

**REQUEST FOR INTEREST**

**FY *2024-2025***

**Home and Community-Based Services Funding**

Date: April 4, 2025

To: Interested Organizations and Individuals

From: Regional Center of the East Bay

RE: Request for Interest

**THE CONTEXT**

In January 2014, the federal Centers for Medicare and Medicaid Services issued final regulations, or rules, for Home and Community-Based Services (HCBS). The rules require that HCBS programs funded through Medicaid (called Medi-Cal in California) provide individuals with disabilities full access to the benefits of community living and offer services and supports in settings that are integrated in the community. In accordance with the 2024 enacted budget, $15 million will be allocated to regional centers to fund necessary changes to assist providers in taking steps towards modifying their services to come into compliance with the HCBS rules.

**ABOUT US**

Regional Center of the East Bay (RCEB) is a private non-profit organization under contract with the California Department of Developmental Services (DDS). RCEB is part of a statewide network of 21 Regional Centers responsible for the coordination and development of services to meet the needs of people with intellectual disabilities in Alameda and Contra Costa Counties. Our mission is: Driven by the belief that everyone deserves to lead a life of their choosing, RCEB partners with individuals with intellectual and developmental disabilities, their families, and the community, to create opportunities for independence and fulfillment.

Submissions from underrepresented providers and those who are knowledgeable about our diverse community are encouraged. We welcome ALL submissions.

**THE NEED**

In efforts to maintain HCBS compliance, RCEB has identified a need for approximately 15-20 individual consultants/consulting organizations to provide direct and in-person HCBS compliance and person-centeredness consultation services to our residential and non-residential provider/vendor community. Consultation services can include providing trainings, creating documents, ideating with providers, coaching providers on best practices among others. The budget will vary depending on the number of providers and vendors a consultant/consulting organization works with. The reimbursement will be $1,400 per provider supported. Each consultant/consulting organization will also be expected to provide in-home/program trainings should the need arise.

Preference for local service providers with experience in providing services in the East Bay as well as those who have experience serving our culturally and linguistically diverse community

Per Senate Bill (SB) 74, there is a requirement that any service provider receiving funds through a negotiated rate cannot allocate more than 15% of received revenue towards administrative costs. This requirement is to be funded by the service provider. Please refer to SB 74 for more information. A link to this is on the RCEB website, [www.rceb.org](http://www.rceb.org).

Also, providers receiving more than $500,000 up to $2,000,000 in revenue from Regional Centers are required to conduct an annual independent financial review or independent financial audit and submit it to RCEB. If the provider receives equal to or more than $2,000,000 in revenue from Regional Centers they are required to conduct an annual independent financial audit and submit it to RCEB.

RCEB will host two (2) Question & Answer Sessions. These will be held on Zoom and interested individuals and organizations must register using the provided links:

April 15, 2025, 2PM-3PM:

<https://us02web.zoom.us/meeting/register/wrVya1_qRr-B9gTOh2gZAg>

April 18, 2025, 10AM-11AM:

<https://us02web.zoom.us/meeting/register/w65grBNyQ-KdkoWnrJmdAA>

**Please submit a copy of the following to our HCBS inbox: hcbs@rceb.org**

1. A statement indicating the author of the proposal.
2. An Idea Statement that includes the following:
   1. A description of your experience implementing the HCBS Final Rule in a home/day program setting.
   2. A description of your experiences and credentials, if any, related to person-centered thinking/planning and how you would use this approach in your consultation services
   3. A description of the different methodologies you intend to use in providing consultation services, your consulting style and how many providers you intend to serve.
   4. A description outlining your plan to serve diverse groups of people, especially, a culturally and linguistically diverse set of stakeholders. Provide examples of your commitment to addressing the linguistic and learning needs of this diverse group. Include any additional information that you deem relevant to issues of equity and diversity.
3. The names, addresses and phone numbers of three **Professional References** and at least one professional letter of reference describing your abilities and qualifications in regards to this request (see attachment D)
4. **Resume** demonstrating evidence of applicant’s qualifications such as: education, experience, and other related skills

**GENERAL LIMITATIONS:**

This Request for Interest does not commit RCEB to award a contract, to pay any cost incurred in the preparation of the requested items, to contract in response to this request, or to procure or contract for services or supplies. To be considered, complete documents must be sent in PDF Format to [hcbs@rceb.org](mailto:hcbs@rceb.org) by **May 9, 2025, 5:00PM.**

**Attachment D**

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| **1. List three references that we may contact who will be able to attest to your experience working with individuals with developmental disabilities and /or in underserved communities in a professional capacity:** | | | | |
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| Reference #1: |  |  |  |  |
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| **I hereby give permission to the Regional Center of the East Bay to contact the above named references.**  Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | |
| **2. Attach to this form at least one professional letter of reference describing your abilities and qualifications in regards to this proposal.** | | | | |
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| **3. List any and all services or programs you are currently operating, are associated with, or are developing.** | | | | |
| Name of Service | Type of Service | In development or operational? | Number of years in operation (if applicable) | Funding source |
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