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|  | **Exhibit D****CSOC Post-Award Documents****Required to be Submitted for Contract Formation****if the Response to the OOH RFP Results in an Award** | Rev. 9-24-19 |
|  | ▶ |  **contract documents to be submitted after award with the initial contract:** |
| 1 | [ ]  | **Annex A** (Include: Summary, Agency Documents 1.1, 1.2, 1.3 & Program Component Documents 2.1, 2.2, 2.3, 2.4 & 2.5) -or- other **CSOC Approved Form** (signed/dated)Annex A: <https://www.nj.gov/dcf/providers/contracting/forms>CSOC Form: Provided by contract administrator if applicable (e.g. OOH Annex A Attestation, PSSR, Program Summary Form, Agency Data Sheet, Program Component Form) |
| 2 | [ ]  | **Annex A Addendum** (for each program component) - submitted online in CYBER (signed/dated)  |
| 3 | [ ]  | For Programs that Submitted a Proposed Annex B in Response to the RFP:  **Updated Annex B** **Budget Form** (signed/dated) Annex B: <https://www.nj.gov/dcf/documents/contract/forms/AnnexB.xls>Note: Expense Summary Form is auto populated. Begin data input on Personnel Detail Tab. |
| 4 | [ ]  | For Fee for Service Contracts [other than those formed by an RFQ] **Annex B-2** (DCF.CRM 5.2 and 5.3)CSOC Form: Provided by contract administrator if applicable  |
| 5 | [ ]  | For Cost Reimbursement Contract Components Including Startup: **Schedule of Estimated****Claims** (SEC) (signed/dated)CSOC Form: Provided by contract administrator, if applicable |
| 6 | [ ]  | **Acknowledgement of Receipt** of NJ State Policy & Procedures returned to the DCF Office of EEO/AA (signed/dated) Form: <https://www.nj.gov/dcf/documents/contract/forms/DiscriminationAcknowReceipt.pdf> Policy: <https://www.nj.gov/dcf/documents/contract/forms/AntiDiscriminationPolicy.pdf> |
| 7 | [ ]  | **Chapter 271/Vendor Certification and Political Contribution Disclosure Form** (signed/dated) [Rev 7/10/17]Website: <https://www.nj.gov/treasury/purchase/forms.shtml>Form: <https://www.nj.gov/treasury/purchase/forms/CertandDisc2706.pdf> |
| 8 | [ ]  | For Each Site Hosting Youth: **Current or Continued Certificate of Occupancy** If not applicable, include a signed/dated note, on agency letterhead, stating you do not host youth onsite and a certificate of occupancy is not required.  |
| 9 | [ ]  | For Each Site Hosting Youth: Copy of **Lease, Mortgage** or **Deed** If not applicable, include a signed/dated note, on agency letterhead, stating you do not host youth onsite and a lease, mortgage or deed is not required.  |
| 10 | [ ]  | Document showing **NJSTART** Vendor ID Number (NJ’s eProcurement system) Website: <https://www.njstart.gov/> Help Desk: Call 609-341-3500 -or- Email njstart@treas.nj.gov |
| 11 | [ ]  | For Medicaid Paid Programs: **Medicaid Provider Enrollment Application** (signed/dated) Form: Provided by CSOC, if applicable |
| 12 | [ ]  | For Programs that Submitted a Proposed Program Staffing Summary Report (PSSR) in Response to the RFP: **Updated PSSR Form** Form: ProgramStaffingSummaryReport.xlsmWebsite: <https://nj.gov/dcf/providers/contracting/forms/csoc.html> |
|  | ▶ |  **contract documents to be submitted after award & annually updated thereafter:** |
| 13 | [ ]  | **Annual Report to Secretary of State** Website: <https://www.njportal.com/dor/annualreports> |
| 14 | [ ]  | **Employee Fidelity Bond** Certificate (commercial blanket bond for crime/theft/dishonest acts)Refer to policy for Minimum Standards for Insurance: <https://www.nj.gov/dcf/documents/contract/manuals/CPIM_p8_insurance.pdf>Bond must be at least 15% of the full dollar amount of all State of NJ contracts for the current year when the combined dollar amount exceeds $50,000. If not applicable, include a signed/dated note, on agency letterhead, stating the bond certificate is not required as your agency will not exceed $50,000 in combined State of NJ contracts for the current year. Note: The $50,000 threshold includes fee-for-service reimbursements made via Medicaid.   |
| 15 | [ ]  | **Equipment Inventory** for items purchased with DCF Funds If not applicable, include a signed/dated note, on agency letterhead, stating you will not purchase any equipment with DCF funds and the requirement is not applicable. Policy: <https://www.nj.gov/dcf/documents/contract/manuals/CPIM_p4_equipment.pdf> |
| 16 | [ ]  | For Each Site Hosting Youth: Current **Health/Fire Certificates**  If not applicable, include a signed/dated note, on agency letterhead, stating you do not host youth onsite and a health/fire certificate is not required.  |
| 17 | [ ]  | **Liability Insurance** (Declaration Page/Malpractice Insurance) Note: Policy must show two items…1. List DCF as the certificate holder - NJDCF, 50 East State St, Floor 3, POB 717, Trenton, NJ 08625 2. Contain language stating DCF is an additional insuredRefer to policy for Minimum Standards for Insurance: <https://www.nj.gov/dcf/documents/contract/manuals/CPIM_p8_insurance.pdf> |
| 18 | [ ]  | **DCF Notification of Licensed Public Accountant** **Form** (NLPA) [Rev. 7-15-19] -**and**- copy of **Non-Expired** **Accountant’s Certification** [Ensure DCF form is used and 2 signatures are provided]Form: <https://www.nj.gov/dcf/providers/contracting/forms/NLPA.docx>Not required for agencies expending under $100,000 in combined federal/state awards or contracts. If not applicable, submit a signed/dated note, on agency letterhead, stating the NLPA form and accountant’s certificate are not required as you will not exceed $100,000 in combined federal/state awards or contracts. Note: The $100,000 threshold includes fee-for-service reimbursements made via Medicaid. Also, the NLPA is a State of NJ form and need only list federal/state funds received via contracts with the State of NJ.  |
| 19 | [ ]  | For Each Site Hosting Youth: Current **DCF Office of Licensing (OOL) Certificate** If not applicable, include a signed/dated note, on agency letterhead, stating you do not provide services to youth onsite and an OOL certificate is not required. Website: <https://www.nj.gov/dcf/about/divisions/ol/> |
| 20 | [ ]  | Most recent **Audit -or- Financial Statement** (certified by accountant or accounting firm) Audit: For agencies expending over $100,000 in combined federal/state awards/contracts -or-Financial Statement: For agencies expending under $100,000 Policy: <https://www.state.nj.us/dcf/policy_manuals/CON-I-A-7-7.06.2007_issuance.shtml>[Policy Rev. 7/15/19] |
| 21 | [ ]  | For Cost Reimbursement Contract Components Including Startup: **Report of Expenditures** (ROE) Annex B Interim (15 days of end of 6th month) -and- Final (9 months after end of fiscal year)Form: <https://nj.gov/dcf/providers/contracting/forms/>Submit To: ChildrensSystemofCare.BusinessOffice@dcf.state.nj.us  |
| 22 | [ ]  | For Each Site Hosting Youth - Copy of **Accreditation** {Joint Commission, COA, CARF} as applicable (required annually and as amended). If not applicable, include a signed/dated written statement on agency letterhead stating you do not host youth onsite and the accreditation requirement is not applicable.  |
|  | ▶ |  **contract documents to be maintained onsite by provider:** |
| 23 | [ ]  | **Agency Organizational Chart** |
| 24 | [ ]  | Copy of Most Recently Approved **Board Minutes** |
| 25 | [ ]  | **Personnel Manual** and **Employee Handbook** (include staff job descriptions) |
| 26 | [ ]  | **Affirmative Action Policy/Plan** |
| 27 | [ ]  | **Conflict of Interest Policy** and **Attestation** <https://www.nj.gov/dcf/documents/contract/manuals/CPIM_p8_conflict.pdf> |
| 28 | [ ]  | **Procurement Policy** <https://www.nj.gov/dcf/documents/contract/manuals/CRM2.pdf> |