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STATE OF NEVADA
Silver State Health Insurance Exchange

SFY 2019
REQUEST FOR APPLICATIONS AND INSTRUCTIONS FOR GRANTS FOR NAVIGATOR AND IN PERSON ASSISTER (IPA) ENTITIES

NOTE: This application is also available at ***nevadahealthlink.com/sshix/bidding-opportunities***

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BACKGROUND

In June 2011, Senate Bill 440 (2011) was enacted, creating the Silver State Health Insurance Exchange, in response to the requirements of the Patient Protection and Affordable Care Act (ACA). A health insurance exchange is an on-line market place in which individuals can shop, compare and enroll in health insurance coverage. The Exchange has been operational to consumers since October 1, 2013 facilitating the purchase of subsidized health insurance for Nevadans and has been self-sustaining beginning January 1, 2015.

The ACA requires the Exchange establish a Navigator program to[1]:

a. Conduct public education activities to raise awareness of the availability of qualified health plans;
b. Distribute fair and impartial information concerning enrollment in qualified health plans, and the availability of premium tax credits and cost-sharing reductions;
c. Facilitate enrollment in qualified health plans;
d. Provide referrals to any applicable office of health insurance consumer assistance, health insurance ombudsman or any other appropriate State agency, for any enrollee with a grievance, complaint, or question regarding their health plan, coverage, or a determination under such plan or coverage; and
e. Provide referrals to IRS, licensed tax advisors, tax preparers, or other resources for assistance with tax preparation and tax advice related consumer questions.
f. Provide information in a manner that is culturally and linguistically appropriate to the needs of the population being served by the Exchange.

Section 1311(i) of the ACA also allows licensed insurance agents and brokers to be Navigators[2]. However, Navigators shall not "receive any consideration directly or indirectly from any health insurance issuer in connection with the enrollment of any qualified individuals or employees of a qualified employer in a qualified health plan[3]." Therefore, if a Producer chooses to be a Navigator, the Producer can no longer be paid by insurers.

In April 2016, the Exchange developed a separate outreach program delivering consumer assistance from EEFs as per 45 CFR 155.205 (d) for this program EEF's will be referred to as In Person Assisters (IPA). IPA and Navigator entities will collaborate on educational, outreach and enrollment efforts. The Exchange is tailoring its approach by establishing different levels of assistance or targeting assistance in different ways.

In-Person Assistance Program

• The Exchange has established an In person Assistance program and has a process in place to operate the program consistent with the applicable requirements of 45 CFR 155.205(c), (d), and (e).

[1] ACA Section 1311(i)(3) codified as 42 USC § 18031(i)(3) – Navigators; Duties
[2] ACA Section 1311(i)(2)(B) codified as 42 USC § 18031(i)(2)(B) Navigators; Eligibility; Types
[3] ACA Section 1311(i)(4)(A)(ii) codified as 42 USC § 18031(i)(4)(A)(ii) Navigators; Standards

• CFR 45 §155.205 (c) Accessibility. Information must be provided to applicants and enrollees in plain language and in a manner that is accessible and timely to:

- (1) Individuals living with disabilities including accessible Web sites and the provision of auxiliary aids and services at no cost to the individual in accordance with the Americans with Disabilities Act and section 504 of the Rehabilitation Act.
- (2) Individuals who are limited English proficient through the provision of language services at no cost to the individual, including
  - (i) Oral interpretation;
  - (ii) Written translations; and
  - (iii) Taglines in non-English languages indicating the availability of language services.
- (3) Inform individuals of the availability of the services described in paragraphs (c) (1) and (2) of this section and how to access such services.
- (d) Consumer assistance. The Exchange must have a consumer assistance function that meets the standards in paragraph (c) of this section, including the Navigator program described in § 155.210, and must refer consumers to consumer assistance programs in the State when available and appropriate.
- (e) Outreach and education. The Exchange must conduct outreach and education activities that meet the standards in paragraph (c) of this section to educate consumers about the Exchange and insurance affordability programs to encourage participation.

Both Navigators and IPAs are aimed at outreach to uninsured and hard-to-reach populations. IPA's and Navigators will offer services and will perform these duties with a range of staff. The same scope of duties such as training standards, conflict of interest standards and privacy and security standards will apply to both Navigators and IPA's.

NAVIGATORS

The Exchange must have consumer assistance functions, including a Navigator program, and must refer consumers to consumer assistance programs in the State when available and appropriate[4]. Section 1311(i)(3) of the ACA states Navigators will "facilitate enrollment in qualified health plans" offered by the Exchange and "provide information in a manner that is culturally and linguistically appropriate to the needs of the population being served by the Exchange". Navigators in the Exchange will complement the services provided by Producers by facilitating the enrollment of non-traditional populations that typically do not purchase insurance. These groups include people who are eligible for publicly funded health care (CHIP and Medicaid) and those individuals who do not have the means or ability to travel to a producer (Native Americans living on reservations, rural ranchers, farmers and persons with disabilities). Navigator entities and their Navigator Exchange Enrollment Facilitators will serve an important role in educating and enrolling individuals and groups that typically will not enroll unless called upon.

[4] 45 CFR § 155.205(d)

EXCHANGE ENROLLMENT FACILITATOR CERTIFICATION

Per NRS 695J, individuals who enroll qualified individuals, qualified employers and their employees in a QHP in the Exchange and who do not hold a Producer license with the Nevada Division of Insurance (DOI) must hold an Exchange Enrollment Facilitator (EEF) Certification issued by the DOI. This requirement applies to persons employed by or volunteering for Navigators and IPAs. The EEF training and testing requirements are approved by the DOI in partnership with the Exchange.

EEF training consists of an initial training course that will include topics relating to the Exchange and health coverage provided as a result of the ACA, including but not limited to:

- Eligibility requirements
- Coverage available under the ACA
- Qualified Health Plans (actuarial values, co-insurance, co-pays, deductibles)
- Advanced Premium Tax Credits and Cost Sharing Reductions
- Publically funded health care (CHIP, Medicaid)
- Means of appeal and dispute resolution
- Conflict of interest and impartiality
- Exchange privacy policies and requirements
- Use of web portal

A certification test will be administered at the end of the course to demonstrate what knowledge the attendee has retained.

Listed below are the requirements to acquire an EEF Certification License per the DOI as of April 2017.

1. ***Fingerprinting/Background Check: $52.50 (or costs assigned by law enforcement agency)***
2. ***Pre-certification Training: $149.95***
3. ***Certification Exam (Pearson VUE): $55***
4. ***Certification Application with DOI: $185.00 + SIRCON Website fees***
5. ***TOTAL ANTICIPATED COSTS: $442.45 + SIRCON Website fees***

Additionally, Navigators and IPAs will be required to take and pass CMS training on the CMS.gov web portal to receive appointment by the Exchange. The training is approximately 20 hours long, and successful completion finalizes the process for Navigator and IPAs to assist Nevadans enroll in health insurance on the Healthcare.gov platform.

Navigator and IPAs will be required to attend annual continuing education. Continuing education will consist of topics covered in the initial training period and updates on any new or changed regulations. This includes training on ethics. Navigator and IPA EEFs must attend these courses and complete annual re-certification tests to maintain their active Navigator and IPA EEF status.

SILVER STATE HEALTH INSURANCE EXCHANGE NAVIGATORS DEFINED

Navigators will consist of public and private entities ("Navigator entities") that will communicate with, educate and enroll qualified individuals and employers in Qualified Health Plans (QHPs) and publicly funded health care through the multiple enrollment methods provided by the Exchange. Navigator, IPA entities and Producers will work in concert to ensure all individuals have access to health insurance coverage provided as a result of the Affordable Care Act (ACA).

The Exchange will only offer Navigator funds to a community and consumer-focused nonprofit group and an entity from at least one of the following categories:[5]

- Trade, industry and professional associations;
- Commercial fishing industry organizations, ranching and farming organizations;
- Chambers of commerce;
- Unions;
- Resource partners of the Small Business Administration;
- Licensed agents and brokers; or
- Other public or private entities or individuals that may include but are not limited to Native American tribes, tribal organizations, urban Indian organizations, and State or local human service agencies.

The above entities will receive the Navigator entity designation if they successfully:

- Submit an approved Navigator grant application;
- Have employees or associated volunteers who have an EEF Certification issued by the (DOI);
- Complete CMS training
- Receive approval from the Exchange

Navigator entities must not be:[6]

- A health insurance issuer or issuer of stop loss insurance
- A subsidiary of a health insurance issuer or issuer of stop loss insurance
- An association that includes members of, or lobbies on behalf of, the insurance industry;
- An entity or individual that receives any consideration directly or indirectly from any health insurance issuer or issuer of stop loss insurance in connection with the enrollment of any individuals or employees in a QHP or a non QHP. Provider organizations that are owned by an insurance issuer may not be Navigators, pursuant to 45 CFR 155.210(d) (2).

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[5] 45 CFR § 155.210(c)(2)
[6] 45 CFR 155.210(d)

ROLES AND RESPONSIBILITIES OF NAVIGATOR ENTITIES

Navigator entities must provide Navigator EEFs who will be responsible for outreach, education and enrollment for the currently uninsured or underinsured populations and will present to those populations the options available under the ACA. Navigator and IPA's cannot charge any applicant or enrollee, or request or receive any form of remuneration from or on behalf of an individual applicant or enrollee, for application or other assistance related to Navigator or IPA duties. Provide to an applicant or potential enrollee gifts of any value as an inducement for enrollment. The value of gifts provided to applicants and potential enrollees for purposes other than as an inducement for enrollment must not exceed nominal value ($15.00), either individually or in the aggregate, when provided to that individual during a single encounter. Navigators and IPAs will work in concert with the Marketing and Outreach vendor. This outreach and education will include information regarding the ACA as it relates to the Exchange including but not limited to:

- Attending mandatory meetings and staffing events sponsored by the Exchange and or Marketing/Outreach Vendor;
- Leveraging online channels and social media to support reaching targeted populations;
- Program Eligibility- Rules to purchase subsidized insurance through the Exchange and eligibility for Medicaid, CHIP, Medicare or other programs;[7]
- Methods of Purchase- Different means available to purchase and enroll in a QHP: Exchange web portal, Exchange call-in center, walk-in centers, kiosks located in community service centers and state agencies, mail in applications and fax applications;
- Reasons to Purchase- Education on the benefits of health insurance and what health insurance provides for individuals and employers;
- Definitions of health insurance terms- For example, aiding the consumer to understand the difference between a premium, deductible and co-insurance;
- Dispute Resolution- Providing information to the consumer to find avenues to resolve disputes with carriers, such as directing them to the DOI and the Department of Health and Human Services Consumer Health Assistance Unit (formerly GovCHA), and referring enrollment disputes to the Exchange;[8]
- Cultural Diversity- Providing culturally and linguistically appropriate health insurance education to Hispanics, Asians, Native Americans, those with disabilities and other groups;[9]
- Group Outreach Opportunities- Outreach to consumers typically in group settings, focusing on broad topics related to health insurance and coverage options.
- Channels and venues in which outreach and education activities will be delivered include where the target populations live, work, go to school, play and shop. In order to perform the public outreach and education activities under this Grant Program, Applicants must consider using the following delivery channels:
    - Partnering with community/local officials and/or leaders;

[7] 45 CFR 155.210(e)(1)
[8] 45 CFR 155.210(e)(4)
[9] 45 CFR 155.210(e)(5)

- Partnering with other community-based organizations and/or community groups, including community businesses who serve the target populations and who are not recipients of grant funding. Some examples of community businesses include local/ethnic supermarkets, health and fitness clubs, and service clubs (e.g., Kiwanis, Elks, Lions, etc.);
- Using a community organizing or canvassing approach (including Promotoras models and door-to-door outreach in targeted neighborhoods);
- Attending and/or presenting at ethnic media events;
- Attending and/or presenting at community events (including health fairs, festivals, popular sports events etc.) using Project Sponsor-approved messages and information;
- Leveraging existing intake processes where a service/product is already provided to deliver outreach and education messages;
- Making presentations to existing groups, classes, meetings, workshops, or professional conferences where the target populations are known to frequent;
- Distributing brochures, flyers and collateral materials to target populations likely to be eligible;
- Facilitating outreach with local chambers of commerce, industry and professional associations, and other employer-based organizations educating small businesses about purchasing coverage through Nevada's Exchange;
- Advertise Nevada Health Link outreach/enrollment events and marketing brand;
- Furnish staff for Enrollment Stores during Open Enrollment Periods if applicable
- Access to enrollment localities- Provide access to locations or mobile computing centers that will facilitate access to the Exchange's web portal, call center, or FAX line or provide the ability to print and mail hard copies of enrollment documents to Healthcare.gov;
- Answers to enrollment questions- Address questions regarding access to any of the enrollment methods and the submission of enrollment documentation to the Exchange;
- Explain eligibility criteria- Explain the eligibility criteria for purchasing insurance through the Exchange, enrolling in Medicaid and other State programs designed to provide medical coverage;
- Provide documentation- Provide the consumer with documentation regarding the available plans, enrollment letters stating the date coverage will start, etc.; and
- Furnish unbiased explanations of coverage provided on the web portal- Navigator EEFs must not offer any opinion or editorial on the QHPs in the Exchange. Navigator entities must ensure that information provided by their Navigator EEFs is limited to that information available on the web portal.

ROLES AND RESPONSIBLITIES OF IPA

- IPA's have the same roles and responsibilities as Navigators. The IPA's primary focus will be on consumer assistance, outreach, education and enrollment into under reached populations, which include, but are not limited to Hispanic, rural, self-employed, Tribal, and young millennials.

NAVIGATOR AND IPA ENTITY REQUIREMENTS

Potential Navigator and IPA entities will submit applications requesting consideration as a Navigator and/or IPA entity. The application must[10]:

- Demonstrate to the Exchange that the entity has existing relationships, or could readily establish relationships, with employers and employees, consumers (including uninsured and underinsured consumers), or self-employed individuals likely to be eligible for enrollment in a QHP;
- Demonstrate willingness to meet the standards prescribed by the Exchange;
- Show that the Navigator and/or IPA entity has or will have prior to the commencement of Navigator and/or IPA operations employees or associated volunteers who have an EEF Certification issued by the DOI. If the Navigator and/or IPA ceases to have an EEF certified individual on staff, all Navigator and/or IPA operations and funding must cease;
- Acknowledge that the entity and staff will not have a conflict of interest during its term as a Navigator and/or IPA entity, and if a conflict of interest occurs (including receipt of payment or other consideration from health insurance issuer in connection with enrollment of individuals or groups), the Navigator and/or IPA entity will notify the Exchange immediately and may be required to pay back Navigator and/or IPA grant funds to the Exchange;
- Accept the requirement that the Navigator and/or IPA entity will be an independent contractor and its employees or volunteers will not be in joint employment of the Exchange, as follows:
    - Navigator or IPA entity is associated with the State only for the purposes and to the extent specified in this Sub-award, and in respect to performance of the contracted services pursuant to this Sub-award, Navigator or IPA entity is and shall be an independent contractor and, subject only to the terms of this Sub-award, shall have the sole right to supervise, manage, operate, control, and direct performance of the details incident to its duties under this Sub-award. Nothing contained in this Sub-award shall be deemed or construed to create a partnership or joint venture, to create relationships of an employer-employee or principal-agent, or to otherwise create any liability for the State whatsoever with respect to the indebtedness, liabilities, and obligations of Navigator or IPA entity or any other party. If notwithstanding the foregoing, the State is found to be employer of the employees or volunteers Navigator or IPA entity, between themselves

[10] 45 CFR § 155.210(c)(1)

Navigator or IPA entity shall be solely responsible for, and the State shall have no obligation to Navigator or IPA entity with respect to: (1) withholding of income taxes, FICA or any other taxes or fees; (2) industrial insurance coverage; (3) participation in any group insurance plans available to employees of the State; (4) participation or contributions by either Contractor or the State to the Public Employees Retirement System; (5) accumulation of vacation leave or sick leave; or (6) unemployment compensation coverage provided by the State, and Navigator or IPA entity shall indemnify and hold State harmless from, and defend State against, any and all losses, damages, claims, costs, penalties, liabilities, and expenses arising or incurred because of, incident to, or otherwise with respect to any such taxes or fees. Neither Navigator or IPA entity nor its employees, agents, nor representatives shall be considered employees, agents, or representatives of the State. The State and Navigator or IPA entity shall evaluate the nature of services and the term of the Sub-award negotiated in order to determine "independent contractor" status, and shall monitor the work relationship throughout the term of the Sub-award to ensure that the independent contractor relationship remains as such.

- Acknowledge that a Navigator or IPA entity will, as a precondition for receiving any funds, enter into an independent services contract or Sub-award agreement that, among other things, will set forth terms concerning confidentiality and indemnification obligations and terms for cancelling, terminating or withdrawing the grants, for cause or for unavailability of funding as applicable.
- Demonstrate that the entity has processes in place that comply with the privacy and security standards adopted by the Exchange as required in accordance with § 155.260; and
- Demonstrate how the organization's business model, service area, print, digital, social media and clientele will be leveraged to support the Navigator or IPA mission and show how Navigator or IPA funds will support the Navigator or IPA mission and ancillary functions of the entity.

The Exchange will review the competitive applications and award to qualified Navigator or IPA entities throughout the state of Nevada.

NAVIGATORS, IPAS AND CONFLICTS OF INTEREST

Navigator and IPA entities and their EEFs cannot have conflicts of interest, financial or otherwise, and will need to comply with the Exchange's privacy and security standards. Specifically, Navigator and IPA entities and their EEFs cannot receive any consideration, financial or otherwise, from carriers or consumers.

All Navigator entities, including Navigator and IPA grant applicants, must submit to the Exchange a written attestation that the Navigator, including the Navigator's staff:

(A) Is not a health insurance issuer or issuer of stop loss insurance;
(B) Is not a subsidiary of a health insurance issuer or issuer of stop loss insurance;

(C) Is not an association that includes members of, or lobbies on behalf of, the insurance industry; and
(D) Will not receive any consideration directly or indirectly from any health insurance issuer or issuer of stop loss insurance in connection with the enrollment of any individuals or employees in a QHP or non-QHP.
(E) Any existing employment relationships, or any former employment relationships within the last 5 years, with any health insurance issuers or issuers of stop loss insurance, or subsidiaries of health insurance issuers or issuers of stop loss insurance, including any existing employment relationships between a spouse or domestic partner and any health insurance issuers or issuers of stop loss insurance, or subsidiaries of health insurance issuers or issuers of stop loss insurance; and
(F) Any existing or anticipated financial, business, or contractual relationships with one or more health insurance issuers or issuers of stop loss insurance, or subsidiaries of health insurance issuers or issuers of stop loss insurance.

All Navigator and IPA entities once awarded must submit to the Exchange a written plan to remain free of conflicts of interest during the term as a Navigator or IPA.

Conflict of interest includes, but is not limited to, the following:

- Financial considerations: Navigator and IPA entities shall not receive compensation from funds derived from the enrollment of individuals, families or groups in health insurance plans. This includes but is not limited to:
  - Employees who work for subsidiaries of health insurance Issuers even if that subsidiary does not offer health insurance for purchase.
  - Employees of hospitals that are owned in whole or in part by health insurance Issuers.
  - Lobbyists or employees of entities that lobby for the interests of health insurance Issuers.
- Nonfinancial considerations: Navigator and IPAs entities, and their employees and volunteers shall not receive gifts, rebates, vacations, prizes or any other non-financial consideration from a health insurance Issuer or an employer for the enrollment of an individual, family or group in the Exchange.

Navigator and IPA entities and their EEFs are required to disclose the following information to the Exchange and to consumers seeking assistance:

- The impact of immediate family member’s employment or activities with other potentially conflicted entities, including the employment of a family member by a health insurance Issuer including agents, brokers and producers.
- Existing financial and non-financial relationships with health insurance Issuers including pensions from Issuers, investments in Issuers and receiving funds from Issuers for other activities (health outreach sponsored by Issuers, Public Awareness Campaigns sponsored by Issuers, etc.)

To ensure that the public is protected from possible conflicts of interest in the Exchange, the Exchange will monitor Navigator-based enrollment patterns to make sure that the entities are providing unbiased information to the consumer. If a Navigator or IPA entity or its EEF is found to be steering consumers into a certain plan for the purpose of financial or material gain, the Exchange and/or the Nevada Division of Insurance will inform individuals of the legal and financial recourses for consumers that have been adversely affected by a Navigator and IPA entity or its EEF with a conflict of interest. The Nevada Division of Insurance will investigate and seek all applicable civil and criminal penalties for Navigator and IPA entities or their EEFs that act in a manner inconsistent with the conflict of interest standards set forth by the Exchange.

Due to the above conflict of interest standards, any Producers that are currently licensed and wish to obtain a Navigator or IPA designation must sever all appointments with carriers.

NAVIGATOR, IPA QUALITY STANDARDS

The Exchange will monitor and or will require the Navigator and IPA entities to monitor and summarize for the Exchange available enrollment and/or outreach metrics so the Exchange can provide reasonable future improvements to the system. Navigator and IPA EEFs will enter an Exchange provided ID number into the healthcare.gov web portal when assisting a consumer with enrollment. This code will help Navigator and IPA entities and Exchange staff review enrollment trends and monitor post enrollment surveys. Enrollment trends can be analyzed to determine if certain Navigator or IPA EEFs are steering business in a manner that is statistically significant when compared to other Navigator and IPA EEFs. Post transaction surveys will be available to the consumer so that they may provide feedback on the enrollment experience.

Performance of Navigator and IPA entities will be closely monitored. Navigator and IPA entities must comply with monitoring and evaluation requirements established by the Exchange. This includes, but is not limited to, completing required reports on a monthly basis, as described in the subsequent section, cooperating with all mandated monitoring and evaluation activities, including potential --- site visits by grant monitors, providing requested data to the Exchange in a timely manner, and participating in research projects related to the effectiveness of the Exchange’s statewide campaign. Navigator and IPA entities must submit performance and fiscal reports to the Exchange documenting their progress towards meeting agreed upon enrollment, and outreach goals, deliverables and established program outcomes according to agreed upon timelines. Navigator and IPA entities must maintain comprehensive records of program expenditures and activities throughout the period of the grant and provide them to the Exchange upon request.

At the sole discretion of the Exchange, Navigator and IPAs entities that are not performing their scope of work or meeting pre-established goals and deliverables may be terminated. Navigator and IPA entities may be provided re-training and asked to correct the deficiency within 30 days or risk grant termination. Failure to deliver the agreed upon targets for number of households or small businesses reached with outreach and education messaging may result in a modification to the Grantee’s scope of work and award level.

Navigator and IPA entities must also establish and provide to the Exchange for review an internal system for overseeing and managing program quality, including evaluating the performance of Navigator and IPA EEFs responsible for conducting grant-funded outreach and education activities. This includes verifying that: outreach and education activities are delivered as planned, accurate messages and information are provided to consumers and small businesses, and overall compliance with program standards and guidelines is maintained. Navigator and IPA entities must immediately report instances of non-compliance and specify their plans for corrective action to the Exchange.

The Exchange seeks to use monitoring and evaluation data to learn about what strategies and approaches most effectively increase awareness amongst Nevada's uninsured consumers and small businesses and motivate them to enroll in coverage.

Examples of criteria that could be used to measure Grantee success include:

- The number and percentage of consumers or small businesses enrolled in coverage.
- Number of outreach events attended and how many consumers reached and follow up.
- The number and percentage of consumers reached by Navigator or IPA entities that sign up for the Exchange's email, Facebook or Twitter.
- Consumer or small business satisfaction surveys administered through the Exchange's website or other methods that measure Navigator or IPA entities' ability to provide accurate information and rate overall usefulness.
- Mystery shoppers that rate the Navigator or IPA entities' ability to provide accurate information.

MANAGEMENT OF MATERIALS

The Exchange will provide organizations with Navigator and IPA entities training, standard message points for each phase of the Outreach and Education presentations and collateral materials free of charge. Navigator and IPA entities will be required to order and track collateral materials from the Exchange or their designated entity.

Navigator and IPA entities must utilize approved materials and non-consumables with the Exchange's branding (i.e. tablecloths, banners and signs) when conducting outreach and education activities during the agreement period.

At the end of the grant period, Navigator and IPA entities will be required to return all non-consumables to the Exchange.

ELIGIBLE ENTITIES

Applications will be accepted from applicants who meet the organizational eligibility requirements and minimum qualifications. Applicants should propose to target consumers eligible for affordable health insurance programs through the Exchange and small businesses eligible for SHOP.

The Exchange encourages applications from organizations and entities with established relationships and access to the target uninsured- specifically, the newly eligible for enrollment into the health care programs available through the Exchange, including subsidized and non-subsidized programs for individuals and SHOP for small businesses employing between 1- 50 employees. Only organizations who conduct Navigator and IPAs activities targeting populations who are eligible for programs offered through the Exchange will be considered for grant funding.

The Exchange is seeking applications from a range of entities including but not limited to:

- Community or Consumer-focused non-profit or for profit organization; Consumer Advocacy, community based organization, or faith-based organization
- Trade, industry or professional association, labor union, employment sector, Chamber of Commerce targeting specialty populations
- Commercial fishing industry organization, ranching or farming organization
- Health Care Provider: such as hospital, provider, clinic or county health department
- Community College, University, School, or School Districts
- Native American tribe, tribal organization, or urban Native American organization
- City Government Agency or Other County Agency or State Agency

MINIMUM QUALIFICATIONS

- Prior experience and demonstrated success with providing in-person outreach and education activities that serve similar target populations who will be newly eligible for coverage through the Exchange;
- An established presence and demonstrated trusted source for information to the target populations and communities;
- Established relationships with the target populations (individual consumers or small businesses) and a demonstrated capacity to leverage these existing relationships;
- Knowledge of the cultural, linguistic and other preferences of the target populations and communities that the Applicant proposes to reach through this Grant; prior experience and success developing and implementing outreach and education programs;
https://d1q4hslcl8rmbx.cloudfront.net/assets/uploads/2017/05/Nondiscrimination-and-Accessibility-Requirements-and-Nondiscrimination-Statement.V2.pdf
https://d1q4hslcl8rmbx.cloudfront.net/assets/uploads/2015/09/Navigator-Program-CAC-Plan-08102015.pdf
- Staffing which reflects the cultural and linguistic background(s) of the target uninsured population(s) the Applicant proposes to serve through this Grant;
- Demonstrated ability to deliver cost-effective grant activities which are in line with the purpose of the Grant Program and established goals, objectives and guiding principles;
- Demonstrated management, administrative and fiscal infrastructure to implement a complex, federally funded project as planned;
- Basic knowledge of the Affordable Care Act and the new health care coverage options that will be available to Nevadans;
- Knowledge and experience with measuring the impact and success of outreach and education campaigns; and

- Ability to comply with all applicable federal, state codes rules and regulation.

DESIRED QUALIFICATIONS

- Direct experience in prior projects involving successful outreach, education and enrollment efforts for public and private health insurance programs;
- Direct experience in prior projects that resulted in increased awareness of a new program, a change of attitudes and behaviors, and motivated consumers to act;
- Prior experience and success developing and implementing outreach and education programs for other public or private programs for target populations;
- Direct experience with public information and outreach campaigns tailored to Nevada's diverse populations;
- Knowledge of and experience with conducting outreach and education and enrollment activities to Nevada's diverse populations, with an emphasis on reducing and removing barriers to enrollment;
- Direct experience conducting outreach and education activities to limited English proficient populations whose primary language is Spanish;
- Established relationship with businesses or consumers in employment sectors with high rates of uninsured individuals (e.g., truckers, construction, service, hospitality etc.);
- Knowledge of the barriers that prevent consumers from enrolling in or purchasing health coverage; and/or
- Interest in serving as a Navigator or IPA entity or coordinating with enrollment resources, the Service Center and insurance agents (if proposing to target small businesses).

AVAILABLE FUNDING

Projected available funding for Navigator and IPA grants in SFY19 is not to exceed $3,500 per Navigator or IPA EEF per calendar month. This projection is approximate and is subject to change based on available funding.

The number of Navigator and IPA entities granted by the Exchange may change during open enrollment and non-open enrollment periods. Initial number of Navigator and IPA entities will be determined by the Exchange during grant negotiations.

REQUEST FOR FUNDING

The $3,500.00 per calendar month per Navigator or IPA is inclusive of all costs associated with the Navigator/IPA program. Funding is all inclusive and appropriate, such as but not limited to: worker's compensation insurance, certification training, fringe benefits, payroll, non-employee expenses, travel, continuing education, office supplies, interpreters, oversight and monitoring. For example, when monitoring a Navigator/IPA's duties, and if a Navigator/IPA performs duties not pertaining to the Navigator/IPA program, an entity will need to count that individual as a part-time EEF. For example, if that individual spends 40% of their time on Navigator or IPA duties, the Exchange will only reimburse 40%. In addition, certified EEF's should only be claimed as a Navigator/IPA if they are performing enrollment and/or outreach activities. If the individual only performs enrollment and outreach activities 50% of the time, the Exchange will only reimburse at 50%. Exception: Should a Navigator/IPA be asked to assist with an official outreach, education, and or enrollment event outside their regular and customary work locations, the entity can request a travel reimbursement if travel is more than 58 miles each way, for example, any rural areas outside their regular and customary work locations.

The intent of this funding mechanism is to streamline the reimbursement process. It is not intended to dictate an organization's overhead process.

Grant Period

The grant period for this RFA begins July 1, 2018 and ends June 30, 2019 for State Fiscal Year 2019. Another RFA is anticipated to be issued in May 2019 for a grant period beginning July 1, 2019 and ending June 30, 2020 for State Fiscal Year 2020.

Application and Award process

Applicants must attend the Orientation Session to be conducted in person, via videoconference and via teleconference. Orientation information is provided in the section entitled "Timetable".

Application Questions and Answers

Questions may be submitted via e-mail to dlandersen@exchange.nv.gov through Monday May 21, 2018 and will be posted to the Nevada Healthlink website, with responses, by Thursday May 24, 2018. The Q&A will remain on the website through the end of the application period. In addition, answers to some questions may be available at nevadahealthlink.com.

After Friday May 21, 2018 no substantive questions about the application will be accepted. Technical questions regarding formatting and submission may still be directed to Danielle Andersen via e-mail at dlandersen@exchange.nv.gov or via telephone at (775) 687-9935.

Submission of Applications

Details concerning the submission of applications are outlined in subsequent sections titled Application Instructions, Budget Instructions and Submission Instructions.

Award Process

Proposals will be reviewed in a four-step process:

1. Staff from the Exchange will review proposals to ensure that minimum standards are met. Submissions must include applicant information, an executive summary, answers to all RFA questions, and responses to the Fiscal Management Checklist (Appendix D).

Proposals **will** be disqualified if they are received after the stated deadline and **may** be disqualified if they:

- Are missing any of the required elements;
- Do not conform to standards for page limits, type size, margins and the prohibition on attachments; and/or
- Are submitted by an entity that is financially unstable as evidenced by information gleaned from the Fiscal Management Checklist and accompanying fiscal documents.

2. Proposals that meet minimum standards will be forwarded to the Exchange Application Committee. The Committee will review the proposals for strengths and weaknesses and will score them appropriately.

3. The Exchange Application Committee will review and score the proposals in accordance with the Scoring Matrix in Appendix B.

4. Final funding decisions will be made by the Exchange Application Committee based on the following factors.
   - Reasonable distribution of the recommended grant awards among north, south and rural parts of the state;
   - Conflicts or redundancy with other federal, state or locally funded programs, or supplanting (substitution) of existing funding;
   - Availability of funding.

Exchange staff will conduct negotiations with the applicants selected for funding to address any specific issues identified by the Exchange Application Committee. Adjustment of budget, goals, and grantee classification (Navigator or IPA) may be required at that time.

Not all applicants who submit a qualifying proposal or are contacted for final negotiation will necessarily receive an award. All questions and concerns must be resolved before a grant will be awarded. Upon successful conclusion of negotiations, Exchange staff will complete and distribute to grantees notices of grant award, general conditions, grant assurances and grant instructions.

Funding decisions made by the Exchange Application Committee are final. There is no appeals process.

REIMBURSEMENT METHOD

Payments to applicants whose proposals are funded through a per individual Navigator or IPA EEF basis will be based on a calendar monthly reimbursement of actual full time EEFs employed. The number of Navigator or IPA EEFs must not be more than the number included on the approved budget, allocable to the grant, and allowable under all applicable statutes, regulations, and policies and procedures including, but not limited to the Grant Instructions and

Requirements (GIRS) issued by the Exchange. *(See "Budget Instructions" on Page 19 for more details.)* Advances of grant funds will not be offered.

REIMBURSEMENT REQUESTS

In order to be reimbursed for their services, Navigator and IPA entities will submit a Request for Funds, Payroll Documentation and Outreach and Enrollment Reports within the first 15 business days but no later than 30 business days of the month for reimbursement of the prior month. Exchange staff will review the documentation and process payment within 30 days: however, the Exchange staff typically processes payment within a week or two of receiving the Request for Funds if there are no errors or questions regarding the request. The Navigator or IPA Entity will be required to become a vendor with the State of Nevada to receive payment.

DOI Licensing requirements must be completed within the same calendar month of being hired to receive compensation for hours worked per certified EEF.

- Certified EEFs should only be claimed as an EEF if they are performing enrollment and/or outreach activities. If the individual only performs enrollment, outreach, and education activities 50% of the time, the Exchange will only reimburse at 50%.

PAYMENTS FOR NAVIGATOR/IPA PENDING LICENSURE

Per NRS 695J.050 "Exchange enrollment facilitator (EEF)" defined. "Exchange enrollment facilitator" means a person certified pursuant to this chapter who is engaged in the business of facilitating enrollment in qualified health plans offered by the Exchange.
(Added to NRS by 2013, 3590)

NRS 695J.280 Engaging in business of an EEF without certificate prohibited; penalty.

1. No person may engage in the business of an EEF unless a certificate has been issued to the person by the Commissioner.
2. A person who violates subsection 1 is subject to an administrative fine of not more than $1,000 for each act or violation. (Added to NRS by 2013, 3596)

Request for funds can be submitted for individuals who have been hired by an In Person Assister (IPA)/Navigator agency and are awaiting Division of Insurance (DOI) certification only in these instances. An individual must complete all of these steps in order to be considered for funds request reimbursement from the Exchange grant award.

Step 1 – Fingerprinting
Step 2 – AD Banker EEF Course completion with certificate
Step 3 – Pearson Vue State exam with original pass results
Step 4 - DOI completed application with submittal of all documents and fee

The four steps can be accomplished within a two week time period or can take up to one month. Should an individual be hired at the beginning of the month they will have until the end of the month to complete steps 1 through 4 and must send the Navigator Program Manager a receipt of the documents.

At this point the individual will be eligible to receive funds from the Exchange grant award for any work related to the Exchange Navigator/IPA program.

If an individual is hired during the course of the calendar month and does not complete the four steps listed above, they will not be eligible to receive Exchange grant funds for that calendar month.

NOTE: Should the DOI certification take longer than 60 days, a meeting will be placed with the employing agency, employee, and the Navigator Program Manager for further evaluation and/or exception. The employee can contact the DOI at any point for further information or instruction regarding the certification process.

An individual can attend outreach, education events solely as training purposes while pending licensure to gain knowledge of the job. The individual may not have any communication with any consumer until fully certified and may not share any personal information heard from consumers.

REPORTING REQUIREMENTS

Navigator and IPA entities must maintain compliance with established reporting requirements. At a minimum, Navigator and IPA entities will be required to submit monthly reports on their activities, progress towards deliverables and program outcomes to the Exchange. If project benchmarks are not met, Navigator and IPA entities may be required to submit additional ad hoc reports upon the Exchange's request. Grantees will also be required to report any proposed adjustments to their approved outreach and education plan.

Monthly Reports: Navigator and IPA entities will be required to report enrollment, outreach and education, and payroll/personnel activities on a monthly basis on a standardized template (Included in Appendix F).

As per CFR 45 **§ 155.1210 Maintenance of Records.**

(a) ***General.*** The State Exchange must maintain and must ensure its contractors, subcontractors, and agents maintain for 10 years, documents and records (whether paper, electronic, or other media) and other evidence of accounting procedures and practices, which are sufficient to do the following:

(1) Accommodate periodic auditing of the State Exchange's financial records; and

(2) Enable HHS or its designee(s) to inspect facilities, or otherwise evaluate the State-Exchange's compliance with Federal standards.

(b) ***Records.*** The State Exchange and its contractors, subcontractors, and agents must ensure that the records specified in paragraph (a) of this section include, at a minimum, the following:

(1) Information concerning management and operation of the State Exchange's financial and other record keeping systems;

(2) Financial statements, including cash flow statements, and accounts receivable and matters pertaining to the costs of operations;

(3) Any financial reports filed with other Federal programs or State authorities;

(4) Data and records relating to the State Exchange's eligibility verifications and determinations, enrollment transactions, appeals, and plan variation certifications; and

(5) Qualified health plan contracting (including benefit review) data and consumer outreach and Navigator grant oversight information.

(c) ***Availability.*** A State Exchange must make all records and must ensure its contractors, subcontractors, and agents must make all records in paragraph (a) of this section available to HHS, the OIG, the Comptroller General, or their designees, upon request.

TIMETABLE

Thursday, May 3, 2018	RFA is published.
Monday, May 21, 2018	Applicant orientation scheduled. Attendance is mandatory.
Tuesday May 22, 2018	Deadline for applicants to submit substantive questions about application to the Exchange by 5 pm.
On or about Thursday, May 24, 2018	Exchange posts final Questions and Answers to website.
Friday, June 1, 2018	Applications are due by 2 pm. Attendance at the May 21 orientation is mandatory for applications to be accepted.
Monday, June 4, 2018 through Friday, June 15, 2018	Applications are reviewed by the Exchange Application Committee and recommendations are provided to the Exchange.
Monday, June 18, 2018 through Friday, June 29, 2018	Negotiations between the Exchange and selected entities occurs and Navigators and In-Person-Assisters are awarded.

The Exchange is not responsible for any costs incurred in the preparation of the proposal. All proposals become the property of the Exchange. The Exchange reserves the right to accept or reject any or all proposals. Navigator and IPA entities awarded funding are those deemed to be in the best interest of the people of the State of Nevada.

Applicants must attend at least one of the following orientation sessions to be conducted in person, via videoconference and via teleconference. Due to limited seating, please RSVP to Melissa Martinez at mmartinez@exchange.nv.gov. Exchange staff will be present in person in Las Vegas and Carson City.

ORIENTATION SESSION

DATE/TIME	LOCATION	VIDEOCONFERENCE	TELECONFERENCE
Monday, May 21, 2018 **10:00am – 12:00pm**	**Exchange Conference Room** 2310 South Carson Street, Ste. 3 Carson City, NV	**Exchange Conference Room** 150 N Stephanie St., Ste. 100 Henderson, NV	**1-877-402-9753** **Access Code:** 2459998

APPLICATION INSTRUCTIONS

NOTE: Failure to follow these instructions may result in disqualification of the application.

General Formatting

- This is a paper application process.
- Applicants must use Appendix C as a template for their proposal. **For the convenience of reviewers, applicants must retain the questions and insert a response after each question.** When multiple questions are listed in a section, applicants should respond to each question separately.
- Applicants **must** provide an answer for each question in each section of the proposal. Failure to do so may result in disqualification. If a question does not apply to your organization or your proposal, you must at least respond "Not applicable."
- There is no specific word limit associated with each question. However, the executive summary should not exceed one page and the complete narrative portion of the application (excluding the applicant information page but including the executive summary) **must not exceed 15 pages**. The amount of space required to retain the questions has already been factored into this page limit and no additional allowances will be made.
- Font must be Times New Roman or Arial in 12 point size. Margins must match that of the template. Responses may be single-spaced, but double-spacing should be used between questions for ease of reading.
- Unsolicited materials will **not** be accepted. This includes support letters, cover pages, cover letters, brochures, newspaper clippings, photographs, media materials, etc.
- Applicants will be asked to attach specific documents and forms to the application. Refer to the checklist at the end of the application template (Appendix C). These documents will not be counted as part of the 15-page application limit and are the only documents that may be submitted with the application.
- Attachments must be typed or computer generated and formatted similar to the application (refer to the fifth bullet in this section).

BUDGET INSTRUCTIONS

Applicants **must** use the budget form in Appendix F. Appendix F consists of three separate forms; a Budget Narrative Form, an Enrollment Performance Measure Form; and an Outreach Performance Measure Form.

Budget Narrative Form –

The Budget Narrative Form should include the following:

- Number of full time Navigator or IPA EEFs proposed
  - Timeframe of each number of Navigator or IPA EEFs
  - Location of Navigator or IPA EEFs (North or South)
- Monthly cost per Navigator or IPA EEF no more than $3,500.00 per month.

Enrollment Performance Measure Form –

The Enrollment Performance Measure Form should reflect the following:

- Total projected individual enrollments anticipated by month
    - Explanations as to how the proposed enrollment figure was reached.
    - A description of how the applicant will reach that enrollment goal.
    - The documentation that the applicant intends to provide the Exchange to demonstrate the number of individuals enrolled each month.

Outreach Performance Measure Form –

The Outreach Performance Measure Form should reflect the following:

- Total projected outreach events anticipated by month
    - Explanations as to how the proposed outreach events figure was reached.
    - A description of how the applicant will reach that outreach goal.
    - The documentation that the applicant intends to provide the Exchange to demonstrate the number of outreach events sponsored / attended each month.

SUBMISSION INSTRUCTIONS

An electronic copy attached to an e-mail is preferred and may be sent to:

dlandersen@exchange.nv.gov

If it is not possible to submit an electronic copy, a hard copy of the application may be hand-delivered or mailed to:

Silver State Health Insurance Exchange
2310 South Carson Street, Suite 2
Carson City, NV 89701

Applicants should choose only one submission method to avoid duplication. Regardless of the submission method selected, applications **must** be received no later than 2 p.m. on Friday, June 1, 2018. **A notice of receipt will be issued via email.** Late submissions **will** be disqualified. The Exchange is not responsible for lost or late mail or e-mail delivery.

Request for Navigator and/or IPA Entity Applications July 1, 2018 to June 30, 2019

APPENDIX A – PROJECT REQUIREMENTS

COMMUNITY FOCUS

Every applicant must demonstrate that it has already established or is actively establishing working relationships with a population or a community organization that serve populations that are uninsured or underinsured such as but not limited to Mesquite, Pahrump, Laughlin, Tonopah, Winnemucca, Ely and Caliente. These relationships should relate directly to the proposed program activities. An example of such a relationship would be a local immunization center or after school child care provider that routinely ensures that clients are actively connected with the staff of other programs for which they may be eligible, such as the Nevada Checkup Program *(Note that "actively connecting" clients with other programs constitutes more than simply providing clients with telephone numbers)*. Applicants may be asked to provide evidence of these relationships during the grant award process, the grant negotiation process, and/or during program monitoring over the course of the grant period.

TARGET POPULATIONS

The target population of the Navigator and IPA grant process is the uninsured and underinsured population in the state of Nevada with incomes in the 138% to 400% range of the Federal Poverty Level. Approximately 40% of the uninsured population is of Hispanic descent.

2017 Federal Poverty Levels:

Household Size	138%	150%	200%	250%	300%	400%
1	$16,643	$18,090	$24,120	$30,150	$36,180	$48,240
2	$22,411	$24,360	$32,480	$40,600	$48,720	$64,960
3	$28,180	$30,630	$40,840	$51,050	$61,260	$81,680
4	$33,948	$36,900	$49,200	$61,500	$73,800	$98,400
5	$39,716	$43,170	$57,560	$71,950	$86,340	$115,120
6	$45,485	$49,440	$65,920	$82,400	$98,880	$131,840
7	$51,253	$55,710	$74,280	$92,850	$111,420	$148,560
8	$57,022	$61,980	$82,640	$103,300	$123,960	$165,280

OUTCOME MEASURES

Every proposal must include Enrollment and Outreach outcome measures in Appendix F as described previously in the Budget Instructions. Please include at least two, but no more than five, outcomes that measure the project's success in reducing the number of uninsured individuals and families in the state of Nevada, explaining how enrollment goals will be met and how outreach and education events will increase the number of insured Nevadans. A description of how each outcome will be measured is also an essential element.

Silver State Health Insurance Exchange
Request for Navigator and IPA Entity Applications July 1, 2018 to June 30, 2019

APPENDIX B – SCORING MATRIX

The following sections in the required grant narrative will be scored as indicated.

1. **PERFORMANCE MEASURES (up to 30 points)**
   - Enrollment / Outreach outcome measures not adequately defined, not included 1 – 5
   - Enrollment / Outreach outcome measures defined, but description on how goal will be attained is inadequate 6 - 10
   - Enrollment / Outreach outcome measures defined and description of how enrollment goals will be met is included, but did not demonstrate what documentation will be provided 11 - 15
   - Enrollment / Outreach outcome measures adequately defined and description of how enrollment goals will be met is included. Include Open enrollment strategies. Outreach / Education events are included to demonstrate how they will drive grantee success for overall goals. Documentation to be provided is well thought out. Please provide examples. 16 -30

2. **SERVICES TO BE PROVIDED (up to 20 points)**
   - Services and/or methods of delivery unclear 1 - 6
   - Services clear; methods of delivery not adequately addressed 7 - 13
   - Services and methods clear, impact on uninsured effectively addressed, and (if applicable) waitlist and need for multiple providers discussed 14 - 20

3. **COMMUNITY FOCUS (up to 20 points)**
   - Community and education/enrollment network not adequately defined, no strategic plan 1 – 5
   - Community defined, education/enrollment network not adequately defined, no strategic plan 6 – 10
   - Community and education/enrollment network defined but strategic plan absent or inadequate 11 – 15
   - Community and education/enrollment network well defined, effective strategic plan in place 16 - 20

4. **POPULATION TO BE SERVED (up to 10 points)**
   - Unclear, minimal or inappropriate target population 1 - 3
   - Target population clear and appropriate 4 - 8
   - Target population clear and appropriate, and effective methods in place to identify special populations 9 - 10

5. OUTPUTS AND OUTCOMES (up to 10 points)

- Outputs and outcomes unclear or insufficient 1 - 3
- Outputs appropriate in relation to funding request, outcomes adequate 4 - 8
- Outputs appropriate and outcomes reflect substantial, achievable impact 9 - 10

6. ORGANIZATION, STAFF AND FISCAL CONTROLS (up to 10 points)

- Capacity of organization and staff to accomplish goals not established 1 – 3
- Organization, staff able to accomplish goals but fiscal controls not adequate 4 – 8
- Organization, staff able to accomplish goals and effective fiscal controls established 9 -10

Silver State Health Insurance Exchange
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APPENDIX C – PROPOSAL CONTENT

I. APPLICANT INFORMATION

Entity Name	
Legal Name	
Also Known As	
Mailing Address	
City, State, Zip Code	
Main Entity Phone	
Main Entity Fax	
Email Address	
Website Address	
Indicate One – Non-Profit/ For-Profit/Other	
Accreditation and Expiration Date (if applicable)	
Tax Identification Number or Nevada Business License Number	
DUNS Number	
Primary Organization Contact, Land and Cell Phone Numbers, Email	
Primary Program Contact, Land and Cell Phone Numbers, Email	
Primary Fiscal Contact, Land and Cell Phone Numbers, Email	
NAME OF PROGRAM OR TITLE OF PROJECT for which funds are requested	
Amount of Funding Requested	

II. EXECUTIVE SUMMARY

Provide an overview of the proposed program or project. Limit to one page.

III. FUNDING REQUEST AND PERFORMANCE MEASURES

a. State the amount of funding requested. This should match the total on the required budget form (Appendix F) and on the Applicant Information page.

b. Are you pursuing or have you secured any other funding that relates to the proposal? Identify the funding sources, indicate the amount requested or secured, and explain how the funding will be used. For any funding sources that are pending, indicate when you expect to be notified whether your agency will receive an award.

c. In detail, how will the project maximize grant funds to meet the projected individual enrollment goal? How will the project manage on-site, walk-in and appointment based in-person enrollment assistance? Explain how the project will meet open enrollment goals during the open enrollment period? Explain how the individual enrollment goal was reached and how this will be documented as proof of enrollment to the Exchange?

d. In detail, how will the project maximize grant funds to meet the projected outreach and print and digital media goal? Explain how the outreach goal was reached and how this will be documented as proof of outreach to the Exchange?

IV. SERVICES TO BE PROVIDED

a. Provide a detailed description of the in person – outreach, education, enrollment print and digital media services your project provides or will provide. Include a description of your service delivery method, including any citations for evidence-based or evidence-informed practices.

b. What are the eligibility requirements (if any) for your services and how do you ensure that the individuals or families you serve meet those requirements? Please give examples.

c. Is there a current waitlist for services? If so, how many individuals or families are on the waiting list and what is the average number of days people remain on a waitlist? If there is no waitlist, what other factors demonstrate the need for the service?

d. Explain how your project will best serve the Exchange mission and have a positive impact on one or more problems the uninsured and underinsured populations in Nevada face. Be specific about the strategies you will use to impact the problem(s).

V. COMMUNITY FOCUS

a. Define your community. Is it a district within a city, a city, a county, a group of counties or region, or the state as a whole? Be specific. Name the area or areas you consider to be your community. List the community partners within your community area that will maximize your success with the Exchange's mission.
b. Is there a strategic plan for this project? If so, who developed it, when was it developed, how often is it reviewed, and how is sustainability addressed in the plan?

VI. POPULATION TO BE SERVED

a. What populations will you serve? Include any plans you have to target persons with disabilities or any other special populations (e.g., traditionally under-served ethnic populations, youth, etc.). To the extent practicable, the funding associated with this RFA should be targeted to populations with incomes in the 138% to 400% FPL range. How will your project address this objective?

b. For the targeted population in Question VI a, describe the steps you will take to identify and verify the target population of 138% - 400%. List any partners or resources that will assist in your efforts.

c. What is the primary age group your program will target? Check all boxes that apply.

□ Infants (0-3)	□ Youth (under 18)	□ Young Adults (18-21)
□ Children (4-12)	□ Youth and Adults	□ Adults (22-55)
□ Teens (13-17)	□ Adults (18 and over)	□ Seniors (56-64)

d. Will you serve males, females or both?

VII. OUTPUTS AND OUTCOMES

a. What is the estimated number of unduplicated people you will serve with these funds for the time period July 1, 2018 to June 30, 2019? If you plan to serve families, provide the estimated number of unduplicated families and the average number of people in each family. Be specific. Describe how the project will meet enrollment goals as well as how outreach and education events will drive grantee success for overall goals.

b. Write a minimum of two and a maximum of five outcomes that demonstrate how this project will impact the uninsured in Nevada. *(See Appendix A for instructions.)*

VIII. ORGANIZATION, STAFF AND FISCAL CONTROLS

a. Provide an overview of your organization. How long have you been in business? How long have you provided the type of services for which you are requesting funds?

How has the organization grown through the years? Is there a strategic plan in place and, if so, what are the short-term and long-term goals for the organization?

b. Provide a list of key staff members including the executive director, program manager, fiscal manager and program staff. Indicate the length of time each has worked in this field and for the organization.

c. How will your organization ensure that it is in compliance with all laws, regulations, Grant Instructions and Requirements, and other ruling documents that are associated with these funds? Be specific in regards to SOP for PII, HIPAA PHI, and CLAS Standards

IX. ADDITIONAL INFORMATION

Provide any additional information about your organization, services, staff or plans that you deem important to this application.

X. CERTIFICATION

Verify that your organization has read, understands, and agrees to the Grant Conditions, Assurances, and the Grant Instructions and Requirements. An authorized staff person from the applicant organization must sign and date below.

____ ____________________

Signature, Title Date

Submission Checklist

- Appendix C – Proposal Content
- Appendix D – Fiscal Management Checklist
- Appendix E – <u>Signed</u> Grant Conditions and Assurances
- Appendix F – Budget and Performance Measures
- Memorandums of Understanding with partner agencies (if applicable)
- Agreements with sub-awardees (if applicable)
- Current List of Board of Directors or Other Governing Board (if applicable) including affiliations and terms of office
- Auditor's Letter and Schedule of Findings and Questioned Costs from most recent federal audit (if agency receives more than $750,000 annually in federal funds) OR
- Most recent Financial Status Report or Financial Statement (if federal audit not applicable)
- Conflict of Interest Standards

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APPENDIX D – FISCAL MANAGEMENT CHECKLIST

Answer "Yes" or "No" to the following questions. Provide an explanation for all "No" answers.

Items will be verified during program or fiscal monitoring visits, which may include a random sampling of transactions.

Personnel and Fiscal Management

1. __ Yes __No

   Does the agency have written personnel policies covering at a minimum: job descriptions, leave policies, recruitment and selection, evaluation, travel, salary ranges, fringe benefits, grievance procedures, disciplinary procedures, termination procedures, conflict of interest, sexual harassment, substance abuse, lobbying, confidentiality, and equal employment policies?

2. __ Yes __No

   Does the agency have an accounting manual covering all of the following: separation of duties, accounts payable, accounts receivable, internal control, purchasing, check signing policies, payroll, cash receipts, procurements, property management, time sheets, travel, conflict of interest, nepotism?

3. __ Yes __No

   Are procedures in place to minimize elapsed time between receipt and expenditure of funds and for determining allowability and allocability of costs?

4. __ Yes __No

   Are accounting records supported by source documents?

5. __ Yes __No

   Are records adequate to identify the source and use of funds?

6. __ Yes __No

   Does the agency have a process for reconciling project expenses with revenues?

7. __ Yes __No

   Fiscal and program records are retained for at least 4 years after the end of the grant period?