



REQUEST FOR QUALIFICATION

26-001-ADR-HRSN

HEALTH-RELATED SOCIAL NEEDS (HRSN) NUTRITION SUPPORT SERVICES

Pierce County
1501 Market St, Suite 420
Tacoma, WA 98402

RELEASE DATE: August 24, 2026

DEADLINE FOR QUESTIONS: undefined

RESPONSE DEADLINE: March 1, 2027, 2:00 pm

RESPONSES MUST BE SUBMITTED ELECTRONICALLY TO:

<https://procurement.opengov.com/portal/piercecountywa>

Pierce County
REQUEST FOR QUALIFICATION
Health-Related Social Needs (HRSN) Nutrition Support Services

1.	Introduction.....
2.	Pierce County's eProcurement System
3.	Summary
4.	Background.....
5.	Objective/Scope of Work.....
6.	Qualification Requirement.....
7.	Anticipated Contract Details and Expectations
8.	Definitions
9.	ADA.....
10.	General Information for Respondents
11.	RFQ Coordinator
12.	Timeline
13.	Procurement Documents and RFQ Holder's List
14.	Questions and Answers
15.	Submission of Responses
16.	Public Records and Proprietary Material
17.	Revisions to the RFQ
18.	Responsiveness.....
19.	Contract and General Terms & Conditions
20.	Costs to Prepare a Response.....
21.	No Obligation to Contract.....
22.	Rejection of Responses
23.	Most Favorable Terms
24.	Cooperative Purchasing
25.	Title VI Compliance
26.	RFQ Questionnaire.....
27.	Administrative, Organization, Threshold Review and Response Questions
28.	Evaluation and Contract Award
29.	Evaluation Procedure.....
30.	Evaluation Process
31.	Notification to Respondents

Attachments:

A - SAMPLE: Client Services Agreement

B - Medically Tailored Meals Workflow

1. Introduction

1.1. Pierce County's eProcurement System

Welcome to Pierce County's eProcurement System. This system is inclusive to the procurement process, including submission of any questions and/or clarifications, the release of any addenda/notices, and submission of responses. It is strongly encouraged that organizations responding to any procurement first read the entire procurement, paying close attention to the timelines, scope of work, eligibility, submission requirements, and specifically to the questionnaire section, which may include required attachments (*when applicable*), and ask for any clarifications regarding content and instructions early in the process.

1.2. Summary

Pierce County Human Services (PCHS) Aging and Disability Resources (ADR) is seeking applications from eligible, qualified organizations to provide and deliver nutrition support services through the Health-Related Social Needs (HRSN) Program under Washington's 1115 Medicaid Demonstration waiver. This RFQ is seeking to qualify organizations to provide HRSN services to eligible Medicaid recipients who are not currently receiving in-home long-term care support services (Non-LTSS Clients).

Respondents may apply to provide nutrition support services – specifically, Medically Tailored Meals (MTMs) and/or Fruit and Vegetable Provisions – through this RFQ. Respondents interested in providing any combination of these services must qualify for each service. For more information about HRSN nutrition support services, please visit the Washington State Health Care Authority's website: [Nutrition supports | Washington State Health Care Authority](#). Respondents must serve the entire geographic area of Pierce County.

The intended result of this RFQ is for PCHS ADR to offer Respondents that meet qualifications the opportunity to negotiate a contract. A Respondent will not be offered a contract for services for which it is not qualified to deliver.

This RFQ is a solicitation for qualifications only. It shall not be construed as a guarantee or a promise that the solicited qualification will result in a contract for services with PCHS.

This RFQ is open and continuous. Respondents may apply at any time.

1.3. Background

ADR serves as the Area Agency on Aging (AAA) for Pierce County and administers federal and state funds in partnership with local community organizations.

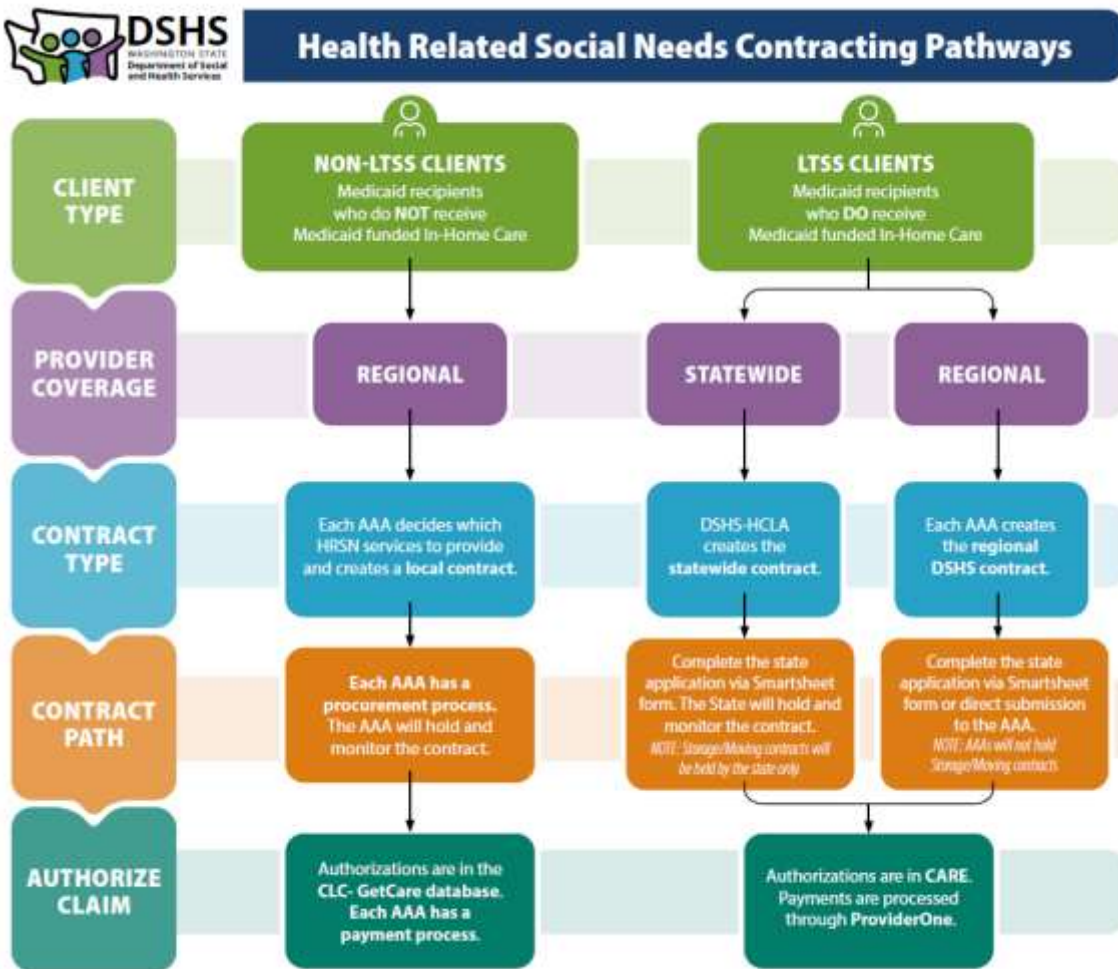
Under the terms of Washington State's Section 1115 Medicaid Demonstration waiver, also called Medicaid Transformation Project (MTP) 2.0, the Centers for Medicare and Medicaid Services (CMS) has approved payment for HRSN services. HRSN services address an individual's unmet, adverse social conditions that contribute to poor health. These unmet conditions, including food insecurity, can drive health disparities across demographic groups. HRSN services allow qualifying Medicaid recipients to receive evidence-based, non-medical services aimed at supporting individual health outcomes.

The HRSN program is funded by and provided in partnership with Washington State Health Care Authority (HCA) and Washington State Department of Social and Health Services' (DSHS) Home and Community Living Administration (HCLA).

There are three pathways to obtain a contract to provide HRSN services through DSHS HCLA, as indicated in the chart below. ADR is accepting applications only from organizations who have already met qualifications and contracted with DSHS HCLA and/or PCHS ADR to provide the following HRSN nutrition support services to eligible Medicaid recipients receiving in-home long-term care support services (LTSS Clients) in Pierce County: Medically Tailored Meals (MTMs) and/or Fruit and Vegetable Provisions. Organizations that meet these qualifications may apply to provide these HRSN nutrition support services to eligible Non-LTSS Clients.

Respondents that do not currently hold the required contract are not eligible to apply. Organizations interested in providing HRSN services to LTSS Clients can find out more information here:

<https://www.dshs.wa.gov/altsa/home-and-community-services/information-potential-medicaid-contractors>.



1.4. Objective/Scope of Work

1.4.1. Description of Solicited Services

HRSN services are designed to address social and environmental factors to improve health and wellbeing and support clients to remain in their homes and communities. These services also strive to reduce food and nutrition barriers that negatively impact health. HRSN nutrition support services must be provided in accordance with evidence-based nutrition and food safety guidelines, be person-centered, consider dietary preferences, and be culturally appropriate.

The HRSN nutrition support services solicited in this RFQ are Medically Tailored Meals and Fruit and Vegetable Provisions.

Medically Tailored Meals: Provides an individual with a health condition with nutritious meals tailored to improve their health outcomes.

Fruit and Vegetable Provisions: Allows an individual or organization to purchase or provide fruits and vegetables from participating food retailers and farms.

Successful Respondents must serve the entire geographic area of Pierce County.

1.4.2. Program and Contractor Requirements

Nutrition Support Service Authorization

PCHS Case Managers are responsible for eligibility screening and authorization of services. Once services are authorized, clients are referred to the network of Contractors through the Community Living Connections (CLC)-GetCare database. The client and authorizing Case Manager shall determine the type of nutrition supports required and approved, and the client will choose which Contractor best meets their needs.

Service authorizations will specify the total number of units available to the client. Services may only begin after receipt of a service authorization via CLC-GetCare database specifying the units of service and level of care to be provided for the authorized period.

Contractors will receive client demographic information and a nutritional assessment which may be used to supplement their own assessment in the development of a care plan, as available and appropriate.

It shall be the Contractor's responsibility to utilize the CLC-GetCare database prior to each service month to ensure current eligibility and service authorization.

It shall be the Contractor's responsibility to track and report services provided month-to-date and number of authorized units remaining for the authorization period.

Medically Tailored Meals (MTM)

Staffing Requirements

The Contractors must employ or contract with one or more of the following licensed health professionals to certify meals and/or complete nutritional assessments:

- Registered Dietitian (RD);
- Registered Dietitian Nutritionist (RDN); or
- Primary Care Provider (PCP).

Nutrition Assessment

If a nutrition plan is not already available from an RD/RDN/PCP, the Contractor's RD/RDN/PCP will complete an initial assessment to develop a medically appropriate nutrition plan.

Contractors will also complete a reassessment at the time of reauthorization or when a change in the client's medical condition necessitates a new nutrition plan.

Contractors must comply with the steps outlined in the HRSN Medically Tailored Meals Workflow (see Attachment B).

Meals

The Contractor shall prepare and provide meals tailored to support clients with health-related conditions and consistent with client's nutrition plan and as authorized in CLC-GetCare. Clients may receive up to three meals a day for six months with the option to renew for an additional six-month period if the need continues.

Each meal must be certified by an RD/RDN to contain sufficient food to support approximately one-third of an individual's daily nutritional need as indicated by the [Dietary Reference Intakes](#) and [Dietary Guidelines for Americans](#), or evidence-based practice guidelines for specific chronic diseases and conditions.

Meals may consist of fresh or frozen food. Personal and cultural dietary preferences of clients must be considered, as practical.

Meals may also include an accompanying fluid/drink and/or a supplementary food item to support meeting a client's nutrition needs between meals if medically appropriate. For example, a beverage and snack may be provided to support taking medications that should be taken with food.

Service Delivery

Meals may be delivered in one or more of the following ways:

- Contractor delivers food to the client's home.
- Contractor utilizes a commercial delivery service to deliver food to the client's home.

Documentation

Contractors will be required to create and maintain records of all clients served in the CLC-GetCare system in accordance with HCLA's requirements and the requirements of PCHS.

The Contractor will be required, at a minimum, to maintain each client name, Provider One number, CLC-GetCare number, and contact information. Documentation must also detail the nutritional

assessment, number of meals authorized and provided, start date, end date, delivery dates, and any returned mail if the meal is delivered by mail (an indicator of a client having not received the service).

Fruit and Vegetable Provisions

Staffing Requirements

None.

Nutrition Assessment

None.

Fruits and Vegetables

This service allows clients to receive or purchase a variety of foods that promote better nutrition. The Contractor shall allow clients to choose an assortment of fruits and vegetables, as authorized by PCHS. Client can be authorized to receive this service on a daily, weekly, or monthly basis for up to 6 months with the option to continue for an additional six-month period if the need continues. Fruits and vegetables available for purchase and/or delivery through this service may be fresh, frozen, or canned.

Service Delivery

Fruit and Vegetable Provisions may be delivered in one or more of the following ways:

- Contractor delivers food to the client's home.
- Contractor utilizes a commercial delivery service to deliver food to the Client's home.

If any food is spoiled, moldy, or otherwise not edible upon delivery, the Contractor shall replace items within 10 calendar days.

Documentation

The Contractor is required, at a minimum, to maintain each Client name, ProviderOne ID, CLC-GetCare number, and contact information. Documentation must include foods provided, delivery date(s), returned mail if food is delivered by mail (an indicator of a client having not received the service), and replacement food sent in the event original food was spoiled, moldy or otherwise not edible.

1.4.3. Eligible Population

PCHS Case Managers will conduct the initial client eligibility screening assessment and will screen for appropriate Medicaid eligibility monthly.

	Medically Tailored Meals	Fruit and Vegetable Provisions
Eligible Population	Enrolled in Apple Health (Medicaid). Not enrolled in or receiving LTSS.	Enrolled in Apple Health (Medicaid). Not enrolled in or receiving LTSS.

Social Risk Factors	Meets the USDA definition of low food security or very low food security .	Meets the USDA definition of low food security or very low food security.
Clinical Risk Factors	Has a chronic condition(s) AND Has been or is being discharged from institutional care, a hospital, or congregate settings, within 6 months, OR at high risk of hospitalization or nursing facility placement.	Has a chronic condition(s).

1.4.4. Eligible Costs

Service rates for MTM and Fruit and Vegetable Provisions will match negotiated LTSS rates for the proposed service.

1.4.5. Reporting

Contractors will be responsible for utilizing the CLC-GetCare database to report service units provided on a monthly basis prior to payment.

CLC-GetCare licenses are typically provided at no cost up to a limit of total licenses across all providers in the system; however, DSHS may charge \$600 per year per user for CLC-GetCare licenses after the limit has been reached. Respondents should be aware of this potential cost.

1.4.6. Policy Compliance

Respondents submitting a response to this RFQ must agree that any resulting qualification and contractual agreement will require compliance with the authorities and standards that must be followed for implementation of HRSN services. The full text for each of the authorities and standards include, but are not limited to, the following:

Revised Code of Washington – <https://apps.leg.wa.gov/rcw/>

- Chapter 26.44.030 RCW – Duty to Notify
- Chapter 39.26 RCW – Procurement of Goods and Services
- Chapter 43.20 RCW – Washington State Board of Health requirements
- Chapter 43.43.830 through 43.43.845 – Background Checks
- Chapter 69.06 RCW – Food and Beverage Establishment Workers’ Permits
- Chapter 74.34 RCW – Abuse of Vulnerable Adults

Washington Administrative Code – <https://apps.leg.wa.gov/wac/>

- Chapter 246-215 WAC - Food Service by the Washington State Department of Health

- Chapter 246-822-132 WAC – Dietitian Application Requirements
- Chapter 296-24 WAC – General Safety and Health Standards
- Chapter 296-62 WAC – General Occupational Health Standards
- Chapter 388-06 WAC – Background Checks
- Chapter 388-106H WAC – Washington State Health-Related Social Needs (HRSN)

Title 42 Code of Federal Regulations - [eCFR :: Title 42 of the CFR -- Public Health](#)

- 42 CFR § 455.104 – Disclosure by Medicaid providers and fiscal agents: Information on ownership and control
- 42 CFR § 455.105(b)(c) – Disclosure by providers: Information related to business transactions

Social Security Act - [Social Security Act §1902](#)

- Section 1902(a)(68) – State Plans for Medical Assistance

1.5. Qualification Requirement

1.5.1. Respondent Eligibility

Respondents who do not meet these minimum qualifications will be considered non-responsive and their response will not be evaluated. Respondents must:

- Have successfully completed the Medicaid open enrollment process through Washington State DSHS HCLA and have a current LTSS contract for the HRSN nutrition service(s) for which they are applying.
- Agree to serve the entire geographic area of Pierce County.

1.6. Anticipated Contract Details and Expectations

1.6.1. Term

Any contract resulting from this RFQ is expected to have an initial term through June 30, 2028, with the option of renewing if funding is extended. Contracts may be renewed, without advertisement or solicitation; renewal is subject to the availability of funding, the continued need for the service(s), and/or satisfactory performance by the Contractor. The actual schedule will be negotiated with the successful Respondent(s) based on the final scope of work, funding, and services purchased, and is subject to appropriation of funds.

1.6.2. Reimbursement

Contracts resulting from this procurement will not have a fixed value. Reimbursement for MTM and Fruit and Vegetable Provisions is on a fee-for-service basis. Service rates for MTM and Fruit and Vegetable Provisions will match negotiated LTSS rates for the proposed service.

Additional federal, State, or local funds may become available during the contracting cycle and allocated through this solicitation. Funding may only be awarded for the same scope of services as described in this solicitation. It is important to note, any contract awarded as a result of this procurement is contingent upon the availability of funding. If at any time during the term of the contract the funding relied upon for the contract is reduced, modified, or eliminated, or if the funding terms are modified, Pierce County reserves the right to amend the contract as appropriate or to terminate the contract.

1.7. Definitions

- “Apparently Successful Respondent (ASR)” means a Respondent selected as an entity to perform the anticipated services, subject to completion of contract negotiations and execution of a written contract.
- "Applicant," "Bidder," "Proposer" and "Respondent" mean an organization, agency or provider that submits a formal response to this procurement.
- "Application," "Bid," "Proposal" and "Response" mean a formal response to this solicitation.
- “CFR” means Code of Federal Regulations.
- “Client,” "Participant," "Household," or "Member" means an individual (or individuals) who receives services, or is eligible to receive services, under this procurement.
- “Contractor” means an individual or organization whose response has been accepted by the County and has been awarded a fully executed, written contract.
- “DSHS” or the “Department” means the state of Washington Department of Social and Health Services and its employees and authorized agents.
- “Food Insecurity” means the USDA definition of low food security, or very low food security.
 - Low food security: reports of reduced quality, variety, or desirability of diet. Little or no indication of reduced food intake.
 - Very low food security: reports of multiple indications of disrupted eating patterns and reduced food intake.
- “Procurement” means the process by which the County obtains services.
- “Request for Qualifications (RFQ)” or "Solicitation" means this document and its attachments in which needed goods and/or services are identified and organizations are invited to provide information as to how they are qualified to meet the County's needs.
- “RCW” means Revised Code of Washington.
- "USDA" means U.S. Department of Agriculture.
- “WAC” means Washington Administrative Code.

1.8. ADA

The County complies with the Americans with Disabilities Act (ADA). Bidders should contact the RFQ Coordinator to request an accommodation.

2. General Information for Respondents

2.1. RFQ Coordinator

The RFQ Coordinator is the sole point of contact in the County for this procurement. All communications between the Respondent and the County upon release of this RFQ shall be with the RFQ Coordinator.

Anne Marie Edmunds

Procurement & Contract Specialist

Email: annemarie.edmunds@piercecountywa.gov

Phone: (253) 798-7456

Department:

Human Services

Any other communication will be considered unofficial and non-binding on the County. Respondents are to rely on written statements issued by the RFQ Coordinator. Communication directed to parties other than the RFQ Coordinator may result in disqualification of the Respondent.

2.2. Timeline

This RFQ is intended to remain open and available on a continuous basis to allow interested organizations to submit qualifications at any time. To support ongoing contract administration and system requirements, the solicitation will periodically close and be reissued as an identical opportunity.

The current solicitation will close on the date and time listed below. At that same date and time, a new RFQ containing the same scope, requirements, and evaluation criteria will be published and opened for submissions.

Respondents that have already submitted qualifications under the current solicitation do not need to resubmit unless they wish to update or revise their qualifications. Respondents seeking to submit qualifications after the closure of the current solicitation should do so under the newly issued RFQ.

RFQ Release Date:	August 24, 2026
Response Submission Deadline:	March 1, 2027, 2:00pm
Acknowledgement of Receipt:	Within 10 business days of submission
Notification of Outcome:	Within 30 business days of submission
Notification of Next Steps:	Within 90 business days of submission

The County reserves the right to revise the above timeline.

2.3. Procurement Documents and RFQ Holder's List

RESPONDENTS WHO REGISTER AND DOWNLOAD RFQ DOCUMENTS will be automatically added to the FOLLOWERS' list in the County's [eProcurement Portal](#). Notifications for solicitation updates, addendum and other procurement information will be sent to all who register on the Pierce County eProcurement Portal.

2.4. Questions and Answers

Respondents may submit questions through the County's eProcurement Portal, under the Question & Answer Section. All questions shall receive a response within ten (10) business days. Respondents must be registered in the eProcurement Portal software to submit questions, receive addendums and notifications, and ultimately submit a response. Respondents may only rely on written statements issued by the County. Any oral communications are unofficial and are not binding on the County.

2.5. Submission of Responses

2.5.1. Deadline

The response must be received by the time/date as indicated in Section 2.2. **If a proposer misses the submission deadline, the proposal may be submitted for consideration during the next review period, which will be posted in the OpenGov portal immediately upon the closure of this solicitation.**

2.5.2. Attachments

Follow instructions carefully - if attachments are provided under this solicitation, they are to be utilized as part of the response - do not replace or use the organization's own format, as the response may be deemed "non-responsive" or "not eligible."

2.5.3. Instructions

All responses are evaluated on the completeness and quality of the content. Only those Respondents providing complete information as required will be considered for evaluation. The County will not contact the organization for correction of responses and Respondents are strongly encouraged to carefully review their responses for completeness and accuracy before submitting. For responses to be considered responsive and move to the review process, the Respondent must, under Section 3, RFQ Questionnaire:

- Acknowledge all required "confirmations."
- Complete all required attachments, to include uploading any supplemental documents requested in attachments; and
- Submit the following materials as part of the response:
 - Current DSHS contract through HCLA or Pierce County to provide the service(s) for which the organization is applying. (Question 4.1)

2.5.4. Additional Resources/Helps

This section provides a curated list of help articles addressing common questions and challenges Respondents may encounter during the Request for Qualification process. The resources below are intended to offer clear guidance, practical solutions, and relevant information to support a smooth and successful submission. Respondents are encouraged to review these materials as needed to better understand requirements, resolve issues, and navigate the process with confidence.

- [Vendor Registration](#)
- [Following a Project](#)
- [Getting Started with Subscriptions](#)
- [How to Submit a Question in OpenGov](#)
- [How to Submit a Proposal Response in OpenGov](#)
- [How to Edit or Withdraw a Proposal after Submission in OpenGov](#)

2.5.5. Electronic Submissions Only

Only electronic submittal via the County's eProcurement Portal shall be accepted for this procurement. No hard copies, emails, or fax submittals shall be accepted. The accepted forms of submitted materials are .pdf, .png, .jpeg, and MS Office formats such as .docx and .xlsx.

2.5.6. Addenda & Notices

Applicants must acknowledge and confirm each addendum and notice issued under this solicitation. *The system will not allow final submission unless all required confirmations are checked.*

2.5.7. County Property

All responses and any accompanying documentation become the property of the County and will not be returned.

2.6. Public Records and Proprietary Material

- Organizations should be aware that any records they submit to the County or that are used by the County even if the organization possess the records, may be public records under the Washington Public Records Act (RCW 42.56). The County must promptly disclose public records upon request unless a statute exempts them from disclosure. Organizations should also be aware that if even a portion of a record is exempt from disclosure, generally, the rest of the record must be disclosed. Exemptions are narrow and specific.
- Organizations should clearly mark any record they believe is exempt from disclosure.

2.7. Revisions to the RFQ

In the event it becomes necessary to revise any part of this RFQ, addenda will be published in the County's [eProcurement Portal](#).

All amendments and notifications of cancellation shall be posted in the County's [eProcurement Portal](#). If you did not receive this solicitation via the County's eProcurement Portal, please register there to receive further notifications.

The County also reserves the right to amend or add to, retract from, or cancel this Procurement at any time, in whole or in part, and without penalty.

In the event of a conflict between amendments or between an amendment and this Solicitation Document, the document issued latest in time shall control.

2.8. Responsiveness

All responses will be reviewed by the RFQ Coordinator to determine compliance with administrative requirements and instructions specified in this solicitation. The Respondent is specifically notified that the County may reject or withdraw a response at any time as nonresponsive for any of the following reasons:

- Incomplete response,
- Failure to comply with any part of this solicitation or any Attachments to this procurement,
- Submission of incorrect, misleading, or false information.

The County also reserves the right, however, at its sole discretion to waive minor administrative irregularities, which are defined as variances which do not provide an applicant an advantage or benefit over other applicants.

2.9. Contract and General Terms & Conditions

The ASR will be expected to enter into a contract which is substantially the same as the Sample Contract and its General Terms and Conditions attached as Exhibit C. In no event is a Respondent to submit its own standard contract terms and conditions in response to this solicitation. If a Respondent has a concern regarding a certain General Term & Condition, they can raise the issue per the Questions and Answers section of this solicitation.

2.10. Costs to Prepare a Response

The County will not be liable for any costs incurred by the Respondent in preparation of a response submitted in response to this RFQ, in conduct of a presentation or interview, or any other activities related to responding to this RFQ.

2.11. No Obligation to Contract

This RFQ does not obligate the County to contract for services specified herein.

2.12. Rejection of Responses

The County reserves the right at its sole discretion to reject any and all responses received without penalty and not to issue a contract as a result of this RFQ.

2.13. Most Favorable Terms

The County reserves the right to make an award without further discussion of the response submitted. Therefore, the response should be submitted initially on the most favorable terms which the Respondent can offer. There will be no best and final offer procedure.

The ASR should be prepared to accept this RFQ for incorporation into a contract resulting from this RFQ. Contract negotiations may incorporate some or all of the Respondent's submission. It is understood that the response will become a part of the official procurement file on this matter without obligation to the County.

2.14. Cooperative Purchasing

The Washington State Interlocal Cooperation Act, Ch. 39.34 RCW, authorizes public agencies to cooperatively purchase goods and services if all parties agree. By responding to this RFQ, Consultants agree that other public agencies may purchase goods and services under this procurement or contract at their own cost and without Pierce County incurring any financial or legal liability for such purchases. Pierce County agrees to allow other public agencies to purchase goods and services under this procurement or contract, provided that Pierce County is not held financially or legally liable for purchases and that any public agency purchasing under such procurement or contract file a copy of this invitation and such contract in accordance with RCW 39.34.040.

2.15. Title VI Compliance

Pierce County, in accordance with Title VI of the Civil Rights Act of 1964, 78 Stat. 252, 42 U.S.C. 2000d to 2000d-4 and Title 49, Code of Federal Regulations, Department of Transportation, subtitle A, Office of the Secretary, Part 21, nondiscrimination in federally assisted programs of the Department of Transportation issued pursuant to such Act, hereby notifies all Respondents that it will affirmatively ensure that in any contract entered into pursuant to this advertisement, disadvantaged business enterprises as defined at 49 CFR Part 26 will be afforded full opportunity to submit proposals in response to this invitation and will not be discriminated against on the grounds of race, color, or national origin in consideration for an award.

3. RFQ Questionnaire

3.1. Administrative, Organization, Threshold Review and Response Questions

1. *Administrative Questions*

1.1. *Respondent Confirmation**

As an authorized representative of the Respondent, having carefully examined the Request for Qualifications, propose to furnish services in accordance therewith as set forth in the attached response.

I further agree that this response will remain in effect for not less than sixty (60) calendar days from the date that responses are received by the County, and that this response may not be withdrawn or modified during that time.

I hereby certify that this response is genuine and not a false or collusive response, or made in the interests or on behalf of any person not therein named; and I have not directly or indirectly induced or solicited any Contractor or supplier on the above work to put in a false response or any person or corporation to refrain from submitting a response; and that I have not in any manner sought by collusion to secure to myself an advantage over any other contractor(s) or person(s).

In order to induce the County to consider this response, the Respondent irrevocably waives any existing rights which it may have, by contract or otherwise, to require another person or corporation to refrain from submitting a response to or performing work or providing supplies to Pierce County, and Respondent further promises that it will not in the future directly or indirectly induce or solicit any person or corporation to refrain from submitting a response or response to or from performing work or providing supplies to Pierce County.

☐ Please confirm

*Response required

1.2. *Ownership and Copyright of Submitted Materials**

By submitting a response, I agree that all documents, reports, proposals, submittals, working papers, or other materials prepared by the Respondent pursuant to this response shall become the sole and exclusive property of the County, and the public domain, and not property of the Respondent. The Respondent shall not copyright, or cause to be copyrighted, any portion of items submitted to the County in response to this procurement.

☐ Please confirm

*Response required

1.3. *Supplemental Attachment Confirmation**

I confirm I have reviewed the content of the following attachments included under this RFQ: **Sample Agreement and any other documents as identified as "sample" in the Attachments section** and acknowledge I understand and agree to these requirements should my organization receive a contract as a result of this response.

☐ Please confirm

***Response required**

1.4. Insurance Requirements*

By submitting a response, I understand and agree that if awarded funding from this RFQ, the organization must be able to meet all insurance requirements based on services being purchased, prior to contract execution, and types of insurances may include, but are not limited to:

- **Commercial General Liability Insurance:** Required on all contracts. Standard levels are \$1M occurrence/\$2M aggregate (may be higher/lower, depending on value of contract and type of service).
- **Commercial Automobile Liability Insurance:** Required when the Contractor uses owned, rented, or leased automobiles to complete the services as required per the contract. Higher coverages may be required for fleet/large passenger vehicles.
- **Workers Compensation Insurance:** As required by Washington State.
- **Professional Liability or Errors and Omissions Insurance:** If the Contractor provides services such as analysis, consulting, counseling, daycare, legal, medical, nursing, pastoral, medical, or other services that require professional licensing.
- **Abuse and Molestation:** If the Contractor will be working directly with youth under the age of 18, elderly, disabled or other vulnerable populations.
- **Cyber/Privacy and Security Insurance:** If the Contractor is doing work that could give the Contractor access to personal or sensitive information from within the County's network or on the Contractor's personal computer, or lead to breaches of security, leading to a loss of privacy or identity theft.
- **Crime/Employee Dishonesty Insurance:** If the Contractor is in the custody or control of Pierce County funds such as cash, credit cards, checks or physical property.
- **Other insurance(s) applicable to services being purchased:** Such as Excess or Umbrella Liability Insurance if the contract is in excess of \$500,000.

In addition:

- Pierce County shall be named as an "Additional Insured" which must be provided in the insurance endorsement; and
- Insurance requirements also apply to any subcontractors hired by the main Contractor to deliver services, where applicable.

Please see "Exhibit D" in the SAMPLE AGREEMENT under attachments to see full insurance requirements. If you have questions regarding insurance requirements, please submit them through the "Question & Answer" section of the RFQ.

☐ Please confirm

***Response required**

1.5. Debarment Certification*

As an authorized representative of the Respondent, I certify to the best of my knowledge and belief that the organization and its principals:

- A. Are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions by any Federal department or agency;
- B. Have not within a three-year period preceding this response been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State, or local) transaction or contract 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 for or otherwise criminally or civilly charged by a government entity (Federal, State, or local) with commission of any of the offenses enumerated in paragraph (1)(b) of this certification; and
- D. Have not within a three-year period preceding this response had one or more public transactions (Federal, State, or local) terminated for cause or default.
- E. Does not employ any person nor contracts with any person or agency excluded from participation in federal health care programs under either 42 U.S.C. 1320a-7 (§§1128 or 1128A Social Security Act) or debarred or suspended.

By checking the confirmation, I understand that a false statement on this certification may be grounds for rejection of this response or termination of any award. In addition, under 18 USC Sec. 1001, a false statement may result in a fine of up to \$10,000 or imprisonment for up to 5 years, or both.

☐ Please confirm

***Response required**

1.6. Pre-Award Risk Assessment Submission Confirmation*

Pierce County is now [collecting Risk Assessment documentation through this form](#). **Agencies MUST complete the Risk Assessment and submit related documentation through the form at LEAST every six months.**

Upon completion of the form submission, you will receive a confirmation email. **The confirmation email is REQUIRED as part of this application.**

You MUST re-submit the form if **any** of the following conditions apply since the previous submission:

- It has been more than six months.
- There has been a change in leadership (ED/CEO/CFO).

- There has been a loss or reduction of funding of 20% or more of the agency's total budget.

I understand and agree that my organization has completed the Risk Assessment form within the last six months and/or has updated the Risk Assessment form submission if any of the above conditions apply.

I understand the results of the Risk Assessment shall be utilized to determine the potential financial risk and stability of the organization prior to the County making any award and that completing the risk assessment does not guarantee an award.

☐ Please confirm

*Response required

*1.7. Proof of Completed Risk Assessment**

Once you have submitted the Pre-Award Financial Risk Assessment Form, you will receive an email confirmation. **Save the email confirmation as a .PDF and [UPLOAD HERE](#).**

WARNING: Failure to provide evidence of an acceptable and up-to-date Risk Assessment may be cause for the application to be disqualified from competition.

*Response required

2. Organization Information

*2.1. Authorized Individual**

Please provide the name and title of the individual authorized to execute a contract on behalf of the organization.

*Response required

*2.2. Organization Information**

Please provide the legal name, any d/b/a names, years in business, local address, billing address if different, email address, and phone number of the organization making the response.

*Response required

*2.3. Organization Tax ID Number**

Please provide the Employee Identification Number (EIN).

*Response required

*2.4. Ownership Type**

Must choose at least two (2) answers: Profit status (1 or 2) and organizational structure (3, 4, 5, or 6).

Select all that apply

- ☐ 1. For Profit
- ☐ 2. Non Profit
- ☐ 3. Sole Proprietorship
- ☐ 4. Corporation/LLC/Partnership
- ☐ 5. City/County/State
- ☐ 6. Tribal Organization

*Response required

2.5. *Organization Contacts**

Please provide the name, phone, and email for:

- Executive Director/CEO/President
- Financial Manager/CFO
- Contract Manager

*Response required

2.6. *Washington State Unified Business Identification (UBI) Number**

Please provide the organization's UBI number.

WARNING: Failure to provide a UBI number will be cause for the application to be disqualified from competition.

*Response required

2.7. *Unique Entity Identification (UEI) Number**

An organization must have, at the time of submission, an active UEI number when the funding for the procurement is identified as federal. Please list your UEI as issued by Sam.gov.

Funding may or may not create a subrecipient relationship between the organization and the County.

WARNING: Failure to provide a valid and active UEI number may result in the disqualification of the application from further consideration.

*Response required

2.8. *Proposed Services**

Select the services the organization is proposing to provide.

Select all that apply

- ☐ Medically Tailored Meals
- ☐ Fruit & Vegetable Provision

*Response required

3. *Policy Requirements*

3.1. *Certification of Compliance with Applicable Authorities and Standards**

I certify that, if my organization is selected under this RFQ, my organization will comply with all applicable federal and Washington State laws, regulations, and standards governing the implementation of Health-Related Social Needs (HRSN) services, including, but not limited to, the authorities and standards identified in **Section 1.4.5, Policy Compliance**.

- ☐ Please confirm

*Response required

4. *Minimum Qualifications*

4.1. *Current Contract**

Please upload a current DSHS contract for each service for which you are applying.

*Response required

4.2. *Service Area**

I certify that, if my organization is selected under this RFQ, my organization will serve the entire geographic area of Pierce County.

☐ Please confirm

*Response required

4. Evaluation and Contract Award

4.1. Evaluation Procedure

The application in this RFQ is designed to determine whether a Respondent meets the minimum qualifications to provide MTMs and/or Fruit and Vegetable Provisions, under Washington's 1115 Medicaid Demonstration waiver, referred to in this RFQ as HRSN services.

Responses to this RFQ will be reviewed by an evaluation committee comprised of programmatic and fiscal staff. The evaluation committee will review each response to determine whether the Respondent has demonstrated that it meets the minimum qualifications established in this RFQ.

The committee may verify information provided by Respondents and may request clarification of submitted materials when necessary. Clarifications will be limited to information already contained in the response and will not provide Respondents an opportunity to materially revise or supplement their qualifications.

Respondents that are determined to meet all minimum qualifications will be designated as qualified and offered the opportunity to enter into an agreement for the proposed services. Respondents that do not meet one or more minimum qualifications or fail to submit required information may be determined non-responsive and may not be eligible for qualification. Respondents that are non-responsive and/or fail to meet the minimum qualifications will be provided with a description of the deficiencies. Respondents that address their deficiencies may re-submit their qualifications at any time.

4.2. Evaluation Process

Applications will be reviewed as they are received to determine whether the Respondent has met evaluation criteria. In the event the evaluation committee has clarifying questions for a Respondent, they shall notify the Procurement Coordinator who will, in turn, send the question(s) to the appropriate Respondent. The Procurement Coordinator shall provide a deadline for the answers and shall then notify the evaluation committee members of the response.

4.3. Notification to Respondents

The County will notify all Respondents of the outcome of their response in writing within 30 business days of acknowledgement of receipt of application.