



Steve Sisolak
Governor

Florence Jameson, MD
Chairwoman

Heather Korbolic
Executive Director

Silver State Health Insurance Exchange

2310 South Carson Street, Suite 2

Carson City, NV 89701

T: 775-687-9939

F: 775-687-9932

www.nevadahealthlink.com/sshix

STATE OF NEVADA Silver State Health Insurance Exchange

SFY 2022

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

NOTE: This application is also available at

<https://www.nevadahealthlink.com/sshix/bidding-opportunities/>

CONTENTS

GRANT FUNDING OPPORTUNITY	3
COVID-19 UPDATES	3
BACKGROUND.....	4
IN-PERSON ASSISTANCE PROGRAM	5
SILVER STATE HEALTH INSURANCE EXCHANGE NAVIGATORS DEFINED	5
EXCHANGE ENROLLMENT FACILITATOR CERTIFICATION.....	6
ROLES AND RESPONSIBILITIES OF NAVIGATOR ENTITIES	7
NAVIGATORS ENTITY OUTREACH STRATEGY	8
MANAGEMENT OF MATERIALS	9
NAVIGATOR ENTITY REQUIREMENTS.....	10
ELIGIBLE ENTITIES.....	10
MINIMUM QUALIFICATIONS	11
DESIRED QUALIFICATIONS	12
AVAILABLE FUNDING	12
REIMBURSEMENT METHOD.....	13
REPORTING REQUIREMENTS	13
GRANT PERIOD	14
APPLICATION AND AWARD PROCESS.....	14
ORIENTATION SESSION	14
APPLICATION QUESTIONS AND ANSWERS	14
SUBMISSION OF APPLICATIONS	14
AWARD PROCESS	15

Silver State Health Insurance Exchange
Request for Application for Grants for Resident Producer/Broker/Agent entities
Published Week of April 2, 2021

TIMETABLE	16
APPLICATION INSTRUCTIONS	16
BUDGET INSTRUCTIONS	17
SUBMISSION INSTRUCTIONS	18
APPENDIX A – PROGRAM GOALS AND REQUIREMENTS	18
COMMUNITY FOCUS.....	19
TARGET POPULATIONS.....	19
APPENDIX B – PROPOSAL CONTENT	20
APPENDIX C – SCORING MATRIX	24
APPENDIX D - FISCAL MANAGEMENT CHECKLIST	25
APPENDIX E – CONFLICT OF INTEREST STANDARDS	26
APPENDIX F – PAYMENTS FOR NAVIGATOR EEFs PENDING LICENSURE	27
APPENDIX G – IN PERSON ASSISTER PROGRAM REQUIREMENTS	28
SUBMISSION CHECKLIST	29

GRANT FUNDING OPPORTUNITY

The Silver State Health Insurance Exchange (Exchange) is announcing a Request for Applications (RFA) for Navigator and IPA Entity grants. Navigator Entity grants support the work of organizations that conduct outreach, education, and enrollment assistance to uninsured and underinsured Nevadans, and promote quality, affordable, health coverage options available on the Exchange, also referred to as Nevada Health Link, and under publicly funded health insurance options, such as Medicaid and the Children's Health Insurance Program (CHIP) or Nevada Check-Up, with an emphasis on target populations (uninsured and underinsured Nevadans, rural Nevadans, individuals/families statewide, 50+ age group, 26-45 age group, the young invincibles, members of Nevada Tribes, Hispanic/Latino, Asian Americans and Asian Pacific Islanders, African Americans, multicultural populations).

The funding made available through this RFA is for the performance period of July 1, 2021 to June 30, 2023.

COVID-19 UPDATES

In response to Governor Steve Sisolak's March 12, 2020 Declaration of Emergency for COVID-19, and all associated Emergency Directives, Navigator entities will be required to implement social distancing and community mitigation strategies to limit the risk of transmission of COVID-19. Further, any entities awarded funding under this RFA must remain in compliance with any and all Emergency Directives in full force and effect under the dates of the performance period of July 1, 2021 to June 30, 2023.

Applicants will be asked in their responses to this RFA to incorporate social distancing measures and community mitigation strategies to reduce transmission of COVID-19. Applicants should develop strategies and plans that protect high risk populations, avoid overwhelming the healthcare system, minimize disruption to essential services, and protect individuals from social stigma and discrimination.

Social Distancing and Community Mitigation Strategies for Navigator entities could include:

- Identify and use of multiple communication methods to reach target populations, such as automated text messaging, website, email or social media to disseminate information to those inside and outside your organization.
- Develop information-sharing systems with other community partners, including local health officials.
- Identify services and activities that might need to be limited or discontinued (in person meetings, events, and classes) and find alternative solutions, such as virtual events, webinars, or zoom meetings that will ensure continuity of services for the populations you serve.
- Identify services that can be performed remotely and develop policies and procedures as appropriate to provide such services.
- Set up flexible hours and extended schedules for essential services to limit the number of people who must gather in one location at one time.

- Offer alternative ways to provide services to high risk populations such as via phone or online.
- Identify and address potential language, cultural and disability barriers associated with communicating COVID-19 information.
- Address and counteract fear and anxiety that may result from rumors or misinformation regarding COVID-19.
- Consider the needs of persons at higher risk of severe illness and those who may be impacted socially or economically and identify ways to ensure the continuity of services to those groups.

Applicants are encouraged to review Interim Guidance for Administrators and Leaders of Community-and Faith-Based Organizations to Plan, Prepare, and Respond to Corononavirus Disease 2019 (COVID-19) as published by the Centers for Disease Control and Prevention (CDC) and found:

<https://www.cdc.gov/coronavirus/2019-ncov/community/organizations/guidance-community-faith-organizations.html>

BACKGROUND

In June 2011, Senate Bill 440 (2011) was enacted, creating the Silver State Health Insurance Exchange (Exchange), also known as Nevada Health Link, the online marketplace connecting Nevadans to qualified health plans. The Exchange was put into *Nevada Revised Statutes* (NRS) in response to the requirements of the Patient Protection and Affordable Care Act (PPACA). A health insurance exchange is an online marketplace in which individuals can shop, compare, and enroll in health insurance coverage. The Exchange has been operational since October 1, 2013, facilitating the purchase of subsidized health insurance for Nevadans. In November 2019, the Exchange transitioned to a fully functional, independent State Based Exchange, no longer using the federal marketplace, HealthCare.gov for eligibility and enrollment services.

The ACA requires the Exchange establish a Navigator program to¹:

- a. Maintain expertise in eligibility, enrollment, and program specifications and conduct public education activities to raise awareness of the availability of qualified health plans;
- b. Distribute fair and impartial information concerning enrollment in all qualified health plans, clarifying the distinctions among health coverage options, and helping consumers make informed decisions during the health coverage selection process 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

¹ ACA Section 1311(i)(3) codified as [42 USC § 18031\(i\)\(3\)](#) – Navigators; Duties

- e. Provide referrals to the IRS, licensed tax advisors, tax preparers, or other resources for assistance with tax preparation and tax advice related to 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.

In-Person Assistance Program

In April 2016, the Exchange developed a separate outreach program, delivering direct consumer assistance from Exchange Enrollment Facilitators (EEFs) as per 45 CFR 155.205 (d). For this program, EEF's will be referred to as In Person Assistants (IPA). IPA and Navigator entities will collaborate on educational, outreach and enrollment efforts.

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). Please see Attachment A for the applicable requirements.

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, privacy and security standards will apply to both Navigators and IPA's.

SILVER STATE HEALTH INSURANCE EXCHANGE NAVIGATOR ENTITIES DEFINED

Navigator entities communicate with, educate and enroll individuals in Qualified Health Plans (QHPs) available through Nevada Health Link, and publicly funded health care programs, including Nevada Medicaid and CHIP through the multiple enrollment methods provided by the Exchange. Navigator entities work to ensure all individuals have access to health insurance coverage provided as a result of the ACA.

Entities will receive the Navigator designation if they successfully:

- Submit an approved Navigator grant application;
- Have employees or associated volunteers who have an active and valid Exchange Enrollment Facilitator (EEF) Certification issued by the Nevada Division of Insurance (DOI); or are able to obtain EEF Certification within the first 30 days of the grant period, or within 30 days from date of hire by the Navigator entity; or alternatively, the presentation to, and subsequent approval by the Exchange, of a detailed plan, including timelines, to have employees or associated volunteers achieve an active and valid EEF Certification issued by the DOI .
- Complete all Exchange required training;
- Receive formal, written, approval from the Exchange.

Navigator entities must not be:²

- 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 for any purpose associated with or related to lobbying or influencing or attempting to lobby or influence for any purpose the following: Any federal, state, county or local agency, legislature, commission, council or board; Any federal, state, county or local legislator, commission member, council member, board member, or other elected official; or Any officer or employee of any federal, state, county or local agency; legislature, commission, council or board.
- An entity, or individual(s), that receives any consideration, directly or indirectly, from any health insurance issuer, or any issuer of stop loss insurance, in connection with the enrollment of any individuals or employees in a QHP or a non QHP. Notwithstanding the requirements of this paragraph (d)(4), in a Federally-facilitated Exchange, no health care provider shall be ineligible to operate as a Navigator solely because it receives consideration from a health insurance issuer for health care services provided;
- Provider organizations that are owned by a health insurance issuer pursuant to 45 CFR 155.210(d) (2).

EXCHANGE ENROLLMENT FACILITATOR CERTIFICATION

Per [NRS 695J.280](#), 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 DOI, must hold an EEF Certification issued by the DOI and an Exchange appointment. This requirement applies to persons employed by, or volunteering, as Navigator entity EEFs. The EEF training and testing requirements are approved by the DOI in partnership with the Exchange.

The 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 (APTC) and Cost Sharing Reductions (CSR);
- Publically funded health care (CHIP, Medicaid);
- Means of appeal and dispute resolution;
- Conflict of interest and impartiality;
- Exchange privacy policies and requirements;
- Completion of Nevada Health Link certification and training course
- Use of the web portal: the State Based Exchange platform

A certification test will be administered at the end of the course to demonstrate competency of the above subjects.

² [45 CFR 155.210\(d\)](#)

Requirements to obtain the EEF Certification and Exchange appointment are listed in Attachment A.

Additionally, Navigators and IPAs will be required to take and pass additional training provided by the Exchange to receive appointment by the Exchange. The training is approximately 20 10 hours long, and successful completion finalizes the process for Navigator and IPAs to assist Nevadans educating and enrolling in health insurance.

Navigator and IPAs will be required to attend and pass annual continuing education consisting 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.

ROLES AND RESPONSIBILITIES OF NAVIGATOR ENTITIES

Navigator entities must provide certified EEFs who will be responsible for direct outreach, education, and enrollment activities to targeted underinsured and uninsured populations. EEFs promote quality, affordable, health coverage options available on the Exchange and under publicly funded health insurance options, such as Medicaid and CHIP, provide consumers with direct enrollment assistance, and provide education to consumers regarding the use of their insurance.

Navigator entities and EEFs 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 EEF duties. Navigator entities or associated EEFs must not 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.

Navigator entities will work in collaboration with the Exchange's Marketing and Outreach vendor to provide outreach and education services to targeted populations. These outreach and education services will include, but are not limited to, attending mandatory meetings with Exchange staff and the Marketing and Outreach vendor; and attending and staffing approved events organized and scheduled by the Exchange. After attending approved outreach events, Navigators are required to fill out, in detail, an event report, take pictures of the event, and collect email addresses from potential eligible Nevadans who wish to subscribe to the Nevada Health Link email listserv. The event report and subsequent photos will be shared with the Navigator Program Manager and Marketing and Outreach vendor to post on social media channels in order to continue promotion of Nevada Health Link resources.

Other responsibilities of Navigator entities include, but are not limited to:

- Maintain expertise in eligibility, enrollment, and program specifications and conduct public education activities to raise awareness of the availability of qualified health plans;

- Leveraging online channels and social media to support reaching targeted populations;
- Provide consumer education regarding program eligibility and associated rules to purchase subsidized insurance through the Exchange.
- Provide eligibility and enrollment assistance for Medicaid, CHIP/Nevada Check-Up, Medicare or other programs;³
- Provide in person and/or virtual education to consumers to shop, purchase and enroll in a QHP or Qualified Dental Plan (QDP) on NevadaHealthLink.com; including the location and hours of in person assistance and enrollment assistance options.
- Conduct outreach and education to consumers to promote the benefits of ACA compliant QHPs offered on the Exchange, including minimum essential coverage and the availability of subsidies. This includes drop off to statewide community partners of Nevada Health Link materials such as Resource Guides and educational literature.
- Assist and educate consumers' understanding of their health insurance benefits, and health insurance terms, for example, aiding the consumer to understand the difference between a premium, deductible and co-insurance.
- Provide information and referrals to consumers to resolve disputes with carriers, including directing them to the DOI and/or the Office of Consumer Health Assistance where appropriate, and referring enrollment disputes to the Exchange;⁴
- Provide socially, culturally, and linguistically appropriate outreach, education, enrollment services to diverse groups of consumers and target populations.
- Integrate outreach, education and enrollment activities with key social determinants of health, where target populations are born, live, grow, work and age.
- Answer questions regarding access to any of the enrollment methods and the submission of enrollment documentation to the Exchange;
- Explain the eligibility criteria for purchasing insurance through the Exchange, enrolling in Medicaid and other State programs designed to provide medical coverage;
- 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. EEFs must not offer any opinion or editorial on the QHPs available on the Exchange. Navigator entities must ensure that information provided by their Navigator EEFs is limited to that information available on NevadaHealthLink.com.

NAVIGATOR ENTITY OUTREACH STRATEGY*

Navigator entities are encouraged to apply a community based outreach strategy to encourage improved health outcomes among target populations. The following list is not exhaustive, but does provide example strategies Navigator entities could adopt:

- Partnering with community/local officials and/or leaders; Partnering with other community-based organizations and/or community groups, including community businesses who serve the target populations. Some examples of community businesses include local/ethnic supermarkets, any health related organization serving the public (i.e.:

³ [45 CFR 155.210\(e\)\(1\)](#)

⁴ [45 CFR 155.210\(e\)\(4\)](#)

Human Services Network, Nevadans Together for Health Access, Nevada Minority Health & Equity Coalition, etc.) 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*;
- Promoting through local faith-based organizations;
- Attending and/or presenting at community events (including health fairs, festivals, popular sports events etc.) using Nevada Health Link 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 with the approved Nevada Health Link messaging provided;
- Provide access to locations or mobile computing centers that will facilitate access to the Exchange's web portal, NevadaHealthLink.com*;

*Please note in light of the COVID-19 pandemic, the above listed outreach strategies are not encouraged at this time or for the purposes of the SFY 22 and SFY23 Navigator Entity RFA.

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.

NAVIGATOR ENTITY REQUIREMENTS

Interested organizations will submit a response to this RFA requesting consideration as a Navigator entity. The application must⁵:

- Demonstrate that the organization has existing relationships, or could readily establish relationships with target populations, including uninsured and underinsured consumers likely to be eligible for enrollment in a QHP;
- Demonstrate willingness to meet the standards prescribed by the Exchange;
- Show that the organization has, or will have within 30 days of the commencement of Navigator entity operations, employees or associated volunteers, who have an active, and valid EEF Certification issued by the DOI, or alternatively, an Exchange approved plan with timelines to have employees or associated volunteers achieve an active, and valid EEF Certification issued by the DOI.
- If the entity ceases to have EEF certified individuals on staff, all Navigator operations and funding must cease;
- Acknowledge that the organization and all associated staff will not have a conflict of interest during the term of the performance period. 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 entity will notify the Exchange immediately and may be required to pay back grant funds to the Exchange.
- Accept the requirement that the Navigator entity will be an independent contractor and its employees or volunteers will not be in joint employment of the Exchange.
- Acknowledge that a Navigator entity will, as a precondition for receiving any funds, enter into an independent services contract 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.
- Demonstrate how the organization's business model, service area, print, digital, social media and clientele will be leveraged to support the mission and objectives of the Exchange and show how funds will support mission and ancillary functions of the entity.
- Acknowledge the requirement to adhere to COVID-19 statewide protocols, including those of social distancing.

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

ELIGIBLE ENTITIES

The Exchange encourages applications from organizations and entities that are physically located in the state of Nevada, with established relationships and access to the target uninsured and underinsured populations. Organizations are further encouraged to target populations who are

⁵ [45 CFR § 155.210\(c\)\(1\)](#)

vulnerable or underserved, and are disproportionately without access to coverage or care, or at a greater risk of poor health outcomes.

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

- Community or consumer-focused non-profit or for profit organizations;
- Consumer Advocacy, community based organization, or faith-based organizations;
- Trade, industry or professional associations, labor unions, Chamber of Commerce targeting specialty populations;
- Ranching or farming organizations;
- Healthcare Provider: such as hospital, provider, clinic, or Federally Qualified Health Centers (FQHC);
- Educational institutions, such as Community Colleges, Universities, or School Districts;
- Native American tribes, tribal organization, or urban Native American organizations;
- City, County or State government agencies.

MINIMUM QUALIFICATIONS

- Prior experience and demonstrated success developing and implementing outreach and education programs that serve similar target populations who will be eligible for coverage through the Exchange;
- An established community presence and demonstrated trusted source for information to the target populations and communities that you serve;
- Established relationships with target populations and a demonstrated capacity to leverage these existing relationships;
- Knowledge of the cultural, linguistic and other preferences of the target populations and communities;
- Staffing which reflects the cultural and linguistic background(s) of the target uninsured population(s) the Applicant proposes to serve;
- Demonstrated ability to deliver cost-effective program activities which are in line with the purpose of the Navigator program and established goals and objectives;
- Knowledge of the Affordable Care Act and health care coverage options available to Nevadans;
- Knowledge and experience measuring the impact and success of outreach and education campaigns; and
- Ability to comply with all applicable federal and states laws, rules, and regulations.
- Technical computer ability to assist a consumer in completing a web-based application.
- Ability to learn and operate within acceptable state and federal financial spending/reporting guidelines.

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;
- 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 relationships 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;

AVAILABLE FUNDING

Funding for Navigator entities is based on the number of Full Time Equivalent (FTE), certified EEFs each organization utilizes in the grant period of performance, which is July 1, 2021 to June 30, 2023.

Applicants will propose a number of EEFs for each year being funded and include an amount that reflects their proposed annual base salary per FTE EEF. Applicants will further include an additional 15% fringe benefit assessment of the base salary, and an additional 10% allocation for administrative costs, comprised of the annual base salary and the fringe benefit assessment.

The funding amount proposed per FTE is inclusive of all costs associated with the Navigator entity program. Additional funding for travel, equipment, contractual costs, training or any other direct or indirect costs, not mentioned here, are not available and should not be requested.

This projection is approximate and is subject to change based on available funding.

The number of EEFs must not be more than two (2) EEF's per full time equivalent (FTE), included in the approved budget. EEFs may only be claimed if they are performing enrollment, education and/or outreach activities directly attributable to this funding opportunity. If an individual only performs enrollment, outreach, and education activities 50% of the time of their FTE status, the Exchange will award funding based on 50% FTE status.

The Nevada DOI licensing requirements must be completed within 30 days to receive reimbursement for a certified EEF, unless the entity can demonstrate extenuating circumstances and a prior written approval for an extension has been granted by the Exchange. Please see Attachment A, for information on reimbursement for EEFs pending licensure.

The number of EEFs granted to Navigator Entities by the Exchange may change during open enrollment and non-open enrollment periods. The initial number of EEFs per Navigator entity will be determined by the Exchange during grant negotiations.

ANY CHANGE TO THE NUMBER OF EEFs MUST BE APPROVED, IN WRITING, BY THE EXECUTIVE DIRECTOR OF THE EXCHANGE BEFORE ANY RECRUITING, TESTING, OR HIRING OCCURS BY A NAVIGATOR ENTITY.

REIMBURSEMENT METHOD

Payments to applicants whose proposals are funded will be based on the achievement of deliverables between the entity and the Exchange. Deliverables and timelines for completion will be incorporated into a Scope of Work document and used as basis for Monthly Program Performance reports. Monthly Program Performance reports, including outcome measures and metrics, must be reported each month to be eligible for reimbursement.

The Exchange does not issue payment prior to receipt of goods or services. Therefore, funded entities will be responsible for providing all required information, documents and/or attachments required and outlined in the approved Notice of Grant Award (NOGA) upon submission of their monthly requests for reimbursements.

Advances of grant funds will not be allowed.

The Navigator Entity will be required to register as a vendor with the State of Nevada and carry State required levels of insurance to receive payment.

REPORTING REQUIREMENTS

Navigator entities must maintain compliance with established reporting requirements. Navigator entities will be required to submit Monthly Program Performance Reports using a standardized template provided by the Exchange. Monthly Program Performance Reports will report enrollment, outreach and education, and personnel activities, and show data that reflects progress made towards deliverables and program outcomes to the Exchange.

If project benchmarks are not met, the Exchange will provide technical assistance to assist with a resolution. If the project benchmarks continue to fall short, Navigator entities may be required to submit additional ad hoc reports at the Exchange's request, and reimbursement may be withheld until additional requested reporting is received. Navigator entities will be required to report any proposed adjustments to their approved scopes of work and receive written approval from the Exchange prior to implementation.

GRANT PERIOD

The grant period for this Request for Applications (RFA) begins July 1, 2021 and ends June 30, 2023 for State Fiscal Year (SFY) 2022 and SFY 2023. Grantee will be required to submit a Budget Narrative for each State Fiscal Year.

APPLICATION AND AWARD PROCESS

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

ORIENTATION SESSION

DATE/TIME	LOCATION	VIDEOCONFERENCE	TELECONFERENCE
Tuesday, April 13, 2021 10:00 – 11:30 am	Virtual Meeting	ZOOM Meeting https://nevadahealthlink.zoom.us/j/82323638255	Phone #: (888) 204-5984 Access code: 762545

APPLICATION QUESTIONS AND ANSWERS

Questions may be submitted via e-mail to kblagen@exchange.nv.gov with the subject line NAVIGATOR RFA QUESTIONS by Monday, April 19, 2021. Questions and responses will be posted to the Nevada Health Link website, <https://www.nevadahealthlink.com/sshix/grant-opportunities/>, by Friday, April 23, 2021. The questions and responses will remain on the website through the end of the application period.

After April 19, 2021, no substantive questions about the application will be accepted. Technical questions regarding formatting and submission may still be directed via e-mail to kblagen@exchange.nv.gov ..

SUBMISSION OF APPLICATIONS

Details concerning the submission of applications are outlined in subsequent sections titled Application Instructions, Budget Instructions and Submission Instructions., <https://www.nevadahealthlink.com/sshix/grant-opportunities/>.

AWARD PROCESS

Proposals will be reviewed in a four-step process:

1. Exchange staff will review proposals to ensure that minimum standards are met. Submissions must include applicant information, an executive summary, answers to all questions, and responses to the Fiscal Management Checklist (Appendix D).
2. 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.
3. 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.
4. The Exchange Application Committee will review and score the proposals in accordance with the Scoring Matrix in Appendix C.
5. Final funding decisions will be made by the Exchange Application Committee based on the following factors:
 - Reasonable statewide distribution of the recommended grant awards among the 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;
 - Innovative techniques in virtual outreach and marketing.

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 number of Full Time Equivalents (FTEs) 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 funding 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.

TIMETABLE

Friday, April 2, 2021	RFA is published.
Tuesday, April 13, 2021	Applicant orientation scheduled. Attendance is mandatory.
Monday, April 19, 2021	Deadline for applicants to submit substantive questions about application to the Exchange by 5 pm.
Friday, April 23, 2021	Exchange posts final Questions and Answers to website.
Friday, April 30, 2021	Applications are due by close of business day. Attendance at the April 13 th orientation is mandatory for applications to be accepted.
Monday, May 3, 2021 through Friday, May 7, 2021	Applications are reviewed by the Exchange Application Committee and recommendations are provided to the Exchange.
Monday, May 10, 2021 through Thursday, May 28, 2021	Grant Selection Committee meets and makes final selection.
Monday, June 7, 2021	Grant Negotiations Conclude

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 entities awarded funding are those deemed to be in the best interest of the people of the State of Nevada.

APPLICATION INSTRUCTIONS

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

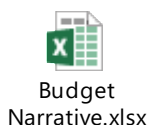
General Formatting

- Applicants must use Appendix B as a template for their proposal. **For the convenience of reviewers, applicants must retain and reprint 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 Narrative form embedded below.



Budgets must be submitted in excel format and as a separate attachment. RFAs with budgets that are submitted as scanned attachments, or are included in the body of the submission will be disqualified.

*Please note that two different budgets **must** be submitted for each State Fiscal Year, one for SFY22 and one for SFY23.

Applicants must propose a number of EEFs, and the proposed annual base salary per FTE EEF. A 15% fringe benefit assessment of the annual base salary will and 10% allocation for administrative costs, comprised of the annual base salary and the fringe benefit assessment will be included in the total amount requested.

The funding amount proposed per FTE is inclusive of all costs associated with the Navigator entity program. Additional funding for travel, equipment, contractual costs, training or any other direct or indirect costs, not mentioned here, are not available and should not be requested.

The number of EEFs must not be more than two (2) EEF's per full time equivalent (FTE), included in the approved budget. EEFs may only be claimed if they are performing enrollment, education and/or outreach activities directly attributable to this funding opportunity. If an individual only performs enrollment, outreach, and education activities 50% of the time of their FTE status, the Exchange will award funding based on 50% FTE status.

SUBMISSION INSTRUCTIONS

An electronic copy attached to an e-mail is preferred and may be sent to:
kblagen@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 5 p.m. on Friday, April 30, 2021. **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.

APPENDIX A – PROGRAM GOALS AND REQUIREMENTS

The goals of this program are as follows:

- Raise awareness of the availability of qualified health plans and premium tax credits, offered through the Exchange, among uninsured and underinsured Nevadans by conducting public education and outreach activities.
- Reduce the number of uninsured and underinsured Nevadans by facilitating enrollment in qualified health plans and/or publicly funded health care programs, and by maintaining expertise in eligibility, enrollment and program specifications; and by distributing fair and impartial information about enrollment in qualified health plans and/or publicly funded health care programs.
- Provide and maintain consumer assistance functions for health program enrollment to populations that are underserved, or disproportionately without access to coverage or care, in a manner that is culturally and linguistically appropriate.

The circumstances resulting from the COVID-19 pandemic and associated state-mandated protocols will require that the program goals are achieved while maintaining social distancing measures and implementation of community mitigation strategies to limit the risk of transmission of COVID-19 for the time period these protocols are in place. For programs such as this, where high levels of person to person interaction and assistance are required, this can pose a significant challenge. Applicants will need to consider their ability to effectively provide enrollment assistance and education and conduct outreach to consumers remotely. Additional requirements are listed below.

COMMUNITY FOCUS

Applicants must demonstrate they have established, trusted relationships with underserved populations that are disproportionately without access to coverage or care, in a manner that is culturally and linguistically appropriate. These relationships should relate directly to the proposed program activities. An example of such a relationship would be a local immunization center that routinely screens clients for health insurance status, and those clients without insurance are offered enrollment assistance into a QHP or other programs for which they may be eligible, such as the Nevada Check-Up Program.

TARGET POPULATIONS

The state of Nevada has nearly 400,000 uninsured citizens, of those, over 120,000 are eligible for coverage on the Exchange, of those, 77,000 are eligible for subsidized coverage through Nevada Health Link. The target population for this program are those 77,000 uninsured Nevadans who are eligible for subsidized coverage. These are individuals and families living in the state of Nevada with incomes between 138% and 400% of the Federal Poverty Level (FPL). Applicants are encouraged to target their proposals towards populations that are characteristically underserved and without access to coverage or care. Examples include, but are not limited to, young adults, immigrants, ethnic and minority groups, rural populations, and LGBTQ populations.

2021 Federal Poverty Levels:

Household/ Family Size	138%	150%	200%	225%	300%	400%
1	\$17,774	\$19,320	\$25,760	\$28,980	\$38,640	\$51,520
2	\$24,040	\$26,130	\$34,840	\$39,195	\$52,260	\$69,680
3	\$30,305	\$32,940	\$43,920	\$49,410	\$65,880	\$87,840
4	\$36,570	\$39,750	\$53,000	\$59,625	\$79,500	\$106,000
5	\$42,835	\$46,560	\$62,080	\$69,840	\$93,120	\$124,160
6	\$49,100	\$53,370	\$71,160	\$80,055	\$106,740	\$142,320
7	\$55,366	\$60,180	\$80,240	\$90,270	\$120,360	\$160,480
8	\$61,631	\$66,990	\$89,320	\$100,485	\$133,980	\$178,640
9	\$67,896	\$73,800	\$98,400	\$110,700	\$147,600	\$196,800
10	\$74,161	\$80,610	\$107,480	\$120,915	\$161,220	\$214,960

APPENDIX B – 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 including proposed program activities, and how social distancing measures and community mitigation strategies to reduce the transmission of COVID-19 will be implemented, including but not limited to, virtual outreach and marketing. Limit to one page.

III. ORGANIZATION OVERVIEW

- a. Describe your organization. What is the mission of your organization? What populations and communities does your organization serve? What services does your organization offer? What outreach and education activities does your organization currently perform? Describe the short-term and long-term goals for the organization?
- b. What is the reach of your organization? How many individuals and/or families do you serve each year? Does your organization serve communities and populations locally, regionally or statewide?
- c. How does your organization's mission align with the goals of this funding opportunity? How does your organization propose to incorporate the goals of this funding with the services, outreach and education activities you already perform?
- d. Are you pursuing, or have you secured any other funding that targets uninsured and underinsured populations, or provides assistance for enrollment, outreach, and/or education for publicly or privately funded health programs or coverage? Identify the funding sources, indicate the amount requested or secured, and explain the specifics of 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.
- e. In detail, how will your organization implement social distancing and community mitigation strategies resulting from the COVID-19 pandemic, including but not limited to, virtual outreach and marketing? 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? What tools and technology does your organization propose to use to provide enrollment assistance and other direct services? How will you conduct outreach, education and other consumer assistance functions?

IV. SERVICES TO BE PROVIDED

- a. Please explain how your project will best serve the Exchange's mission and have a positive impact in reducing the number of uninsured and underinsured Nevadans. Be specific about the strategies you will use and why you think they will be effective.
- b. Provide a detailed description of how your organization will engage the estimated 77,000 uninsured Nevadans who are eligible for subsidized coverage through the

Exchange, and how you will get them to enroll in coverage? Be specific about the strategies you will use, and how you will measure their impact and results.

- c. Describe the outreach and education activities your organization will conduct, including the numbers of events you will hold and attend, and the estimated audience you will reach, to help raise awareness about the Exchange. Please ensure that education and outreach activities have incorporated social distancing and community transmission mitigation strategies to prevent the spread of COVID-19.
- d. How will your organization support and conduct consumer enrollment into qualified health plans and/or publicly funded health care programs to uninsured and underinsured Nevadans? How will you measure and report the enrollments and referrals into both? How will you provide enrollment support to consumers while maintaining social distancing protocols?
- e. How will you work with community partners to achieve the goals of this program? Have you worked with community partners before? What was the outcome of previous partnerships?

V. COMMUNITY FOCUS

- a. Please describe your community network and community focus, as it relates to the requirements outlined in Attachment A. How have you established trusted relationships with underserved populations or those who are disproportionately without access to coverage or care? How will you ensure that your program will deliver services in a manner that is culturally and linguistically appropriate?

VI. POPULATION TO BE SERVED

- a. What populations will you serve? Include any plans you have to target populations that are vulnerable or underserved (e.g., young adults, immigrants, ethnic and minority groups, rural populations, and LGBTQ populations, etc.). To the extent practicable, the funding associated with this RFA should be targeted to populations that are uninsured or underinsured with incomes within 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 conduct outreach to the target population. List any partners or resources that will assist in your efforts.

VIII. STAFF AND FISCAL CONTROLS

Provide a list of key personnel including the Executive Director, Program Manager, Fiscal manager and program staff. A resume shall be included for each proposed key personnel responsible for performance under any funding awarded resulting from this RFA.

- a. Please describe your organization's fiscal and internal controls and provide copies of written policies and procedures you have.
- b. How will your organization ensure that it is in compliance with all laws, regulations, insurance, Grant Instructions and Requirements, and other ruling documents that are associated with these funds?
- c. How will your organization ensure that it will maintain the proposed number of EEFs and personnel needed for this program?

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

Silver State Health Insurance Exchange
Request for Navigator Entity Applications July 1, 2021 to June 30, 2023

APPENDIX C – SCORING MATRIX

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

1. ORGANIZATION OVERVIEW (20%)

- Organization’s mission goals and outreach not defined, no strategic plan 1 -2
- Organization’s mission goals are defined, outreach is not addressed, no Strategic plan 3-4
- Organization’s mission goals are defined, outreach is not addressed, no Strategic plan 5-7
- Organization’s mission goals and outreach are defined and effective, strategic plan is included, virtual outreach and marketing is highlighted 7-10

2. SERVICES TO BE PROVIDED (30%)

- Services and/or methods of delivery unclear 1 - 2
- Services clear; methods of delivery not adequately addressed 3 - 6
- Services and methods clear, impact on uninsured effectively addressed 7 - 10

3. COMMUNITY FOCUS (20%)

- Community, community partners and previous experience in the community not defined 1 - 2
- Community defined, community partners and previous experience in the community not defined 3- 4
- Community and community partners defined, previous experience in the community not defined 5 – 7
- Community and community partners well defined, previous experience defined and effective 8 - 10

4. POPULATION TO BE SERVED (10%)

- Unclear, minimal or inappropriate target population 1 - 2
- Target population clear and appropriate 3 - 6
- Target population clear and appropriate, and effective methods in place to identify special populations 7 - 10

5. STAFF AND FISCAL CONTROLS (20%)

- Capacity of organization and staff to accomplish goals not established 1 - 2
- Organization, staff able to accomplish goals but fiscal controls not adequate 3 - 6
- Organization, staff able to accomplish goals and effective fiscal controls established 7 - 10

Proposals will be evaluated using the Weighted Scores method. Each criterion has a maximum number of points and weight assigned to it. Based upon how well the applicant's proposal addresses each criterion, the evaluator assigns a score of 0 – 10 and then multiplies the points by the designated weight to get the total weighted points for the item. For example:

Criteria (1)	0 – 10 Score (2)	Weight (3)	Weighted Score (2 x 3)
Organizational Overview	7	20%	1.4
Services to be provided	8	30%	2.4
Community Focus	5	20%	1
Population to be Served	9	10%	0.9
Staff and Fiscal Controls	7	20%	0.7
Total Weighted Points	36	100	6.4

Silver State Health Insurance Exchange
Request for Navigator and IPA Entity Applications July 1, 2021 to June 30, 2023

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 5 years after the end of the grant period?

APPENDIX E – CONFLICT OF INTEREST STANDARDS

Navigator 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 entities and their EEFs cannot receive any consideration, financial or otherwise, from carriers or consumers.

All Navigator entities, including Navigator 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 entities once awarded must submit to the Exchange a written plan to remain free of conflicts of interest during the term as a Navigator entity.

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

- Financial considerations: Navigator 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 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 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.)

If a Navigator 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 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 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.

APPENDIX F – PAYMENTS FOR NAVIGATOR EEFs 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 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 –four week time period. 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 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 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 enrollment, education, and or outreach 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.

(Note that “actively connecting” clients with other programs constitutes more than simply providing clients with telephone numbers).

APPENDIX G – IN PERSON ASSISTER PROGRAM REQUIREMENTS

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.

Submission Checklist

- Appendix B – Proposal Content
- Appendix C – Scoring Matrix
- Appendix D – Fiscal Management Checklist
- Appendix E – Conflict of Interest Standards
- Appendix F – Payments for Navigator EEFs Pending Licensure
- 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