a brief, descriptive statement detailing evidence of the Respondent’s ability to deliver the goods or services sought under this RFQ (e.g., prior experience, training, certifications, resources, program and quality management systems, etc.).</td>
</tr>
<tr>
<td>B.12.</td>
<td>Provide a narrative description of the proposed contract team, its members, and organizational structure along with an organizational chart identifying the key people who will be assigned to provide the goods or services required by this RFQ, illustrating the lines of authority, and designating the individual responsible for the completion of each task and deliverable of the RFQ.</td>
</tr>
<tr>
<td>B.13.</td>
<td>Provide a personnel roster listing the names of key people who the Respondent will assign to perform tasks required by this RFQ along with the estimated number of hours that each individual will devote to the required tasks. Follow the personnel roster with a resume for each of the people listed. The resumes must detail the individual’s title, education, current position with the Respondent, and employment history.</td>
</tr>
<tr>
<td>B.14.</td>
<td>Provide a statement of whether the Respondent intends to use subcontractors to accomplish the work required by this RFQ, and if so, detail: (a) the names of the subcontractors along with the contact person, mailing address, telephone number, and e-mail address for each; (b) a description of the scope and portions of the work each subcontractor will perform; and (c) a statement specifying that each proposed subcontractor has expressly assented to being proposed as a subcontractor in the Respondent’s response to this RFQ.</td>
</tr>
</tbody>
</table>
| B.15. | Provide documentation of the Respondent’s commitment to diversity as represented by the following: (a) Business Strategy: Provide a description of the Respondent’s existing programs and procedures designed to encourage and foster commerce with business enterprises owned by minorities, women, service-disabled veterans, businesses owned by persons with disabilities, and small business enterprises. Please also include a list of the Respondent’s certifications as a diversity business, if applicable. (b) Business Relationships: Provide a listing of the Respondent’s current contracts with business enterprises owned by minorities, women, service-disabled veterans, businesses owned by persons with disabilities, and small business enterprises. Please include the following information: (i) contract description; (ii) contractor name and ownership characteristics (i.e., ethnicity, gender, service-disabled, disability); and (iii) contractor contact name and telephone number. (c) Estimated Participation: Provide an estimated level of participation by business enterprises owned by minorities, women, service-disabled veterans, businesses owned by persons with disabilities, and small business enterprises if a contract is
awarded to the Respondent pursuant to this RFQ. Please include the following information:

(i) a percentage (%) indicating the participation estimate. (Express the estimated participation number as a percentage of the total estimated contract value that will be dedicated to business with subcontractors and supply contractors having such ownership characteristics only and **DO NOT INCLUDE DOLLAR AMOUNTS**);

(ii) anticipated goods or services contract descriptions;

(iii) names and ownership characteristics (i.e., ethnicity, gender, service-disabled veterans, disability) of anticipated subcontractors and supply contractors.

NOTE: In order to claim status as a Diversity Business Enterprise under this contract, businesses must be certified by the Governor’s Office of Diversity Business Enterprise (Go-DBE). Please visit the Go-DBE website at [https://tn.diversitysoftware.com/FrontEnd/StartCertification.asp?TN=tn&XID=9810](https://tn.diversitysoftware.com/FrontEnd/StartCertification.asp?TN=tn&XID=9810) for more information.

(d) **Workforce.** Provide the percentage of the Respondent’s total current employees by ethnicity and gender.

NOTE: Respondents that demonstrate a commitment to diversity will advance State efforts to expand opportunity to do business with the State as contractors and subcontractors. Response evaluations will recognize the positive qualifications and experience of a Respondent that does business with enterprises owned by minorities, women, service-disabled veterans, businesses owned by persons with disabilities, and small business enterprises and who offer a diverse workforce.

### B.16.

Provide a statement of whether or not the Respondent has any current contracts with the State of Tennessee or has completed any contracts with the State of Tennessee within the previous five-year period. If so, provide the following information for all current and completed contracts:

(a) the name, title, telephone number and e-mail address of the State contact responsible for the contract at issue;

(b) the name of the procuring State agency;

(c) a brief description of the contract’s specification for goods or scope of services;

(d) the contract term; and

(e) the contract number.

### B.17.

Provide customer references from individuals who are not current or former State employees for projects similar to the goods or services sought under this RFQ and which represent:

- two (2) accounts Respondent currently services that are similar in size to the State; and
- three (3) completed projects.

References from at least three (3) different individuals are required to satisfy the requirements above, e.g., an individual may provide a reference about a completed project and another reference about a currently serviced account. The standard reference questionnaire, which must be used and completed is provided at RFQ Attachment F. References that are not completed as required may be deemed nonresponsive and may not be considered.

The Respondent will be solely responsible for obtaining fully completed reference questionnaires and including them in the sealed Technical Response. In order to obtain and submit the completed reference questionnaires, follow the process below:
<table>
<thead>
<tr>
<th>Item Ref.</th>
<th>Section B— General Qualifications &amp; Experience Items</th>
</tr>
</thead>
<tbody>
<tr>
<td>(a)</td>
<td>Add the Respondent’s name to the standard reference questionnaire at Attachment F, and make a copy for each reference.</td>
</tr>
<tr>
<td>(b)</td>
<td>Send a reference questionnaire and a new, standard #10 envelope to each reference.</td>
</tr>
<tr>
<td>(c)</td>
<td>Instruct the reference to:</td>
</tr>
<tr>
<td>(i)</td>
<td>complete the reference questionnaire;</td>
</tr>
<tr>
<td>(ii)</td>
<td>sign and date the completed reference questionnaire;</td>
</tr>
<tr>
<td>(iii)</td>
<td>seal the completed, signed, and dated reference questionnaire within the envelope provided;</td>
</tr>
<tr>
<td>(iv)</td>
<td>sign his or her name in ink across the sealed portion of the envelope; and</td>
</tr>
<tr>
<td>(v)</td>
<td>return the sealed envelope directly to the Respondent (the Respondent may wish to give each reference a deadline, such that the Respondent will be able to collect all required references in time to include them within the sealed Technical Response).</td>
</tr>
<tr>
<td>(d)</td>
<td>Do NOT open the sealed references upon receipt.</td>
</tr>
<tr>
<td>(e)</td>
<td>Enclose all sealed reference envelopes within a larger, labeled envelope for inclusion in the Technical Response as required.</td>
</tr>
</tbody>
</table>

NOTES:
- The State will not accept late references or references submitted by any means other than that which is described above, and each reference questionnaire submitted must be completed as required.
- The State will not review more than the number of required references indicated above.
- While the State will base its reference check on the contents of the sealed reference envelopes included in the Technical Response package, the State reserves the right to confirm and clarify information detailed in the completed reference questionnaires, and may consider clarification responses in the evaluation of references.
- The State is under no obligation to clarify any reference information.

B.18. Provide a statement and any relevant details addressing whether the Respondent is any of the following:

(a) is presently debarred, suspended, proposed for debarment, or voluntarily excluded from covered transactions by any federal or state department or agency;

(b) has within the past three (3) years, been convicted of, or had a civil judgment rendered against the contracting party from commission of fraud, or a criminal offence in connection with obtaining, attempting to obtain, or performing a public (federal, state, or local) transaction or grant under a public transaction; violation of federal or state antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;

(c) is presently indicted or otherwise criminally or civilly charged by a government entity (federal, state, or local) with commission of any of the offenses detailed above; and

- has within a three (3) year period preceding the contract had one or more public transactions (federal, state, or local) terminated for cause or default.
<table>
<thead>
<tr>
<th>Response Page # (Respondent completes)</th>
<th>Item Ref.</th>
<th>Section B— General Qualifications &amp; Experience Items</th>
</tr>
</thead>
<tbody>
<tr>
<td>(maximum possible score = 40)</td>
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</tbody>
</table>

State Use – Evaluator Identification:
TECHNICAL RESPONSE & EVALUATION GUIDE

SECTION C: TECHNICAL QUALIFICATIONS, EXPERIENCE & APPROACH. The Respondent should explain its approach to providing goods or services to the State. The items listed below represent specific questions the State would request you answer in your response. For ease of review, please annotate your explanation so that it contains references to the items listed below where they are addressed. Respondent should not feel constrained to answer only the specific questions listed below in its explanation and should feel free to provide attachments if necessary in an effort to provide a more thorough response.

The Evaluation Team, made up of three (3) or more State employees, will independently evaluate and score the response to each item. Each evaluator will use the following whole number, raw point scale for scoring each item:

0 = little value  1 = poor  2 = fair  3 = satisfactory  4 = good  5 = excellent

The Solicitation Coordinator will multiply the Item Score by the associated Evaluation Factor (indicating the relative emphasis of the item in the overall evaluation). The resulting product will be the item’s raw, weighted score for purposes of calculating the section scores as indicated.

<table>
<thead>
<tr>
<th>RESPONDENT LEGAL ENTITY NAME:</th>
<th></th>
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</thead>
<tbody>
<tr>
<td><strong>Response Page #</strong></td>
<td><strong>Item Ref.</strong></td>
</tr>
<tr>
<td>(Respondent completes)</td>
<td></td>
</tr>
<tr>
<td>C.1.</td>
<td>Provide a narrative that illustrates the Respondent’s understanding of the State’s requirements and project schedule.</td>
</tr>
<tr>
<td>C.2.</td>
<td>Provide a narrative that illustrates how the Respondent will complete the delivery of goods or scope of services, accomplish required objectives, and meet the State’s project schedule.</td>
</tr>
<tr>
<td>C.3.</td>
<td>Provide a narrative that illustrates how the Respondent will manage the project, ensure delivery of specified goods or completion of the scope of services, and accomplish required objectives within the State’s project schedule.</td>
</tr>
<tr>
<td>C.4.</td>
<td>Provide a narrative that illustrates the Respondent’s ability to attend and prepare for 100% of hearings, proceedings, and conferences related to potential conservatorship appointments, as scheduled by any court in Tennessee that has jurisdiction over the conservatorship.</td>
</tr>
<tr>
<td>C.5.</td>
<td>Provide a narrative that illustrates initial and ongoing training requirements for conservator representatives secured by Respondent to fulfill the scope of services.</td>
</tr>
<tr>
<td>C.6.</td>
<td>Provide a narrative that illustrates the Respondent’s understanding of and approach to person-centered practices, dignity of risk, and upholding preferences and choices of the person with a disability.</td>
</tr>
<tr>
<td>C.7.</td>
<td>Provide a narrative that illustrates the Respondent’s experience with supporting a person’s right of association, fostering engagement and community participation, and supporting a person with an intellectual or developmental disability in determining</td>
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<tr>
<td>Item</td>
<td>Description</td>
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<tr>
<td>C.8.</td>
<td>Provide a narrative that illustrates Respondent's policies and practices to ensure the conservator representative aids the person with an intellectual or developmental disability on matters within the scope of the conservatorship order and collaborates as needed with the person, natural supports, or those providing decision-making support to the person on other matters beyond the scope of the conservatorship order.</td>
</tr>
<tr>
<td>C.9.</td>
<td>Provide a narrative that illustrates Respondent's policies and practices for conflict resolution with the person with an intellectual or developmental disability, the conservator representative, and others in the person's support system.</td>
</tr>
</tbody>
</table>
| C.10.        | Provide a narrative that illustrates Respondent's policies and procedures for recommending that rights be restored for a person with an intellectual or developmental disability when indicated, such as, but not limited to, the following circumstances:  
   • The condition has changed and the adult is capable of exercising rights previously removed  
   • Capacity has been regained in areas where the adult was found incapacitated or without decision-making capacity  
   • When it is believed less restrictive alternatives exist, such as supported decision-making support, that would provide the necessary support for the adult |            | 5                 |                    |
<p>| C.11.        | Explain the policies and procedures the Respondent has implemented to ensure that powers specifically removed from the person with an intellectual or developmental disability and vested in your agency are exercised with due diligence, while still recognizing that any right not specifically removed through court order remains a right of the person. |            | 5                 |                    |
| C.12.        | Explain the Respondent's policies and procedures that ensure person-centered planning is utilized. |            | 4                 |                    |
| C.13.        | Detail the policies and procedures implemented by the Respondent to ensure that no conflict of interest exists concerning the individual with an intellectual or developmental disability prior to consenting to serve as the conservator for the individual. Include information about conservator representative requirements to read and sign a statement indicating that conflicts will be disclosed as soon as possible upon discovery of the conflict before being assigned a |            | 5                 |                    |</p>
<table>
<thead>
<tr>
<th>Item Ref.</th>
<th>Section C—Technical Qualifications, Experience &amp; Approach Items</th>
<th>Item Score</th>
<th>Evaluation Factor</th>
<th>Raw Weighted Score</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>new case or continuing with cases already assigned. Please provide a copy of the conflict of interest policy.</td>
<td></td>
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<tr>
<td>C.14.</td>
<td>Explain how the Respondent will prepare and file any reports, accountings, and inventories as listed in Title 34 of the Tennessee Code Annotated or as ordered by a court in a timely manner.</td>
<td></td>
<td>5</td>
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<tr>
<td>C.15.</td>
<td>Explain how the Respondent will ensure attendance to the following meetings for any person being served:</td>
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<tr>
<td></td>
<td>a. Individual Support Planning meetings;</td>
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<td></td>
<td>b. Circle of Support meetings;</td>
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<td></td>
<td>c. Transition meetings;</td>
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<td>d. Psychopharmacology clinics;</td>
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<td></td>
<td>e. Quality of Life meetings;</td>
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<td></td>
<td>f. Team Building meetings;</td>
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<td>g. Agency meetings; and</td>
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<td>h. Meetings with providers.</td>
<td></td>
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<tr>
<td>C.16.</td>
<td>Explain how Respondent will ensure that at least one of Respondent’s conservator representatives is a licensed attorney or is certified as a Registered Conservator/Guardian by the National Conservator/Guardianship Association.</td>
<td></td>
<td>4</td>
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<tr>
<td>C.17.</td>
<td>Explain how Respondent will ensure that a conservator representative meets the following minimal standards of:</td>
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<tr>
<td></td>
<td>a. Being a high school graduate or possessing the GED equivalent;</td>
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<td></td>
<td>b. Having one year of relevant work experience related to conservatorship or guardianship or relevant ID/DD experience or education related to conservatorship/guardianship;</td>
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<td></td>
<td>c. Having no convictions or pleas to a felony or misdemeanor involving financial or physical harm;</td>
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<td></td>
<td>d. Having not been administratively or civilly liable in an action involving fraud, abuse, neglect, exploitation or misappropriation;</td>
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<td></td>
<td>e. Having not been removed as a conservator or guardian by a court for actions involving fraud, abuse, neglect, misappropriation or exploitation;</td>
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<tr>
<td>Item Ref.</td>
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<td>f.</td>
<td>Not having an insurance or bond agent finding of liability in a subrogation action; and</td>
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<tr>
<td>g.</td>
<td>Meeting the definitions for reputable and responsible character in T.C.A. § 33-4-407(14).</td>
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<tr>
<td>C.18.</td>
<td>Please provide a list of all State counties in which the Respondent provides conservatorship services.</td>
<td>3</td>
<td></td>
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<tr>
<td>C.19.</td>
<td>What procedures does Respondent have in place to ensure availability within 24 hours’ notice to meet in-person with the ward, circle of support, physician, and DIDD representatives as needed? Please include how much notice would be required and if contact by telephone would be available while on vacation or in an emergency.</td>
<td>5</td>
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<tr>
<td>C.20.</td>
<td>What procedures are in place to ensure the ward, circle of support, physician, or DIDD representative can contact the conservator representative in an emergency?</td>
<td>5</td>
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<tr>
<td>C.21.</td>
<td>Explain how the State will be notified when the conservator representative goes on vacation or is on leave.</td>
<td>4</td>
<td></td>
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<tr>
<td>C.22.</td>
<td>What procedures does the Respondent have in place to ensure that the ward receives a new conservator representative when the employment relationship between the Respondent and the conservator representative is ended or the conservator representative is on any type of extended leave?</td>
<td>4</td>
<td></td>
<td></td>
</tr>
<tr>
<td>C.23.</td>
<td>Is each conservator representative able to provide individualized representation for each person they are appointed to represent as conservator? If yes, please explain how you would provide individualized representation. If no, please provide an explanation.</td>
<td>5</td>
<td></td>
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<tr>
<td>C.24.</td>
<td>Explain all training related to conservatorships that the Respondent provides to the persons who will serve as conservator representatives. Provide a copy of all training material.</td>
<td>4</td>
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<tr>
<td>C.25.</td>
<td>Provide a copy of the Respondent’s conservatorship policies and or procedures.</td>
<td>4</td>
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<tr>
<td>C.26.</td>
<td>What policies does Respondent have regarding conservatorship services to individuals charged with or convicted of either a misdemeanor or felony?</td>
<td>3</td>
<td></td>
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</tr>
<tr>
<td>Item Ref.</td>
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<td>C.27.</td>
<td>What is the minimum number of individuals the Respondent can be court appointed to represent as conservator?</td>
<td></td>
<td>3</td>
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<tr>
<td>C.28.</td>
<td>What is the maximum number of individuals the Respondent can be court appointed to represent as conservator?</td>
<td></td>
<td>3</td>
<td></td>
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<tr>
<td>C.29.</td>
<td>Detail the Respondent’s approach and experience with the following circumstances:</td>
<td></td>
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<tr>
<td></td>
<td>a. Sexual relations involving an individual with an intellectual disability;</td>
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<tr>
<td></td>
<td>b. Marriage relations involving an individual with an Intellectual disability;</td>
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<td></td>
<td>c. Dating involving an individual with an intellectual disability;</td>
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<td></td>
<td>d. Consumption of alcohol involving an individual with an intellectual disability;</td>
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<td>e. Use of a controlled substance by an individual with an intellectual disability;</td>
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<td>f. End of life decisions involving an individual with an intellectual disability;</td>
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<td>g. Internet usage by an individual with an intellectual disability;</td>
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<td>h. Gun ownership by an individual with an intellectual disability;</td>
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<tr>
<td></td>
<td>i. Driving an individual with an intellectual disability;</td>
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<td>j. Placement decisions by an individual with an intellectual disability;</td>
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<td></td>
<td>k. Money management by an individual with an intellectual disability; and</td>
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<td></td>
<td>l. Cell phone ownership and use by an individual with an intellectual disability.</td>
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</tr>
<tr>
<td>C.30.</td>
<td>Please describe your experience with TennCare and the DIDD Home and Community Based Services waiver.</td>
<td></td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>C.31.</td>
<td>Please detail the following:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Number of conservator representatives that are employed by the Respondent and their geographical disbursement in Tennessee.</td>
<td></td>
<td>2</td>
<td></td>
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<tr>
<td></td>
<td>- What is the maximum caseload per representative? How are the representatives</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Response Page # (Respondent completes)</td>
<td>Item Ref.</td>
<td>Section C—Technical Qualifications, Experience &amp; Approach Items</td>
<td>Item Score</td>
<td>Evaluation Factor</td>
</tr>
<tr>
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</tr>
<tr>
<td>divided throughout the state? How are the caseloads divided per representative (i.e., maximum case load number)?</td>
<td>C.32.</td>
<td>Explain how the Respondent will handle checking all state registries involving abuse, neglect, or sexual misconduct and conduct a background check prior to hiring conservator representatives. Include how these checks are documented and maintained in the respective employee's file and how often are registries and/or background checks made.</td>
<td>5</td>
<td></td>
</tr>
<tr>
<td>C.33. Provide a narrative that illustrates how Respondent will handle the following scenario: If Respondent is asked to take another case, but the conservator representatives are at maximum caseload capacity or the needs of the individual (and sometimes family members) are beyond that which the conservator representative is comfortable handling, how would this situation be addressed?</td>
<td>3</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>C.34. When appointed to be the conservator of a person supported, is the person supported's Individual Support Plan, case plan, Behavioral Support Plan if applicable, reviewed by the conservator representative, and is there signed proof retained in the file that the plan(s) were reviewed prior to the conservator representative working with the person supported?</td>
<td>4</td>
<td></td>
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<td>C.35. Explain what, if any, documents, would be reviewed prior to consenting to serve as the conservator for the person supported.</td>
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<td>C.36. Explain what services have been secured by Respondent to provide legal advice to Respondent. Please include the attorney's name and describe his/her experience with conservatorship law.</td>
<td>2</td>
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<td>C.37. Provide a narrative that explains what Respondent considers a conflict of interest between Respondent and the person supported.</td>
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<td>C.38. Provide a narrative that explains what Respondent considers a conflict of interest between the conservator representative and the ward.</td>
<td>3</td>
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<td>C.39. Provide a narrative that illustrates how Respondent would handle a disagreement between Respondent and DIDD regarding a perceived conflict of interest between Respondent and the ward or the conservator representative and the ward.</td>
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<tr>
<td>Response Page # (Respondent completes)</td>
<td>Item Ref.</td>
<td>Section C— Technical Qualifications, Experience &amp; Approach Items</td>
<td>Item Score</td>
<td>Evaluation Factor</td>
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<td>C.40.</td>
<td>Provide a narrative that illustrates Respondent’s procedures in the event a DIDD provider agency, Circle Of Support, Independent Support Coordinator, etc. does not agree with the decision of a conservator representative, which allows the conservator representative to have a designated, knowledgeable individual within the agency to discuss the issue with and confirm that the decision made by the conservator representative is in the best interest of the person supported and also in line with the DIDD Provider Manual and rules/policies, as well as applicable law.</td>
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<tr>
<td>C.41.</td>
<td>Please provide a narrative that illustrates how Respondent will handle conflicts with the DIDD Provider Manual and/or TennCare rule. (i.e., sexual relationships, feeding tubes, church, marriage, church attendance, etc.)</td>
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<tr>
<td>C.42.</td>
<td>Please provide a narrative that illustrates how Respondent would respond if an unfamiliar family member or friend steps forward and asks to serve as conservator.</td>
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<td>C.43.</td>
<td>Provide a narrative that illustrates how Respondent would handle experiencing a conflict with a provider agency. Please describe how it would impact the persons supported being served by the agency. (i.e. would the individuals be moved, would the conservatorship agency request a transfer of conservatorship to another corporate entity, etc.)</td>
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<td>C.44.</td>
<td>Please provide a narrative that illustrates Respondent’s understanding of supported decision-making and how it impacts conservatorships.</td>
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<tr>
<td>C.45.</td>
<td>Please provide a narrative that illustrates how Respondent would handle a conservator representative indicating that he/she does not feel that a person supported is really in need of a conservator. Please describe what steps Respondent would take.</td>
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<tr>
<td>C.46.</td>
<td>Please provide a narrative that illustrates how Respondent would handle a conservator representative indicating that the person supported wants his/her rights reinstated. Please describe what steps Respondent would take.</td>
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<tr>
<td>C.47.</td>
<td>Please provide a narrative that illustrates how Respondent would handle when a conservator representative feels that a service is needed, but DIDD does not approve it on the cost plan. Please</td>
<td></td>
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<td></td>
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</tbody>
</table>
### Section C— Technical Qualifications, Experience & Approach Items

<table>
<thead>
<tr>
<th>Response Page # (Respondent completes)</th>
<th>Item Ref.</th>
<th>Section C— Technical Qualifications, Experience &amp; Approach Items</th>
<th>Item Score</th>
<th>Evaluation Factor</th>
<th>Raw Weighted Score</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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<td>describe what steps Respondent would take. (i.e., appeal, find alternative source from perhaps a local agency, combine services, etc.)</td>
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<tr>
<td>C.48.</td>
<td></td>
<td>Please provide a narrative that illustrates, under what circumstances, if any, Respondent or the conservator representative would contact DIDD Office of General Counsel. Please describe what steps would likely be taken before contacting DIDD Office of General Counsel.</td>
<td>3</td>
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<td>C.49.</td>
<td></td>
<td>Provide a narrative that illustrates the Respondent’s position regarding interaction of the person supported with family or friends. Please include how the conservator representatives are trained to handle relationships that may not be healthy between the person supported and family and friends.</td>
<td>4</td>
<td></td>
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<tr>
<td>C.50.</td>
<td></td>
<td>Provide a narrative that illustrates what factors would be considered before a person supported is moved to another residence. (i.e., location of residence; proximity to family, friends, church; services available in the new area; remaining term of lease; etc.)</td>
<td>4</td>
<td></td>
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<tr>
<td>C.51.</td>
<td></td>
<td>Explain how Respondent will take every reasonable effort to ensure the person maintains eligibility in any state or federal program that the person is currently enrolled in.</td>
<td>5</td>
<td></td>
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<tr>
<td>C.52.</td>
<td></td>
<td>Detail what policies are in place to ensure that the conservator representative searches and applies for any state or federal program the ward may be eligible for.</td>
<td>5</td>
<td></td>
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</tbody>
</table>

The Solicitation Coordinator will use this sum and the formula below to calculate the section score. All calculations will use and result in numbers rounded to two (2) places to the right of the decimal point.

Total Raw Weighted Score: (sum of Raw Weighted Scores above)

\[
\text{Total Raw Weighted Score} \times \frac{\text{Maximum Possible Raw Weighted Score}}{\text{(i.e., 5 x the sum of item weights above)}} = \text{SCORE:}
\]

State Use – Evaluator Identification:

State Use – Solicitation Coordinator Signature, Printed Name & Date:
Cost Proposal & Evaluation Guide

For Qualified Respondents Only

Cost Proposals/Negotiations will only be requested of Qualified Respondents in the competitive range. This is a place holder for the document that will be issued to Qualified Respondents at that part of the procurement process.
STATEMENT OF CERTIFICATIONS AND ASSURANCES

An individual responding in his or her individual capacity or legally empowered to contractually bind the Respondent must complete and sign the Statement of Certifications and Assurances below as required, and this signed statement must be included with the response as required by the Request for Qualifications.

The Respondent does, hereby, expressly affirm, declare, confirm, certify, and assure ALL of the following:

1. The Respondent will comply with all of the provisions and requirements of the RFQ.
2. The Respondent will provide all specified goods or services as required by the contract awarded pursuant to this RFQ.
3. The Respondent accepts and agrees to all terms and conditions set out in the contract awarded pursuant to this RFQ.
4. The Respondent acknowledges and agrees that a contract resulting from the RFQ shall incorporate, by reference, all Response responses as a part of the contract.
5. The Respondent will comply, as applicable, with:
   (a) the laws of the State of Tennessee;
   (b) Title VI of the federal Civil Rights Act of 1964;
   (c) Title IX of the federal Education Amendments Act of 1972;
   (d) the Equal Employment Opportunity Act and the regulations issued there under by the federal government; and,
   (e) the Americans with Disabilities Act of 1990 and the regulations issued there under by the federal government.
6. To the best of the undersigned’s knowledge, information or belief, the information detailed within the Response to the RFQ is accurate.
7. The Response submitted to the RFQ was independently prepared, without collusion, and under penalty of perjury.
8. No amount shall be paid directly or indirectly to an employee or official of the State of Tennessee as wages, compensation, or gifts in exchange for acting as an officer, agent, employee, subcontractor, or consultant to the Respondent in connection with the request or any potential resulting contract.
9. The Response submitted in response to the RFQ shall remain valid for at least 120 days subsequent to the date of the Response opening and thereafter in accordance with any contract pursuant to the RFQ.
10. The Respondent affirms the following statement, as required by the Iran Divestment Act Tenn. Code Ann. § 12-12-111: “By submission of this bid, each bidder and each person signing on behalf of any bidder certifies, and in the case of a joint bid each party thereto certifies as to its own organization, under penalty of perjury, that to the best of its knowledge and belief that each bidder is not on the list created pursuant to § 12-12-106.” For reference purposes, the list is currently available online at: https://www.tn.gov/generalservices/procurement/central-procurement-office–cpo-library-/public-information-library.html.

By signature below, the signatory certifies legal authority to bind the responding entity to the provisions of this request and any contract awarded pursuant to it. The State may, at its sole discretion and at any time, require evidence documenting the signatory’s authority to be personally bound or to legally bind the responding entity.

DO NOT SIGN THIS DOCUMENT IF YOU ARE NOT LEGALLY AUTHORIZED TO DO SO BY THE ENTITY RESPONDING TO THIS RFQ.

SIGNATURE & DATE: __________________________________________

PRINTED NAME & TITLE: __________________________________________

LEGAL ENTITY NAME: __________________________________________
REFERENCE QUESTIONNAIRE

The standard reference questionnaire provided on the following pages of this attachment MUST be completed by all individuals offering a reference for the Respondent.

The Respondent will be responsible for obtaining completed reference questionnaires as required (refer to RFQ Attachment B, General Qualifications & Experience Items, Item B.17.), and for enclosing the sealed reference envelopes within the Respondent's Technical Proposal.
REFERENCE QUESTIONNAIRE

RFQ # 34401-99194 REFERENCE QUESTIONNAIRE

RESPONDENT NAME:  RESPONDENT NAME (completed by respondent before reference is requested)

The “respondent name” specified above, intends to submit a response to the State of Tennessee in response to the Request for Qualifications (RFQ) indicated. As a part of such response, the respondent must include a number of completed and sealed reference questionnaires (using this form).

Each individual responding to this reference questionnaire is asked to follow these instructions:

- complete this questionnaire (either using the form provided or an exact duplicate of this document);
- sign and date the completed questionnaire;
- seal the completed, signed, and dated questionnaire in a new standard #10 envelope;
- sign in ink across the sealed portion of the envelope; and
- return the sealed envelope containing the completed questionnaire directly to the respondent.

(1) What is the name of the individual, company, organization, or entity responding to this reference questionnaire?

(2) Please provide the following information about the individual completing this reference questionnaire on behalf of the above-named individual, company, organization, or entity.

| NAME: | 
| TITLE: |
| TELEPHONE #: |
| E-MAIL ADDRESS: |

(3) What goods or services do/did the vendor provide to your company or organization?

(4) What is the level of your overall satisfaction with the vendor of the goods or services described above?

Please respond by circling the appropriate number on the scale below.

1 2 3 4 5  
least satisfied most satisfied
If you circled 3 or less above, what could the vendor have done to improve that rating?

(5) If the goods or services that the vendor provided to your company or organization are completed, were the goods or services completed in compliance with the terms of the contract, on time, and within budget? If not, please explain.

(6) If the vendor is still providing goods or services to your company or organization, are these goods or services being provided in compliance with the terms of the contract, on time, and within budget? If not, please explain.

(7) How satisfied are you with the vendor’s ability to perform based on your expectations and according to the contractual arrangements?

(8) In what areas of goods or service delivery do/did the vendor excel?

(9) In what areas of goods or service delivery do/did the vendor fall short?

(10) What is the level of your satisfaction with the vendor’s project management structures, processes, and personnel?

Please respond by circling the appropriate number on the scale below.

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<tr>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
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<tbody>
<tr>
<td>least satisfied</td>
<td></td>
<td></td>
<td></td>
<td>most satisfied</td>
</tr>
</tbody>
</table>

What, if any, comments do you have regarding the score selected above?
(11) Considering the staff assigned by the vendor to deliver the goods or services described in response to question 3 above, how satisfied are you with the technical abilities, professionalism, and interpersonal skills of the individuals assigned?

Please respond by circling the appropriate number on the scale below.

1 2 3 4 5

least satisfied most satisfied

What, if any, comments do you have regarding the score selected above?

(12) Would you contract again with the vendor for the same or similar goods or services?

Please respond by circling the appropriate number on the scale below.

1 2 3 4 5

least satisfied most satisfied

What, if any, comments do you have regarding the score selected above?

REFERENCE SIGNATURE:
(by the individual completing this request for reference information)

(date must be the same as the signature across the envelope seal)

DATE:
RFQ # 34401-99194 PRO FORMA CONTRACT

The *pro forma* contract detailed in following pages of this exhibit contains some "blanks" (signified by descriptions in capital letters) that will be completed with appropriate information in the final contract resulting from the RFQ.
CONTRACT
BETWEEN THE STATE OF TENNESSEE,
DEPARTMENT OF INTELLECTUAL AND DEVELOPMENTAL DISABILITIES
AND
___________________

This Contract, by and between the State of Tennessee, Department of Intellectual and Developmental Disabilities (“State”) and ___________________ (“Contractor”), is for the provision of conservatorship/guardianship services, as further defined in the "SCOPE." State and Contractor may be referred to individually as a "Party" or collectively as the "Parties" to this Contract.

The Contractor is a XXX-Profit Corporation.
Contractor Place of Incorporation or Organization: Location
Contractor Edison Registration ID # XXXXXX

A. SCOPE:

A.1. The Contractor shall provide all goods or services and deliverables as required, described, and detailed below and shall meet all service and delivery timelines as specified by this Contract.

A.2. General Obligations of the Contractor. The Contractor shall provide conservatorship/guardianship services for individuals served by the Department of Intellectual and Developmental Disabilities (DIDD) that have been established by court orders.

A.3. Specific Obligations of the Contractor:

a. Service as a Fiduciary. The Contractor shall from time to time and as directed by the State and duly appointed by a court of appropriate jurisdiction, serve in the capacity of a Conservator/Guardian for the named person with a disability under authority of such court and carry out its fiduciary obligations as directed by the court.

(1) Contractors shall be recommended to State courts based upon:

   i. the choice of the individuals served by DIDD; or
   ii. the choice of the involved DIDD Regional Office; or
   iii. any interested party of the individual, or
   iv. upon any special requirements of the individual served; and, whenever feasible, or
   v. the location of an available conservator in relation to the location of the individual served.

(2) If more than one available conservator is available based on location, the selection may be based on the cost of the service.

b. Other Duties. The Contractor shall, in addition, have the following duties:

(1) Exercise with due diligence the powers specifically removed from the person with a disability and vested in the Conservator/Guardian by the appointing court, while recognizing that any right not specifically removed through court order remains a right of the person, including but not limited to the right to association and the right to work. Prepare for and attend any court proceedings or hearings when its presence is ordered by the court or is otherwise necessary to support the person with a disability.

(2) The Conservator/Guardian shall exercise powers in accordance with person-centered principles including but not limited to:
i. Completing a person-centered training designated by the State
ii. Treating the person with dignity and respect;
iii. Giving due consideration to current and previously stated personal desires, medical treatment preferences, religious beliefs, and other preferences and opinions in decisions made by conservator/guardian;
iv. Providing or arranging for comfort, social and recreational needs, training, education, habilitation, and rehabilitation care and services, within available resources in accordance with the wishes of the person;
v. Ensuring personal privacy;
vi. Considering the wishes and preferences of the person in living arrangements;
vii. Ensuring legal rights are upheld;
viii. Coordinating with entities, such as Ombudsman, to resolve issues in a manner that preserves dignity and respect and considers the wishes of the person;
ix. For decisions outside the scope of the conservator’s responsibilities, recognizing the role of natural supports or decision-making supports.

(3) Ensure that the disabled person's best interests are being served in the areas for which the conservator/guardian is responsible as defined by the appointing court order and that no conflicts of interests exist between it and the person with a disability.

(4) Such other, additional duties as ordered by the court during the course of the conservatorship/guardianship.

(5) When appropriate, timely prepare and file any reports and/or accountings as listed in Title 34 of the Tennessee Code Annotated and/or as so ordered by the court.

(6) Meet standards for quality of services as identified in the Medicaid Standards for Intermediate Care Facilities for Persons with Intellectual Disabilities.

(7) Meet the standards as identified by the DIDD.

(8) Comply with any court orders or instructions issued for the person with a disability.

(9) The Contractor agrees for any person it is serving to attend meetings and appointments including, but not limited to, those listed below to represent the current or previously stated wishes of the person:

   i. Individual Support Planning meetings,
   ii. Circle of Support meetings,
   iii. Transition meetings,
   iv. Psychopharmacology clinics,
   v. Quality of Life meetings,
   vi. Team Building meetings,
   vii. Agency meetings,
   viii. Meetings with providers, as applicable, that are planned in consultation with the Contractor or regularly scheduled, and
   ix. Court proceedings/hearings.

A.4. Qualifications of the Contractor: The Contractor, in the position of conservator/guardian, agrees to and meets the following conditions:
a. Be reasonably available for mail, telephone and personal contact. Furthermore, be familiar with and considerate of the support needs and wishes of each person for whom conservator/guardianship is being requested. When at all possible or practical, the Contractor should consult with and discuss decisions with the person for whom the decision is being made.

b. During emergencies and, upon timely notice, attend Circle of Support meetings, as well as any other meetings, judicial proceedings, and conferences or discussions necessary to plan, assess, review or implement actions intended for the well-being of the person with a disability for whom conservatorship/guardianship has been granted.

c. Accept compensation under the contracts as payment in full for each incident of limited conservator/guardianship services and waive any claim upon the income or estate of the individual with a disability.

d. Provide proof of adequate bond or surety as required by the appointing court.

e. Work in concert with and support of the disabled person’s Individual Support Plan, as well as the DIDD.

f. Assist the Circle of Support/Support Team, therapists and other professionals in determining the needs of the person with a disability.

g. Be able to provide regularly scheduled and and/or periodic contact with the person with a disability and maintain documentation of contact or attempts to make contact.

h. Have a working knowledge and understanding of the conservatorship/guardianship laws and regulations in the state of Tennessee.

i. Have a working knowledge and understanding of the DIDD Provider Manual, including available services and rights of individuals with disabilities.

j. Have adequate resources to retain an attorney and/or representation to provide legal services on behalf of or in the interest of the person with a disability covered under this contract.

k. Have an accounting or financial system established that would properly maintain and/or manage any funds or assets for which the conservator/guardian becomes responsible on behalf of the person with a disability.

l. Acquire and maintain suitable skills and training to properly execute its fiduciary duties under the law and in accordance with this contract.

A.5. Other Requirements. The Contractor warrants that its staff, representatives and volunteers who operate under this contract and provide direct service to the person with a disability will have annual training and are knowledgeable about:

a. Applicable Tennessee conservator/guardianship laws, rules, regulations and guidelines, including but not limited to, those established by the DIDD.

b. Resources for people with disabilities and where to go for more information in support of meeting their requirements.

c. The support needs and wishes of each person receiving conservator/guardianship services.
d. The Contractor must provide DIDD with a copy of the training materials provided to staff, representatives, and volunteers, and DIDD must approve or provide feedback regarding the elected training program. At any point, DIDD maintains the authority to provide additional documentation to be incorporated into the training, as it deems necessary and appropriate. Proof of annual training must be maintained and made available, upon request, to DIDD, a guardian ad litem, and attorney ad litem, or court.

A.6. Minimum Standards. Conservators/Guardians or their representatives providing services to a person with a disability must meet the following minimum standards:

a. Must be at least 21 years of age.

b. Must be a high school graduate or possess the GED equivalent.

c. Must have one year of relevant work experience related to conservatorship or guardianship or one of the following:

   (1) A degree in a field related to conservatorship/guardianship; or
   (2) Completion of a course curriculum or training specifically related to conservatorship/guardianship and approved by the DIDD; or
   (3) One year of relevant ID/DD experience.

d. Must not have been convicted or plead nolo contendre to a felony or misdemeanor involving financial or physical harm to a person, and also including but not limited to: misappropriation of funds, fraud, breach of fiduciary duty, neglect, child abuse, assault, an act involving violence, physical harm to an individual, or sexual misconduct.

e. Must attest that he or she has not been administratively or civilly liable in an action that involved fraud, abuse, neglect, misrepresentation, material omission, misappropriation or exploitation, moral turpitude, theft, or conversion, assault, an act involving violence or physical harm to an individual, or sexual misconduct.

f. Must attest that he or she has not been removed, substituted for or relieved of responsibilities as a conservator/guardian by a court, employer, or client for actions involving fraud, abuse, neglect, moral turpitude, misrepresentation, material omission, misfeasance, misappropriation or exploitation, theft or conversion, breach of fiduciary duty, assault, an act involving violence or physical harm to an individual, or sexual misconduct.

g. Must attest that an insurance or bond agent has not found him or her liable in a subrogation action for any of the reasons found in section A.6.(f).

h. Must not be related by blood or marriage to the person with a disability for whom he or she will serve as conservator/guardian unless specifically approved by the appointing court.

i. Must be of reputable and responsible character as defined in TCA 33-2-402(7). The Conservator/Guardian can be trusted with responsibility for persons who are particularly vulnerable to abuse, neglect, and financial or sexual exploitation.

A.7. Back up and Contingency System. The Contractor or its representative will have an emergency back-up system so that they may be reached 24 hours per day or have a primary and secondary conservator/guardian assigned for each person receiving conservatorship/guardianship services.
The back-up or contingency system or conservator/guardian representative must be made known to the person and documented in his/her plan of care or Individual Support Plan, with contact information readily available in the event of an emergency.

A.8. **Conflict of Interest.** The Contractor and its representative will be free from any conflict of interest concerning the person with a disability.

A.9. **Assessments, Plans, and Reports.** As requested in writing by the State on an individual basis, the Contractor will complete assessments, have a written plan consistent with these assessments, complete such report(s) of its operations and functions and make these documents available to the State for review, duplication, and evaluation per its instruction.

A.10. **Licensed Attorney and Certification.** The Contractor shall assure that at least one conservator/guardian in the organization (which may include but is not limited to its governing board/authority) is a licensed attorney or is certified as a Registered Conservator/Guardian by the National Conservator/Guardianship Association.

A.11. **Replacement of the Conservator/Guardian.** The Contractor shall consider the views and suggestions of persons with a disability and their Circles of Support in selection or replacement of a conservator/guardian. If the person with a disability or his or her Circle of Support requests in writing that a conservator/guardian other than the Contractor and such conservator/guardian appear willing and appropriate to fulfill the duties of the appointment, the Contractor will not oppose a petition to change conservator/guardian. In all other instances, the Contractor shall report the request to the appointing Court and ask the Court to determine the appropriate conservator/guardian. The Contractor agrees that payment for conservatorship/guardianship services for the person supported will be discontinued upon court appointment of a conservator/guardian other than the Contractor.

A.12. **Annual Compensable Hours.** The Contractor agrees to provide, and the State will pay for, based upon the submission of appropriate documentation in one-quarter (¼) hour increments and requests, up to a maximum of the following:

   a. Twenty (20) hours of conservator/guardianship services during a 12-month period per client in a stable placement. (Clients Residing in a DIDD Developmental Center or DIDD Community Home)

   b. Thirty (30) hours of conservator/guardianship services during a 12-month period per client in transition to a community placement.

   c. Thirty (30) hours of conservator/guardianship services during a 12-month period per client with significant medical or behavioral problems.

   d. Additionally, the Contractor may retain an attorney and/or representation to provide legal services on behalf of and in the interest of the person with a disability covered under this Contract, provided further that the Contractor must present to the State all required supporting documentation to show such cost was incurred and paid in full by the Contractor.

   e. The time provided by the conservator/guardian as listed above may exceed these maximum hours entitled to compensation under this contract with the prior approval of the Commissioner of the State of Tennessee, Department of Intellectual and Developmental Disabilities or his/her designee.

A.13. **Warranty.** Contractor represents and warrants that the term of the warranty ("Warranty Period") shall be the greater of the Term of this Contract or any other warranty generally offered by Contractor, its suppliers, or manufacturers to customers of its goods or services. The goods or
services provided under this Contract shall conform to the terms and conditions of this Contract throughout the Warranty Period. Any nonconformance of the goods or services to the terms and conditions of this Contract shall constitute a "Defect" and shall be considered "Defective." If Contractor receives notice of a Defect during the Warranty Period, then Contractor shall correct the Defect, at no additional charge.

Contractor represents and warrants that the State is authorized to possess and use all equipment, materials, software, and deliverables provided under this Contract.

Contractor represents and warrants that all goods or services provided under this Contract shall be provided in a timely and professional manner, by qualified and skilled individuals, and in conformity with standards generally accepted in Contractor’s industry.

If Contractor fails to provide the goods or services as warranted, then Contractor will re-provide the goods or services at no additional charge. If Contractor is unable or unwilling to re-provide the goods or services as warranted, then the State shall be entitled to recover the fees paid to Contractor for the Defective goods or services. Any exercise of the State’s rights under this Section shall not prejudice the State’s rights to seek any other remedies available under this Contract or applicable law.

A.14. Inspection and Acceptance. The State shall have the right to inspect all goods or services provided by Contractor under this Contract. If, upon inspection, the State determines that the goods or services are Defective, the State shall notify Contractor, and Contractor shall re-deliver the goods or provide the services at no additional cost to the State. If after a period of thirty (30) days following delivery of goods or performance of services the State does not provide a notice of any Defects, the goods or services shall be deemed to have been accepted by the State.

B. TERM OF CONTRACT:

This Contract shall be effective on DATE (“Effective Date”) and extend for a period of sixty (60) months after the Effective Date (“Term”). The State shall have no obligation for goods or services provided by the Contractor prior to the Effective Date.

C. PAYMENT TERMS AND CONDITIONS:

C.1. Maximum Liability. In no event shall the maximum liability of the State under this Contract exceed Written Dollar Amount ($Number) (“Maximum Liability”). This Contract does not grant the Contractor any exclusive rights. The State does not guarantee that it will buy any minimum quantity of goods or services under this Contract. Subject to the terms and conditions of this Contract, the Contractor will only be paid for goods or services provided under this Contract after a purchase order is issued to Contractor by the State or as otherwise specified by this Contract.

C.2. Compensation Firm. The payment methodology in Section C.3. of this Contract shall constitute the entire compensation due the Contractor for all goods or services provided under this Contract regardless of the difficulty, materials or equipment required. The payment methodology includes all applicable taxes, fees, overhead, and all other direct and indirect costs incurred or to be incurred by the Contractor.

C.3. Payment Methodology. The Contractor shall be compensated based on the payment methodology for goods or services authorized by the State in a total amount as set forth in Section C.1.

a. The Contractor’s compensation shall be contingent upon the satisfactory provision of goods or services as set forth in Section A.
b. The Contractor shall be compensated based upon the following payment methodology:

<table>
<thead>
<tr>
<th>Goods or Services Description</th>
<th>Amount (per compensable increment)</th>
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<tbody>
<tr>
<td>Community Clients</td>
<td>$ Number per hour</td>
</tr>
</tbody>
</table>

C.4. **Travel Compensation.** The Contractor shall not be compensated or reimbursed for travel time, travel expenses, meals, or lodging.

C.5. **Invoice Requirements.** The Contractor shall invoice the State only for goods delivered and accepted by the State or services satisfactorily provided at the amounts stipulated in Section C.3., above. Contractor shall submit invoices and necessary supporting documentation, no more frequently than once a month, and no later than thirty (30) days after goods or services have been provided to the following address:

Fiscal Office  
Department of Intellectual and Developmental Disabilities  
UBS Building, 8th Floor  
315 Deaderick Street  
Nashville, TN 37243  
Telephone #  
DIDD.Invoicing@tn.gov

a. Each invoice, on Contractor’s letterhead, shall clearly and accurately detail all of the following information (calculations must be extended and totaled correctly):

1. Invoice number (assigned by the Contractor);
2. Invoice date;
3. Contract number (assigned by the State);
5. Customer account number (assigned by the Contractor to the above-referenced Customer);
6. Contractor name;
7. Contractor Tennessee Edison registration ID number;
8. Contractor contact for invoice questions (name, phone, or email);
9. Contractor remittance address;
10. Description of delivered goods or services provided and invoiced, including identifying information as applicable;
11. Number of delivered or completed units, increments, hours, or days as applicable, of each good or service invoiced;
12. Applicable payment methodology (as stipulated in Section C.3.) of each good or service invoiced;
13. Amount due for each compensable unit of good or service; and
14. Total amount due for the invoice period.

b. Contractor’s invoices shall:

1. Only include charges for goods delivered or services provided as described in Section A and in accordance with payment terms and conditions set forth in Section C;
2. Only be submitted for goods delivered or services completed and shall not include any charge for future goods to be delivered or services to be performed;
(3) Not include Contractor’s taxes, which includes without limitation Contractor’s sales and use tax, excise taxes, franchise taxes, real or personal property taxes, or income taxes; and

(4) Include shipping or delivery charges only as authorized in this Contract.

c. The timeframe for payment (or any discounts) begins only when the State is in receipt of an invoice that meets the minimum requirements of this Section C.5.

C.6. Payment of Invoice. A payment by the State shall not prejudice the State's right to object to or question any payment, invoice, or other matter. A payment by the State shall not be construed as acceptance of goods delivered, any part of the services provided, or as approval of any amount invoiced.

C.7. Invoice Reductions. The Contractor's invoice shall be subject to reduction for amounts included in any invoice or payment that is determined by the State, on the basis of audits conducted in accordance with the terms of this Contract, to not constitute proper compensation for goods delivered or services provided.

C.8. Deductions. The State reserves the right to deduct from amounts, which are or shall become due and payable to the Contractor under this or any contract between the Contractor and the State of Tennessee, any amounts that are or shall become due and payable to the State of Tennessee by the Contractor.

C.9. Prerequisite Documentation. The Contractor shall not invoice the State under this Contract until the State has received the following, properly completed documentation.

a. The Contractor shall complete, sign, and present to the State the "Authorization Agreement for Automatic Deposit Form" provided by the State. By doing so, the Contractor acknowledges and agrees that, once this form is received by the State, payments to the Contractor, under this or any other contract the Contractor has with the State of Tennessee, may be made by ACH; and

b. The Contractor shall complete, sign, and return to the State the State-provided W-9 form. The taxpayer identification number on the W-9 form must be the same as the Contractor's Federal Employer Identification Number or Social Security Number referenced in the Contractor's Edison registration information.

D. MANDATORY TERMS AND CONDITIONS:

D.1. Required Approvals. The State is not bound by this Contract until it is duly approved by the Parties and all appropriate State officials in accordance with applicable Tennessee laws and regulations. Depending upon the specifics of this Contract, this may include approvals by the Commissioner of Finance and Administration, the Commissioner of Human Resources, the Comptroller of the Treasury, and the Chief Procurement Officer. Approvals shall be evidenced by a signature or electronic approval.

D.2. Communications and Contacts. All instructions, notices, consents, demands, or other communications required or contemplated by this Contract shall be in writing and shall be made by certified, first class mail, return receipt requested and postage prepaid, by overnight courier service with an asset tracking system, or by email or facsimile transmission with recipient confirmation. All communications, regardless of method of transmission, shall be addressed to the respective Party at the appropriate mailing address, facsimile number, or email address as stated below or any other address provided in writing by a Party.

The State:
Richard Prybilla, Deputy General Counsel
Department of Intellectual and Developmental Disabilities
UBS, 8th Floor
315 Deaderick Street, Nashville, TN 37243
Richard.r.Prybilla@tn.gov
Telephone # 615-532-6526
FAX # 615-253-7996

The Contractor:

Contractor Contact Name & Title
Contractor Name
Address
Email Address
Telephone # Number
FAX # Number

All instructions, notices, consents, demands, or other communications shall be considered effective upon receipt or recipient confirmation as may be required.

D.3. Modification and Amendment. This Contract may be modified only by a written amendment signed by all Parties and approved by all applicable State officials.

D.4. Subject to Funds Availability. The Contract is subject to the appropriation and availability of State or federal funds. In the event that the funds are not appropriated or are otherwise unavailable, the State reserves the right to terminate this Contract upon written notice to the Contractor. The State’s exercise of its right to terminate this Contract shall not constitute a breach of Contract by the State. Upon receipt of the written notice, the Contractor shall cease all work associated with the Contract. If the State terminates this Contract due to lack of funds availability, the Contractor shall be entitled to compensation for all conforming goods requested and accepted by the State and for all satisfactory and authorized services completed as of the termination date. Should the State exercise its right to terminate this Contract due to unavailability of funds, the Contractor shall have no right to recover from the State any actual, general, special, incidental, consequential, or any other damages of any description or amount.

D.5. Termination for Convenience. The State may terminate this Contract for convenience without cause and for any reason. The State shall give the Contractor at least thirty (30) days written notice before the termination date. The Contractor shall be entitled to compensation for all conforming goods delivered and accepted by the State or for satisfactory, authorized services completed as of the termination date. In no event shall the State be liable to the Contractor for compensation for any goods neither requested nor accepted by the State or for any services neither requested by the State nor satisfactorily performed by the Contractor. In no event shall the State’s exercise of its right to terminate this Contract for convenience relieve the Contractor of any liability to the State for any damages or claims arising under this Contract.

D.6. Termination for Cause. If the Contractor fails to properly perform its obligations under this Contract in a timely or proper manner, or if the Contractor materially violates any terms of this Contract ("Breach Condition"), the State shall have the right to immediately terminate the Contract and withhold payments in excess of compensation for completed services or provided goods. Notwithstanding the above, the Contractor shall not be relieved of liability to the State for damages sustained by virtue of any Breach Condition and the State may seek other remedies allowed at law or in equity for breach of this Contract.

D.7. Assignment and Subcontracting. The Contractor shall not assign this Contract or enter into a subcontract for any of the goods or services provided under this Contract without the prior written approval of the State. Notwithstanding any use of the approved subcontractors, the Contractor
shall be the prime contractor and responsible for compliance with all terms and conditions of this Contract. The State reserves the right to request additional information or impose additional terms and conditions before approving an assignment of this Contract in whole or in part or the use of subcontractors in fulfilling the Contractor’s obligations under this Contract.

D.8. Conflicts of Interest. The Contractor warrants that no part of the Contractor’s compensation shall be paid directly or indirectly to an employee or official of the State of Tennessee as wages, compensation, or gifts in exchange for acting as an officer, agent, employee, subcontractor, or consultant to the Contractor in connection with any work contemplated or performed under this Contract.

The Contractor acknowledges, understands, and agrees that this Contract shall be null and void if the Contractor is, or within the past six (6) months has been, an employee of the State of Tennessee or if the Contractor is an entity in which a controlling interest is held by an individual who is, or within the past six (6) months has been, an employee of the State of Tennessee.

D.9. Nondiscrimination. The Contractor hereby agrees, warrants, and assures that no person shall be excluded from participation in, be denied benefits of, or be otherwise subjected to discrimination in the performance of this Contract or in the employment practices of the Contractor on the grounds of handicap or disability, age, race, creed, color, religion, sex, national origin, or any other classification protected by federal or state law. The Contractor shall, upon request, show proof of nondiscrimination and shall post in conspicuous places, available to all employees and applicants, notices of nondiscrimination.

D.10. Prohibition of Illegal Immigrants. The requirements of Tenn. Code Ann. § 12-3-309 addressing the use of illegal immigrants in the performance of any contract to supply goods or services to the state of Tennessee, shall be a material provision of this Contract, a breach of which shall be grounds for monetary and other penalties, up to and including termination of this Contract.

a. The Contractor agrees that the Contractor shall not knowingly utilize the services of an illegal immigrant in the performance of this Contract and shall not knowingly utilize the services of any subcontractor who will utilize the services of an illegal immigrant in the performance of this Contract. The Contractor shall reaffirm this attestation, in writing, by submitting to the State a completed and signed copy of the document at Attachment One, semi-annually during the Term. If the Contractor is a party to more than one contract with the State, the Contractor may submit one attestation that applies to all contracts with the State. All Contractor attestations shall be maintained by the Contractor and made available to State officials upon request.

b. Prior to the use of any subcontractor in the performance of this Contract, and semi-annually thereafter, during the Term, the Contractor shall obtain and retain a current, written attestation that the subcontractor shall not knowingly utilize the services of an illegal immigrant to perform work under this Contract and shall not knowingly utilize the services of any subcontractor who will utilize the services of an illegal immigrant to perform work under this Contract. Attestations obtained from subcontractors shall be maintained by the Contractor and made available to State officials upon request.

c. The Contractor shall maintain records for all personnel used in the performance of this Contract. Contractor’s records shall be subject to review and random inspection at any reasonable time upon reasonable notice by the State.

d. The Contractor understands and agrees that failure to comply with this section will be subject to the sanctions of Tenn. Code Ann. § 12-3-309 for acts or omissions occurring after its effective date.
e. For purposes of this Contract, "illegal immigrant" shall be defined as any person who is not: (i) a United States citizen; (ii) a Lawful Permanent Resident; (iii) a person whose physical presence in the United States is authorized; (iv) allowed by the federal Department of Homeland Security and who, under federal immigration laws or regulations, is authorized to be employed in the U.S.; or (v) is otherwise authorized to provide services under the Contract.

D.11. Records. The Contractor shall maintain documentation for all charges under this Contract. The books, records, and documents of the Contractor, for work performed or money received under this Contract, shall be maintained for a period of five (5) full years from the date of the final payment and shall be subject to audit at any reasonable time and upon reasonable notice by the State, the Comptroller of the Treasury, or their duly appointed representatives. The financial statements shall be prepared in accordance with generally accepted accounting principles.

D.12. Monitoring. The Contractor’s activities conducted and records maintained pursuant to this Contract shall be subject to monitoring and evaluation by the State, the Comptroller of the Treasury, or their duly appointed representatives.

D.13. Progress Reports. The Contractor shall submit brief, periodic, progress reports to the State as requested.

D.14. Strict Performance. Failure by any Party to this Contract to require, in any one or more cases, the strict performance of any of the terms, covenants, conditions, or provisions of this Contract shall not be construed as a waiver or relinquishment of any term, covenant, condition, or provision. No term or condition of this Contract shall be held to be waived, modified, or deleted except by a written amendment signed by the Parties.

D.15. Independent Contractor. The Parties shall not act as employees, partners, joint venturers, or associates of one another. The Parties are independent contracting entities. Nothing in this Contract shall be construed to create an employer/employee relationship or to allow either Party to exercise control or direction over the manner or method by which the other transacts its business affairs or provides its usual services. The employees or agents of one Party are not employees or agents of the other Party.

D.16. Patient Protection and Affordable Care Act. The Contractor agrees that it will be responsible for compliance with the Patient Protection and Affordable Care Act ("PPACA") with respect to itself and its employees, including any obligation to report health insurance coverage, provide health insurance coverage, or pay any financial assessment, tax, or penalty for not providing health insurance. The Contractor shall indemnify the State and hold it harmless from any costs to the State arising from Contractor’s failure to fulfill its PPACA responsibilities for itself or its employees.

D.17. Limitation of State’s Liability. The State shall have no liability except as specifically provided in this Contract. In no event will the State be liable to the Contractor or any other party for any lost revenues, lost profits, loss of business, decrease in the value of any securities or cash position, time, goodwill, or any indirect, special, incidental, punitive, exemplary or consequential damages of any nature, whether based on warranty, contract, statute, regulation, tort (including but not limited to negligence), or any other legal theory that may arise under this Contract or otherwise. The State’s total liability under this Contract (including any exhibits, schedules, amendments or other attachments to the Contract) or otherwise shall under no circumstances exceed the Maximum Liability. This limitation of liability is cumulative and not per incident.

D.18. Limitation of Contractor’s Liability. In accordance with Tenn. Code Ann. § 12-3-701, the Contractor’s liability for all claims arising under this Contract shall be limited to an amount equal to two (2) times the Maximum Liability amount detailed in Section C.1. and as may be amended, PROVIDED THAT in no event shall this Section limit the liability of the Contractor for: (i)
intellectual property or any Contractor indemnity obligations for infringement for third-party intellectual property rights; (ii) any claims covered by any specific provision in the Contract providing for liquidated damages; or (iii) any claims for intentional torts, criminal acts, fraudulent conduct, or acts or omissions that result in personal injuries or death. For clarity, except as otherwise expressly set forth in this Section, Contractor’s indemnification obligations and other remedies available under this Contract are subject to the limitations on liability set forth in this Section.

D.19. **Hold Harmless.** The Contractor agrees to indemnify and hold harmless the State of Tennessee as well as its officers, agents, and employees from and against any and all claims, liabilities, losses, and causes of action which may arise, accrue, or result to any person, firm, corporation, or other entity which may be injured or damaged as a result of acts, omissions, or negligence on the part of the Contractor, its employees, or any person acting for or on its or their behalf relating to this Contract. The Contractor further agrees it shall be liable for the reasonable cost of attorneys’ fees, court costs, expert witness fees, and other litigation expenses for the State to enforce the terms of this Contract.

In the event of any suit or claim, the Parties shall give each other immediate notice and provide all necessary assistance to respond. The failure of the State to give notice shall only relieve the Contractor of its obligations under this Section to the extent that the Contractor can demonstrate actual prejudice arising from the failure to give notice. This Section shall not grant the Contractor, through its attorneys, the right to represent the State in any legal matter, as the right to represent the State is governed by Tenn. Code Ann. § 8-6-106.

D.20. **HIPAA Compliance.** The State and Contractor shall comply with obligations under the Health Insurance Portability and Accountability Act of 1996 ("HIPAA"), Health Information Technology for Economic and Clinical Health ("HITECH") Act and any other relevant laws and regulations regarding privacy (collectively the “Privacy Rules”). The obligations set forth in this Section shall survive the termination of this Contract.

a. Contractor warrants to the State that it is familiar with the requirements of the Privacy Rules, and will comply with all applicable requirements in the course of this Contract.

b. Contractor warrants that it will cooperate with the State, including cooperation and coordination with State privacy officials and other compliance officers required by the Privacy Rules, in the course of performance of the Contract so that both parties will be in compliance with the Privacy Rules.

c. The State and the Contractor will sign documents, including but not limited to business associate agreements, as required by the Privacy Rules and that are reasonably necessary to keep the State and Contractor in compliance with the Privacy Rules. This provision shall not apply if information received or delivered by the parties under this Contract is NOT “protected health information” as defined by the Privacy Rules, or if the Privacy Rules permit the parties to receive or deliver the information without entering into a business associate agreement or signing another document.

d. The Contractor will indemnify the State and hold it harmless for any violation by the Contractor or its subcontractors of the Privacy Rules. This includes the costs of responding to a breach of protected health information, the costs of responding to a government enforcement action related to the breach, and any fines, penalties, or damages paid by the State because of the violation.

D.21. **Tennessee Consolidated Retirement System.** Subject to statutory exceptions contained in Tenn. Code Ann. §§ 8-36-801, et seq., the law governing the Tennessee Consolidated Retirement System ("TCRS"), provides that if a retired member of TCRS, or of any superseded system
administered by TCRS, or of any local retirement fund established under Tenn. Code Ann. §§ 8-35-101, et seq., accepts State employment, the member’s retirement allowance is suspended during the period of the employment. Accordingly and notwithstanding any provision of this Contract to the contrary, the Contractor agrees that if it is later determined that the true nature of the working relationship between the Contractor and the State under this Contract is that of “employee/employer” and not that of an independent contractor, the Contractor, if a retired member of TCRS, may be required to repay to TCRS the amount of retirement benefits the Contractor received from TCRS during the Term.

D.22. Tennessee Department of Revenue Registration. The Contractor shall comply with all applicable registration requirements contained in Tenn. Code Ann. §§ 67-6-601 – 608. Compliance with applicable registration requirements is a material requirement of this Contract.

D.23. Debarment and Suspension. The Contractor certifies, to the best of its knowledge and belief, that it, its current and future principals, its current and future subcontractors and their principals:

a. are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions by any federal or state department or agency;

b. have not within a three (3) year period preceding this Contract been convicted of, or had a civil judgment rendered against them from commission of fraud, or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (federal, state, or local) transaction or grant under a public transaction; violation of federal or state antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification, or destruction of records, making false statements, or receiving stolen property;

c. are not presently indicted or otherwise criminally or civilly charged by a government entity (federal, state, or local) with commission of any of the offenses detailed in section b. of this certification; and

d. have not within a three (3) year period preceding this Contract had one or more public transactions (federal, state, or local) terminated for cause or default.

The Contractor shall provide immediate written notice to the State if at any time it learns that there was an earlier failure to disclose information or that due to changed circumstances, its principals or the principals of its subcontractors are excluded, disqualified, or presently fall under any of the prohibitions of sections a-d.

D.24. Force Majeure. “Force Majeure Event” means fire, flood, earthquake, elements of nature or acts of God, wars, riots, civil disorders, rebellions or revolutions, acts of terrorism or any other similar cause beyond the reasonable control of the Party except to the extent that the non-performing Party is at fault in failing to prevent or causing the default or delay, and provided that the default or delay cannot reasonably be circumvented by the non-performing Party through the use of alternate sources, workaround plans or other means. A strike, lockout or labor dispute shall not excuse either Party from its obligations under this Contract. Except as set forth in this Section, any failure or delay by a Party in the performance of its obligations under this Contract arising from a Force Majeure Event is not a default under this Contract or grounds for termination. The non-performing Party will be excused from performing those obligations directly affected by the Force Majeure Event, and only for as long as the Force Majeure Event continues, provided that the Party continues to use diligent, good faith efforts to resume performance without delay. The occurrence of a Force Majeure Event affecting Contractor’s representatives, suppliers, subcontractors, customers or business apart from this Contract is not a Force Majeure Event under this Contract. Contractor will promptly notify the State of any delay caused by a Force Majeure Event (to be confirmed in a written notice to the State within one (1) day of the inception of the delay) that a Force Majeure Event has occurred, and will describe in reasonable detail the
nature of the Force Majeure Event. If any Force Majeure Event results in a delay in Contractor’s performance longer than forty-eight (48) hours, the State may, upon notice to Contractor: (a) cease payment of the fees for the affected obligations until Contractor resumes performance of the affected obligations; or (b) immediately terminate this Contract or any purchase order, in whole or in part, without further payment except for fees then due and payable. Contractor will not increase its charges under this Contract or charge the State any fees other than those provided for in this Contract as the result of a Force Majeure Event.

D.25. State and Federal Compliance. The Contractor shall comply with all State and federal laws and regulations applicable to Contractor in the Contractor’s performance of this Contract.

D.26. Governing Law. This Contract shall be governed by and construed in accordance with the laws of the State of Tennessee, without regard to its conflict or choice of law rules. The Tennessee Claims Commission or the state or federal courts in Tennessee shall be the venue for all claims, disputes, or disagreements arising under this Contract. The Contractor acknowledges and agrees that any rights, claims, or remedies against the State of Tennessee or its employees arising under this Contract shall be subject to and limited to those rights and remedies available under Tenn. Code Ann. §§ 9-8-101 - 408.

D.27. Entire Agreement. This Contract is complete and contains the entire understanding between the Parties relating to its subject matter, including all the terms and conditions of the Parties’ agreement. This Contract supersedes any and all prior understandings, representations, negotiations, and agreements between the Parties, whether written or oral.

D.28. Severability. If any terms and conditions of this Contract are held to be invalid or unenforceable as a matter of law, the other terms and conditions of this Contract shall not be affected and shall remain in full force and effect. The terms and conditions of this Contract are severable.

D.29. Headings. Section headings of this Contract are for reference purposes only and shall not be construed as part of this Contract.

D.30. Incorporation of Additional Documents. Each of the following documents is included as a part of this Contract by reference. In the event of a discrepancy or ambiguity regarding the Contractor’s duties, responsibilities, and performance under this Contract, these items shall govern in order of precedence below:

a. any amendment to this Contract, with the latter in time controlling over any earlier amendments;

b. this Contract with any attachments or exhibits (excluding the items listed at subsections c. through f., below), which includes Attachments One and Two.

c. any clarifications of or addenda to the Contractor’s proposal seeking this Contract; 

d. the State solicitation, as may be amended, requesting responses in competition for this Contract; 

e. any technical specifications provided to proposers during the procurement process to award this Contract; and

f. the Contractor’s response seeking this Contract.

D.31. Iran Divestment Act. The requirements of Tenn. Code Ann. § 12-12-101, et seq., addressing contracting with persons as defined at Tenn. Code Ann. §12-12-103(5) that engage in investment activities in Iran, shall be a material provision of this Contract. The Contractor certifies, under penalty of perjury, that to the best of its knowledge and belief that it is not on the list created pursuant to Tenn. Code Ann. § 12-12-106.

D.32. Insurance. Contractor shall maintain insurance coverage as specified in this Section. The State reserves the right to amend or require additional insurance coverage, coverage amounts, and endorsements required under this Contract. Contractor’s failure to maintain or submit evidence of
insurance coverage, as required, is a material breach of this Contract. If Contractor loses insurance coverage, fails to renew coverage, or for any reason becomes uninsured during the Term, Contractor shall immediately notify the State. All insurance companies providing coverage must be: (a) acceptable to the State; (b) authorized by the Tennessee Department of Commerce and Insurance ("TDCI"); and (c) rated A-/VII or better by A.M. Best. All coverage must be on a primary basis and noncontributory with any other insurance or self-insurance carried by the State. Contractor agrees to name the State as an additional insured on any insurance policy with the exception of workers’ compensation (employer liability) and professional liability (errors and omissions) insurance. All policies must contain an endorsement for a waiver of subrogation in favor of the State. Any deductible or self insured retention ("SIR") over fifty thousand dollars ($50,000) must be approved by the State. The deductible or SIR and any premiums are the Contractor’s sole responsibility. The Contractor agrees that the insurance requirements specified in this Section do not reduce any liability the Contractor has assumed under this Contract including any indemnification or hold harmless requirements.

To achieve the required coverage amounts, a combination of an otherwise deficient specific policy and an umbrella policy with an aggregate meeting or exceeding the required coverage amounts is acceptable. For example: If the required policy limit under this Contract is for two million dollars ($2,000,000) in coverage, acceptable coverage would include a specific policy covering one million dollars ($1,000,000) combined with an umbrella policy for an additional one million dollars ($1,000,000). If the deficient underlying policy is for a coverage area without aggregate limits (generally Automobile Liability and Employers’ Liability Accident), Contractor shall provide a copy of the umbrella insurance policy documents to ensure that no aggregate limit applies to the umbrella policy for that coverage area. In the event that an umbrella policy is being provided to achieve any required coverage amounts, the umbrella policy shall be accompanied by an endorsement at least as broad as the Insurance Services Office, Inc. (also known as “ISO”) “Noncontributory—Other Insurance Condition” endorsement or shall be written on a policy form that addresses both the primary and noncontributory basis of the umbrella policy if the State is otherwise named as an additional insured.

Contractor shall provide the State a certificate of insurance ("COI") evidencing the coverages and amounts specified in this Section. The COI must be on a form approved by the TDCI (standard ACORD form preferred). The COI must list each insurer’s National Association of Insurance Commissioners (NAIC) number and be signed by an authorized representative of the insurer. The COI must list the State of Tennessee – CPO Risk Manager, 312 Rosa L. Parks Ave., 3rd floor Central Procurement Office, Nashville, TN 37243 as the certificate holder. Contractor shall provide the COI ten (10) business days prior to the Effective Date and again thirty (30) calendar days before renewal or replacement of coverage. Contractor shall provide the State evidence that all subcontractors maintain the required insurance or that subcontractors are included under the Contractor’s policy. At any time, the State may require Contractor to provide a valid COI. The Parties agree that failure to provide evidence of insurance coverage as required is a material breach of this Contract. If Contractor self-insures, then a COI will not be required to prove coverage. Instead Contractor shall provide a certificate of self-insurance or a letter, on Contractor’s letterhead, detailing its coverage, policy amounts, and proof of funds to reasonably cover such expenses. The State reserves the right to require complete, certified copies of all required insurance policies, including endorsements required by these specifications, at any time.

The State agrees that it shall give written notice to the Contractor as soon as practicable after the State becomes aware of any claim asserted or made against the State, but in no event later than thirty (30) calendar days after the State becomes aware of such claim. The failure of the State to give notice shall only relieve the Contractor of its obligations under this Section to the extent that the Contractor can demonstrate actual prejudice arising from the failure to give notice. This Section shall not grant the Contractor or its insurer, through its attorneys, the right to represent the State in any legal matter, as the right to represent the State is governed by Tenn. Code Ann. § 8-6-106.
The insurance obligations under this Contract shall be: (1)—all the insurance coverage and policy limits carried by the Contractor; or (2)—the minimum insurance coverage requirements and policy limits shown in this Contract; whichever is greater. Any insurance proceeds in excess of or broader than the minimum required coverage and minimum required policy limits, which are applicable to a given loss, shall be available to the State. No representation is made that the minimum insurance requirements of the Contract are sufficient to cover the obligations of the Contractor arising under this Contract. The Contractor shall obtain and maintain, at a minimum, the following insurance coverages and policy limits.

a. Commercial General Liability (“CGL”) Insurance

1) The Contractor shall maintain CGL, which shall be written on an ISO Form CG 00 01 occurrence form (or a substitute form providing equivalent coverage) and shall cover liability arising from property damage, premises and operations products and completed operations, bodily injury, personal and advertising injury, and liability assumed under an insured contract (including the tort liability of another assumed in a business contract). The Contractor shall maintain single limits not less than one million dollars ($1,000,000) per occurrence. If a general aggregate limit applies, either the general aggregate limit shall apply separately to this policy or location of occurrence or the general aggregate limit shall be twice the required occurrence limit.

b. Workers’ Compensation and Employer Liability Insurance

1) For Contractors statutorily required to carry workers’ compensation and employer liability insurance, the Contractor shall maintain:

   i. Workers’ compensation in an amount not less than one million dollars ($1,000,000) including employer liability of one million dollars ($1,000,000) per accident for bodily injury by accident, one million dollars ($1,000,000) policy limit by disease, and one million dollars ($1,000,000) per employee for bodily injury by disease.

2) If the Contractor certifies that it is exempt from the requirements of Tenn. Code Ann. §§ 50-6-101 – 103, then the Contractor shall furnish written proof of such exemption for one or more of the following reasons:

   i. The Contractor employs fewer than five (5) employees;

   ii. The Contractor is a sole proprietor;

   iii. The Contractor is in the construction business or trades with no employees;

   iv. The Contractor is in the coal mining industry with no employees;

   v. The Contractor is a state or local government; or


c. Automobile Liability Insurance
1) The Contractor shall maintain automobile liability insurance which shall cover liability arising out of any automobile (including owned, leased, hired, and non-owned automobiles).

2) The Contractor shall maintain bodily injury/property damage with a limit not less than one million dollars ($1,000,000) per occurrence or combined single limit.

d. Professional Liability Insurance

i. Professional liability insurance shall be written on an occurrence basis or on a claims-made basis. If this coverage is written on a claims-made basis, then:

1. The retroactive date must be shown, and must be on or before the earlier of the Effective Date of the Contract or the beginning of Contract work or provision of goods and services;

2. Insurance must be maintained and evidence of insurance must be provided for at least five (5) full years from the date of the final Contract payment; and

3. If coverage is canceled or non-renewed, and not replaced with another claims-made policy form with a retroactive date on or prior to the Contract Effective Date, the Contractor must purchase “extended reporting” or “tail coverage” for a minimum of five (5) full years from the date of the final Contract payment.

ii. Any professional liability insurance policy shall have a limit not less than one million dollars ($1,000,000) per claim and two million dollars ($2,000,000) in the aggregate; and

iii. If the Contract involves the provision of services by medical professionals, a policy limit not less than three million ($3,000,000) per claim and three million dollars ($3,000,000) in the aggregate for medical malpractice insurance.

D.33. Major Procurement Contract Sales and Use Tax. Pursuant to Tenn. Code Ann. § 4-39-102 and to the extent applicable, the Contractor and the Contractor’s subcontractors shall remit sales and use taxes on the sales of goods or services that are made by the Contractor or the Contractor’s subcontractors and that are subject to tax.

D.34. Confidentiality of Records. Strict standards of confidentiality of records and information shall be maintained in accordance with applicable state and federal law. All material and information, regardless of form, medium or method of communication, provided to the Contractor by the State or acquired by the Contractor on behalf of the State that is regarded as confidential under state or federal law shall be regarded as “Confidential Information.” Nothing in this Section shall permit Contractor to disclose any Confidential Information, regardless of whether it has been disclosed or made available to the Contractor due to intentional or negligent actions or inactions of agents of the State or third parties. Confidential Information shall not be disclosed except as required or permitted under state or federal law. Contractor shall take all necessary steps to safeguard the confidentiality of such material or information in conformance with applicable state and federal law.

The obligations set forth in this Section shall survive the termination of this Contract.

E. SPECIAL TERMS AND CONDITIONS:
E.1. **Conflicting Terms and Conditions.** Should any of these special terms and conditions conflict with any other terms and conditions of this Contract, the special terms and conditions shall be subordinate to the Contract’s other terms and conditions.

E.2. **Prohibited Advertising or Marketing.** The Contractor shall not suggest or imply in advertising or marketing materials that Contractor's goods or services are endorsed by the State. The restrictions on Contractor advertising or marketing materials under this Section shall survive the termination of this Contract.

E.3. **Lobbying.** The Contractor certifies, to the best of its knowledge and belief, that:

a. No federally appropriated funds have been paid or will be paid, by or on behalf of the Contractor, to any person for influencing or attempting to influence an officer or employee of an agency, a member of Congress, an officer or employee of Congress, or an employee of a member of Congress in connection with the awarding of any federal contract, the making of any federal grant, the making of any federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any federal contract, grant, loan, or cooperative agreement.

b. If any funds other than federally appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a member of Congress, an officer or employee of Congress, or an employee of a member of Congress in connection with any contract, grant, loan, or cooperative agreement, the Contractor shall complete and submit Standard Form-LLL, “Disclosure Form to Report Lobbying,” in accordance with its instructions.

c. The Contractor shall require that the language of this certification be included in the award documents for all sub-awards at all tiers (including subcontracts, sub-grants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into and is a prerequisite for making or entering into this transaction imposed by 31 U.S.C. § 1352.

IN WITNESS WHEREOF,

CONTRACTOR LEGAL ENTITY NAME:

CONTRACTOR SIGNATURE DATE

PRINTED NAME AND TITLE OF CONTRACTOR SIGNATORY (above)
DEPARTMENT OF INTELLECTUAL AND DEVELOPMENTAL DISABILITIES:

BRAD TURNER, COMMISSIONER

DATE
ATTESTATION RE PERSONNEL USED IN CONTRACT PERFORMANCE

<table>
<thead>
<tr>
<th>SUBJECT CONTRACT NUMBER:</th>
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<tbody>
<tr>
<td>CONTRACTOR LEGAL ENTITY NAME:</td>
</tr>
<tr>
<td>EDISON SUPPLIER IDENTIFICATION NUMBER</td>
</tr>
</tbody>
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The Contractor, identified above, does hereby attest, certify, warrant, and assure that Contractor shall not knowingly utilize the services of an illegal immigrant in the performance of this Contract and shall not knowingly utilize the services of any subcontractor who will utilize the services of an illegal immigrant in the performance of this Contract.

CONTRACTOR SIGNATURE

NOTICE: This attestation MUST be signed by an individual empowered to contractually bind Contractor. If said individual is not the chief executive or president, this document shall attach evidence showing the individual’s authority to contractually bind Contractor.

PRINTED NAME AND TITLE OF SIGNATORY

DATE OF ATTESTATION
SAMPLE LETTER OF DIVERSITY COMMITMENT

(Company Letterhead/Logo)
(Company Name) is committed to achieving or surpassing a goal of (numeral) percent spend with certified diversity business enterprise firms on State of Tennessee contract # (Edison document #). Diversity businesses are defined as those that are owned by minority, women, service-disabled veterans, businesses owned by persons with disabilities, and small businesses which are certified by the Governor's Office of Diversity Business Enterprise (Go-DBE).

We confirm our commitment of (percentage) participation on the (Contract) by using the following diversity businesses:

(i) Name and ownership characteristics (i.e., ethnicity, gender, service-disabled veteran, or disability) of anticipated diversity subcontractors and suppliers:
__________________________________________________________________

(ii) Participation estimates (expressed as a percent of the total contract value to be dedicated to diversity subcontractors and suppliers):
_______%.

(iii) Description of anticipated services to be performed by diversity subcontractors and suppliers:
__________________________________________________________________
__________________________________________________________________

We accept that our commitment to diversity advances the State's efforts to expand opportunity of diversity businesses to do business with the State as contractors and sub-contractors.

Further, we commit to:
1. Using applicable reporting tools that allow the State to track and report purchases from businesses owned by minority, women, service-disabled veterans, businesses owned by persons with disabilities, and small businesses.

2. Reporting monthly to the Go-DBE office the dollars spent with certified diversity businesses owned by minority, women, service-disabled veterans, businesses owned by persons with disabilities, and small business accomplished under contract # (Edison number).

(Company Name) is committed to working with the Go-DBE office to accomplish this goal.

Regards,

(Company authority – signature and title)