

**RFP-23-74149**  
**ATTESTATION FORM**  
**ATTACHMENT I**

**Respondent Name:**

**Imagine SLP Consultants LLC**

**1.0 Mandatory Submissions and Requirements:** Disagreement with these items may result in the response being disqualified.

Attachment I: Attestation Form	<input checked="" type="checkbox"/> Have completed in its entirety and submitted
Section 1.10 Pricing	<input checked="" type="checkbox"/> Have read and meet this requirement
Section 2.3.6 Mandatory Contract Terms/Clauses	<input checked="" type="checkbox"/> Have read and understand this section
Section 3.2 Executive Summary	<input checked="" type="checkbox"/> Have completed, signed, and submitted
Section 3.2 Attachment A: Minority and Women Business Enterprise form, IDOA provided certification letter and Subcontractor's signed letter on company letterhead.	<input type="checkbox"/> Have completed, signed, and submitted or <input checked="" type="checkbox"/> Opting not to submit
Section 3.2 Attachment A1: Indiana Veteran Owned Small Business form IDOA provided certification letter and Subcontractor's signed letter on company letterhead.	<input type="checkbox"/> Have completed, signed, and submitted or <input checked="" type="checkbox"/> Opting not to submit
Section 3.2 Attachment C: Indiana Economic Impact	<input checked="" type="checkbox"/> Have read, completed, and submitted
Section 3.2 Attachment D: Cost Proposal (Excel Workbook)	<input checked="" type="checkbox"/> Have completed and submitted
Section 3.2 Attachment E: Business Proposal	<input checked="" type="checkbox"/> Have completed and submitted
Section 3.2 Attachment F: Technical Proposal	<input checked="" type="checkbox"/> Have completed and submitted

**2.0 Confirm mutual understanding and submission.**

2.3.6 Contract Terms/Clauses	<input checked="" type="checkbox"/> Confirm Respondent's Legal Representation has read and accepts Sample Contract language. or <input type="checkbox"/> Confirm Respondent's Legal Representation has read, and submitted alternative language per Attachment E.
1.15 and 2.1 Confidential Information: The complete list of Confidential and Redacted files is specified in section 4.0 of this attachment.	<input type="checkbox"/> Have read, and submitted or <input checked="" type="checkbox"/> Have read, and does not apply to response

2.2.1 Agreement with Requirements listed in Section One of RFP	<input checked="" type="checkbox"/> Have read, and agree
2.2.2 Ability and Desire to Supply the Required Products or Services	<input checked="" type="checkbox"/> Have read, and agree
2.3.10 Subcontractors (Additional subcontractors/those not submitted in Attachment A/Attachment A1)	<input checked="" type="checkbox"/> Have read, agree, listed subcontractors in 5.0 of this attachment and submitted documents or <input type="checkbox"/> Have read, and does not apply to response

### 3.0 Claim clarification

2.7 Buy Indiana Initiative/Indiana Company	<input checked="" type="checkbox"/> YES claiming (points only awarded if finalized per Buy Indiana registry) or <input type="checkbox"/> NO, not claiming
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### 4.0 Confidential / Redacted File: confirm submission if applicable

More rows may be inserted if necessary

Responses must include the following required information:

- List all documents or sections of documents, for which statutory exemption to APRA;
- Specify which statutory exception of APRA applies for each document or section of the document;
- Provide a description explaining how the statutory exception to the APRA applies for each document or section of the document; and
- Provide a separate redacted or confidential, whichever is applicable, version of the document. File name should use the following format:
  - (insert rfp #)\_(insert Att letter)\_CONFIDENTIAL
  - (insert rfp #)\_(insert Att letter)\_REDACTED
- More rows may be inserted if necessary

Filename	Document Section	Document Page #	Statutory exception reference	Rationale for application of the statute	Submitted
N/A					<input type="checkbox"/>

**5.0 Subcontractors per RFP 2.3.10** (additional subcontractors/those not submitted in Attachment A/Attachment A1)

More rows may be inserted if necessary

Subcontractor Name	Function to be performed	Document Submitted
<p>Tiffany Schutt, M.A., CCC-SLP            TLS LLC            5273 Chickasaw Ct            Carmel, IN 46033</p>	<p>Will perform medical chart review in accordance with the guidelines set forth in the Technical Proposal of RFP 23-74149. This includes chart review and disability determination for speech and language disabilities, required training, providing training and consultation to adjudicative staff as needed relative to speech and language disabilities.</p> <p>Tiffany Schutt, M.A., CCC-SLP has 19 years of experience as a speech-language pathologist in the schools, skilled nursing facilities, home health and teletherapy. She has provided medical chart reviews as a subcontractor with Imagine SLP Consultants LLC since August 2019. She has maintained an overall quality rating of better than 95%. She is committed to review a minimum of 5 cases per week at the rate of \$21.00 per case, increasing cases as needed to clear the SLP queue.</p> <p>Ms. Schutt has never had a malpractice suit filed against her while engaging in the practice of speech-language pathology in Indiana or any other state.</p> <p>Ms. Schutt understands that more than 99% of disability cases are currently reviewed on the computer. She is familiar with SSA computer applications and is</p>	<p><input type="checkbox"/> Executed contract            or  <input checked="" type="checkbox"/> Letter of Agreement  <b>Attachment I-4</b>            Amendment to LOA  <b>Attachment I-5</b></p>

	<p>proficient in computer applications. She stays current with changes with systems used by SSA.</p> <p>Ms. Schutt is an individual independent contractor whose LLC was formed solely for the purpose of providing services to Imagine SLP Consultants LLC for disability case review. Ms. Schutt's business has not applied for Women's Business Enterprise and does not qualify for Minority Business Enterprise or Veteran Owned Small Business</p> <p><b>See attachment I-2 for Ms. Schutt's Licensure and Certification documentation</b></p> <p><b>See attachment I-3 for Ms. Schutt's Curriculum Vitae</b></p>	
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## 6.0 Respondent additional attachments (OPTIONAL)

More rows may be inserted if necessary

Filename	RFP Attachment Reference
Cost Proposal Narrative	Attachment D-1
Cost Assumptions, Conditions and Constraints	Attachment D-2
Financial report 2020	Attachment E-1
Financial report 2021	Attachment E-2
Authorizing Letter	Attachment E-3
License Hoke	Attachment F-1
License Thomas	Attachment F-2
Curriculum Vitae Hoke	Attachment F-3
Curriculum Vitae Thomas	Attachment F-4
Buy Indiana Certification	Attachment I-1 (sent with submission form)
License/Certification Schutt	Attachment I-2 (sent with submission form)
Curriculum Vitae Schutt	Attachment I-3 (sent with submission form)
Letter of Agreement Schutt	Attachment I-4 (sent with submission form)
Amendment to LOA Schutt	Attachment I-5 (sent with submission form)