

INDIVIDUAL DEVELOPMENT ACCOUNT PROGRAM REQUEST FOR PROPOSALS

Date Issued:

October 21, 2021

DUE:

**10:15 A.M. Tuesday,
November 23, 2021**

**Bidders must submit two (2)
hard proposal copies & the
proposal saved on a flash
drive in a sealed envelope
labeled:**

Individual Development
Account Program RFP

c/o Clerk Bev Adzic

20 S. 2nd Street 4th Floor,
Newark, Ohio 43055

**Faxed or email proposals
will not be accepted**

BIDDERS' CONFERENCE

3:00 P.M. November 8, 2021
OhioMeansJobs | Licking
County, 998 East Main Street,
Newark, Ohio 43055

For virtual attendance via
Teams meeting, please send
e-mail to
Kari.Matheny@jfs.ohio.gov to
request meeting link

**Attendance is
recommended, but not
required, to answer
questions related to the
RFP.**

CONTACT INFORMATION

Questions concerning this
RFP may be directed to:

Kari Matheny

Licking County Job & Family
Services

Kari.Matheny@jfs.ohio.gov or
(740) 670-8726

Purpose:

Licking County Job and Family Services (LCJFS) is responsible for a variety of social services, including, but not limited to, public assistance, workforce development, children services, and adult protective services. Through the provision of its services, LCJFS has the need to provide customers with an Individual Development Account (IDA) program.

Background:

Licking County Job & Family Services is the local agency responsible for the administration of several programs that assist individuals and families maintaining or obtaining self-sufficiency. These programs may include, but are not limited to, Ohio Works First (OWF); Temporary Assistance for Needy Families (TANF); Prevention, Retention, and Contingency (PRC) Program; Workforce Innovation and Opportunities Act (WIOA); Comprehensive Case Management Employment Program (CCMEP); Food Assistance Employment and Training Program (FAET), At Risk Pregnancy – Medicaid; HealthChek – Medicaid; and Non-Emergency Medical Transportation (NET) – Medicaid. LCJFS is currently participating in a pilot project called Benefit Bridge. The Benefit Bridge is a program designed to assist participants as they transition off public assistance.

Scope of Work:

LCJFS is seeking a non-profit, fiduciary organization to provide an Individual Development Account (IDA) program. IDA programs are similar to savings accounts and enable participants to save for a home, an education or start-up funds for a business. Money earned by a participant is placed into the account and will be matched by LCJFS using TANF and State GRF funds. The IDA account does not affect a participant's eligibility for OWF, SNAP or Medicaid benefits. IDA's can serve as incentives for participants to find jobs and to use their earned income to save for the future.

An Individual Development Account (IDA) is a trust created or organized in the United States, pursuant to Individual Development Account program established under section 329.12 of the Ohio Revised Code. The purpose of an IDA program is to enable an eligible individual to accumulate funds for the purposes of postsecondary educational expenses, or for qualified acquisition expenses of a principal address. The IDA funds can also be used for qualified business capitalization expenses.

The program shall provide establishment of accounts for participants and acceptance of contributions from individuals and entities, including LCJFS, to be used as matching funds for deposit in the participants' account.

The fiduciary organization, for this purpose, is a nonprofit, fundraising organization exempt from federal income taxation pursuant to 26 U.S.C. 501 (a) and (c)(3). The responsibilities of the fiduciary organization for the purposes of the IDA program include but are not limited to:

1. The organization must be bonded for the amount of money the individuals have contributed plus the amount of interest generated by the account.
2. The organization must be able to market the program to individuals and matching fund contributors.
3. Deposit the individual's contributions and matching contributions into an account at a financial institution, in accordance with section 329.13 of the Ohio Revised Code within twenty-four hours of receipt of those contributions.
4. Ensure the allowable matching contribution does not exceed four times the deposited amount and that the account does not exceed ten thousand dollars at any time. Interest generated by an IDA is considered part of the IDA.
5. Create an investment plan to ensure the IDA accounts will obtain a return with a minimal risk of loss.
6. Create a plan to prevent unauthorized use of matching contributions and to enforce any penalties pursuant to who can participate in an IDA program.
7. Providing financial counseling for account holders.
8. Conduct verification of eligibility for an IDA.
9. Comply with federal and state requirements for IDAs.
10. Evaluate the IDA program as required by LCJFS and/or the Ohio Department of Job and Family Services (ODJFS).
11. Bidder's proposals must comply with all applicable Ohio regulations pertaining to Individual Development Accounts. Regulations can be found in the Ohio Revised Code 329.11, 329.12, 329.13 & 329.14 and Ohio Administrative Code Rule 5101:1-3-18.

Matching funds may be provided by or through a nonprofit, tax exempt organization, or a state or local government agency that works cooperatively with a nonprofit, tax-exempt organization.

The fiduciary organization shall permit a participant to withdraw money deposited by the participant when it is needed to deal with a personal emergency of the participant or a member of the participant's family or household. Withdrawal shall result in the loss of any matching funds in an amount equal to the amount of the withdrawal. Regardless of the reason of the withdrawal, a withdrawal from an IDA shall be made only with the approval of the fiduciary organization.

The fiduciary organization shall collect and maintain information regarding the IDA program pursuant to the provisions of section 329.12 of the Ohio Revised Code. The fiduciary organization shall report account information to the county agency on the JFS 05101, "Individual Development Account Report" (rev 2/2018) (Attachment 4).

Program Eligibility

An individual who is a program participant enrolled in the Benefit Bridge Program and whose household income is at or below two hundred percent of the federal poverty level is eligible to participate in the IDA program. Licking County Job & Family Services will determine participant eligibility and make a referral to the fiduciary organization for the IDA program.

Proposals

To be considered as a potential vendor, a proposal must be received at the Licking County Commissioners' Office no later than 10:15 A.M. on Tuesday, November 23, 2021.

Proposal Contents: Narrative

1. Description of services to be provided.
2. How service will be delivered.
3. Experience providing Individual Development Accounts.
4. Describe the training provided.
5. Expected capacity, including availability of service hours and where services may take place.
6. Program timelines.
7. Note any collaborative efforts, identifying partnerships (including sub-contracts), if any, as well as any additional sources of program funding.
8. Note qualifications as a provider and previous experience in the delivery of such services (including qualification of provider's staff). Include details regarding the qualifications, credentials, background check policies, and liability protections of those providing services.
9. A description of provider's liability insurance coverages.

Proposal Contents: Budget

Provide a detailed line-item budget that includes identification of costs, per selected area (e.g., salary, benefits, supplies, etc.). See Attachment 1 for the budget template. An electronic version of this budget format is available upon request. Should the Proposal involve existing services, please identify how funds will be utilized to expand services and current program income. Identify collaborative efforts and sub-contracts with other service providers or agencies for the identified services above, including services provided and budget for proposed sub-contracted services.

Please note: Any contract that may result from this RFP will be based on reimbursement (i.e., advanced funds are not available). Provider will receive reimbursement based upon costs. Expense reports (Attachment 2) must be submitted with monthly invoices for reimbursement. The provider will be monitored for program performance and fiscal responsibility.

Funding:

Services provided as a result of this RFP may be reimbursed through any of the following funds, Benefit Bridge - State of Ohio General Revenue Fund and/or TANF - 93.558.

The estimated maximum amount of funds available for services secured through this RFP is projected to be \$125,000.00 per year.

Proposals will be evaluated by Licking County Job & Family Services. LCJFS will determine which provider(s), if any, it wishes to award a contract. Licking County will then enter into an independent agreement with their selected provider(s). Licking County reserves the right to enter into an agreement with any, all, or none of the providers who submit a proposal.

Provider Selection Criteria:

Prospective Providers of Individual Development Account programs are advised that an offer for a contract may be made after a review of all proposals received by Licking County Job & Family Services.

Proposals will be reviewed for acceptability with emphasis on various factors according to the information supplied in the proposal. (Attachment 3)

All Proposals will be evaluated on the following criteria:

1. Meeting the specifications outlined in this RFP;
2. The Provider's previous experience;
3. The Provider's projected performance providing Individual Development Accounts (e.g., how services are delivered, previous experience, collaborative efforts, etc);
4. Any other pertinent areas as selected by Licking County Job & Family Services.

Contractual Requirements:

Any contract resulting from the issuance of this request for proposals is subject to terms and conditions established by Licking County. The proposal must state if any of the elements will be subcontracted to other parties. If so, the proposal must state the name of the subcontractor, the services/activities to be provided by the subcontractor, and planned costs. This must be reflected in the proposed budget.

RFP Limitations:

This Request for Proposals does not commit Licking County, Licking County Job & Family Services, OhioMeansJobs | Licking County, or the Licking County Board of Commissioners to award contracts or to pay any cost incurred in the preparation of a proposal. Licking County, Licking County Job and Family Services, OhioMeansJobs | Licking County and the Licking County Board of Commissioners reserve the right to accept or reject any or all proposals, to negotiate services and costs with providers, and to cancel in part or in entirety this RFP.

All proposals submitted will remain the property of Licking County and Licking County Job & Family Services. Licking County, Licking County Job & Family Services, or OhioMeansJobs | Licking County reserves the right to limit total program funding based on the availability of resources.

If awarded, any agreements are estimated to start on or after January 1, 2022 and end no later than December 31, 2022. Licking County Job & Family Services reserves the right to renew contracts annually for up to two (2) consecutive years through December 31, 2024, based on successful performance, availability of funds, and if Licking County Job & Family Services warrants such renewal. Contract renewals will be based upon mutual agreement of both parties. Contracts may be amended or terminated during this period if there is a change in Federal, State, or Agency regulations that apply to the contract; a reduction of Federal, State, or Local funds; unsatisfactory performance by the provider as determined solely by Licking County Job & Family Services; or upon thirty (30) days' written notice by either party.

The provider is required to maintain independent books, records, payroll, documents, and accounting procedures and practices which sufficiently and properly reflect all direct and indirect costs of any nature expended in the performance an agreement that may be awarded through this RFP. Such records shall be subject to inspection at all reasonable times. Workers Compensation paid after the program end date is not reimbursable.

Provider shall maintain professional liability, personal and public liability, property damage, and other insurance, in such amounts and such forms as each party to adequately protect itself, its officers, its

employees, its agents and/or contracted servants, its personal and real property, against damage and liability. Providers shall, if requested by LCJFS, submit a certificate of insurance to LCJFS.

If a contract is awarded, this Request for Proposal (RFP) guideline shall become a part of the contractual agreement.

SUBMISSION INFORMATION

Proposals must be submitted in strict accordance with proposal submission instructions provided in this section. Any proposal failing to follow the entire proposal acceptance criteria listed below shall be disqualified from consideration.

Proposals are due no later than 10:15 A.M. on Tuesday, November 23, 2021. Bidders must submit two (2) proposal copies and a copy saved on a flash drive in a sealed envelope labeled:

INDIVIDUAL DEVELOPMENT ACCOUNT RFP
Licking County Commissioners' Office
c/o Clerk Bev Adzic
20 South 2nd Street, 4th Floor
Newark, Ohio 43055

Proposals received after this time will not be considered. Unsolicited materials received after the deadline date will not be added to previous submissions and will not be considered.

Faxed or emailed proposals will not be accepted.

Proposals must be **received** by the Commissioners' Office by the date/time listed above.

A bidders' conference will take place at OhioMeansJobs | Licking County, 998 East Main Street, Newark, at 3:00 P.M. on November 8, 2021. Virtual attendance will be available via Teams, please send an e-mail to Kari.Matheny@jfs.ohio.gov to obtain the virtual meeting link. Attendance, while not required, is recommended should you have questions related to the RFP.

CONTACT INFORMATION

Questions concerning this RFP may be directed to:

Kari Matheny, Program Specialist
Licking County Job & Family Services
Kari.Matheny@jfs.ohio.gov
740.670.8726

**ATTACHMENT 1
Budget Template**

Summary Sheet	
Provider Name & Program	
Budget Time Period	
Date Completed	
	Estimate Amount
I. Staff	
A. Staff Salaries	\$0.00
B. Staff Payroll Related Expenses	\$0.00
TOTAL STAFF COSTS	\$0.00
II. Operations	
A. Travel/Mileage for Staff	\$0.00
B. Consumable Goods	\$0.00
C. Occupancy	\$0.00
D. Indirect Costs	\$0.00
E. Other - Misc	\$0.00
TOTAL OPERATIONAL COSTS	\$0.00
III. Equipment	
A. Equipment Subject to Depreciation	\$0.00
B. Small Equipment Purchases	\$0.00
C. Leased and Rented Equipment	\$0.00
TOTAL EQUIPMENT COSTS	\$0.00
SUBTOTAL OF ALL COSTS (TOTAL PROJECT COST)	\$0.00
IV. Other Dollars Received	\$0.00
TOTAL PROGRAM COSTS (TOTAL AMOUNT REQUESTED FROM LCJFS)	\$0.00

STAFF

I. A. Staff Salaries

Position Title	Number of Positions Required	Annual Salary	Percent of Time to Program	Reimbursable Salary
Total Staff				\$0.00
Staff Equivalent				
Total Reimbursable Salaries				\$0.00

I. Staff Payroll Related Expenses

Item	Payroll Related Expenses
Retirement	\$0.00
Worker's Comp	\$0.00
Social Security	\$0.00
Medicare	\$0.00
Total Payroll Related Expenses	\$0.00

II. A Travel and Short-Term Training	
Mileage Reimbursement (___ per mile)	\$0.00
Other (identify)	\$0.00
Other (identify)	\$0.00
TOTAL TRAVEL AND TRAINING	\$0.00

II. B. Consumable Supplies	
Office Supplies	\$0.00
Cleaning Supplies	\$0.00
Other (identify)	\$0.00
TOTAL CONSUMABLE SUPPLIES	\$0.00

II. C. Occupancy Costs	
Rental @ \$ ___ per square foot	\$0.00
Usage allowance/depreciation @ ___% rate of original acquisition costs of \$ ___ by Program Square Footage Percentage (Program Square Footage ___ divided by Provider Square Footage ___ = ___%)	\$0.00
Maintenance and Repairs	\$0.00

Utilities, if not included in rent	\$0.00
Heat and Light	\$0.00
Telephone/Internet	\$0.00
Water	\$0.00
TOTAL OCCUPANCY COSTS	\$0.00

II. D. Indirect Costs	
Categories Identified in Cost Allocation plan	
The following are listed as a % of the total to relate to the Cost Allocation Plan	
Total Percent _____	
<i>If not included elsewhere in budget</i>	
Other (identify)	\$0.00
TOTAL INDIRECT COSTS	\$0.00

II. E. Other/Misc.	
Identify Misc Costs & provide detail	
TOTAL CONSUMABLE SUPPLIES	\$0.00

ATTACHMENT 2 Expense Report

Monthly Expense Report			
Date completed:	Completed by:	Agency Name:	
Contract #:	Service Type:	Program Name:	
Expense Month/Year Reported:			
EXPENSES BY PROGRAM SERVICES	YEARLY PROGRAM BUDGET	MONTHLY ACTUAL EXPENSES	CONTRACT YTD ACTUAL EXPENSES
STAFF SALARIES			
PARTICIPANT PAYROLL EXPENSE			
STAFF PAYROLL EXPENSE			
TRAVEL AND SHORT TERM TRAINING			
CONSUMABLE GOODS			
OTHER-MISC			
SUB-TOTAL OF EACH COLUMN			
OTHER DOLLARS RECEIVED			
TOTAL PROGRAM EXPENSE			
COMPLETE EACH ITEM BELOW FOR THE MONTH REPORTED AND THE YEAR-TO-DATE DATA			
ANALYTICS WILL BE ADDED DURING CONTRACT NEGOTIATIONS			
5. Was new program funding received during this service month? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>			

Example only, may be customized based on specifics of each agreement

**ATTACHMENT 3
PROPOSAL RATING & EVALUATION RUBRIC**

PROPOSAL CONTENT	PROVIDER RESPONSE	SCORE
Provider has experience providing individual development accounts	0 - not addressed 1 - limited experience 2 - moderate experience 3 - very experienced	
Provider can train or facilitate training for individual development accounts	0 - not addressed 1 - provider unable to facilitate training 3 - provider will provide adequate training	
Provider has experience coordinating services with other organizations, such as other county agencies	0 - not addressed 1 - provider has minimal experience coordinating services 2 - provider has adequate experience coordinating services 3 - provider is very experienced coordinating services	
Provider offers flexible hours of services, including evenings and weekends	0 - not addressed 1 - provider unable to offer flexible hours 3 - provider hours are flexible	
Provider's staff are willing work in a variety of settings, to meet the needs of customers	0 - not addressed 1 - minimally addressed 2 - adequately addressed 3 - well planned and thought out	
Budget request appears reasonable and consistent with market expectations	0 - not addressed 1 - minimally addressed 2 - adequately addressed 3 - well planned and thought out	
Proposal meets all requirements established in RFP	0 - not addressed 1 - minimally addressed 2 - adequately addressed 3 - well planned and thought out	
	TOTAL – out of 21 possible	
COMMENTS:		