

**U.S. Department of Health and Human Services
Centers for Medicare & Medicaid Services
Center for Consumer Information and Insurance Oversight**

Cooperative Agreement to Support Navigators in Federally-facilitated Exchanges

Notice of Funding Opportunity Type: New

Funding Opportunity Award Type: Cooperative Agreement

Notice of Funding Opportunity Number: CA-NAV-21-001

Federal Assistance Listings Number (CFDA): 93.332

Notice of Funding Opportunity Posting Date: June 4, 2021

Applicable Dates:

Letter of Intent to Apply Due Date:	N/A
Electronic Application Due Date:	July 6, 2021, 3:00 pm Eastern Standard Time
Anticipated Issuance Notice(s) of Award:	August 27, 2021
Anticipated Period of Performance:	36 months from the date of initial award with 12-month budget periods

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Executive Summary

The Cooperative Agreement to Support Navigators in Federally-facilitated Exchanges (Funding Opportunity) will enable recipients to operate as Exchange Navigators in states with a Federally-facilitated Exchange (FFE), as authorized by the Affordable Care Act (ACA)¹. To view a current list of states that will have an FFE in benefit year 2022, see Appendix VI, *List of States for which Cooperative Agreement Funding is Available*.

Each year, the Centers for Medicare & Medicaid Services (CMS) makes grant awards to organizations who serve as Navigators in FFE states. Navigators help consumers prepare applications to establish eligibility and enroll in coverage through the Exchanges, and help determine whether consumers potentially qualify for insurance affordability programs. They also provide outreach and education to raise awareness about the Exchanges. As trusted community partners, Navigators are required to provide targeted assistance to underserved and vulnerable populations within the Exchange service area, which is critical to improving access to health care coverage for communities that often experience a disproportionate burden of disease². In furtherance of the Biden Administration's goals on ensuring access to and expanding affordable and high-quality health care coverage³ and improving health equity⁴, Navigators are well-positioned to reach historically underserved and vulnerable communities, especially those who continue to face significant health disparities.

Navigators operate year-round—increasing awareness among the remaining uninsured about the coverage options available to them, helping consumers find affordable coverage that meets their needs, and assisting consumers beyond the enrollment process to ensure they're equipped with the tools and resources needed to utilize and maintain their health coverage all year. The increased funding available to applicants through this Funding Opportunity will enable FFE Navigators to further expand their reach, with a renewed focus on outreach to diverse, underserved, and vulnerable communities.

Organizations that receive funding to serve as FFE Navigators must carry out the required statutory and regulatory Navigator duties, along with the additional requirements laid out in

¹ The Patient Protection and Affordable Care Act (Pub. L. 111–148) was enacted on March 23, 2010. The Health Care and Education Reconciliation Act of 2010 (Pub. L. 111–152), which amended and revised several provisions of the Patient Protection and Affordable Care Act, was enacted on March 30, 2010. We refer to these collectively as the Affordable Care Act.

² *HHS Notice of Benefit and Payment Parameters for 2017*, 81 Fed. Reg. 12246 (May 9, 2016) (amending 45 C.F.R. § 155.210), at <https://www.govinfo.gov/content/pkg/FR-2016-03-08/pdf/2016-04439.pdf>.

³ *Executive Order on Strengthening Medicaid and the Affordable Care Act* (Jan. 28, 2021), at <https://www.whitehouse.gov/briefing-room/presidential-actions/2021/01/28/executive-order-on-strengthening-medicare-and-the-affordable-care-act/>.

⁴ *Executive Order On Advancing Racial Equity and Support for Underserved Communities Through the Federal Government* (Jan. 20, 2021), at <https://www.whitehouse.gov/briefing-room/presidential-actions/2021/01/20/executive-order-advancing-racial-equity-and-support-for-underserved-communities-through-the-federal-government/>.

Sections B. *Award Information* and E. *Application Review Information* of this Funding Opportunity. This document describes how to submit proposals in fiscal years (FY) 2021 through 2024 and how CMS will determine which proposals will be funded. This document should be read in its entirety, as some information has changed from the previous award cycles.

Item	Description
HHS Awarding Agency	Centers for Medicare & Medicaid Services (CMS)
CMS Awarding Center	Center for Consumer Information and Insurance Oversight (CCIIO)
Notice of Funding Opportunity Title	<i>Cooperative Agreement to Support Navigators in Federally-facilitated Exchanges</i>
Authorization	Affordable Care Act (ACA), Sections 1311(d)(4)(K), 1311(i), and 1321(c)(1)
Federal Assistance Listings Number (CFDA)	93.332
Funding Opportunity Type	New
Funding Opportunity Number	CA-NAV-21-001
Type of Award	Cooperative Agreement
Type of Competition	Open to All Eligible Applicants
Letter of Intent	N/A
Application Due Date and Time	July 6, 2021 by 3:00 pm EST (Baltimore, MD)
Anticipated Issuance Notice(s) of Award	August 27, 2021
Period of Performance Start Date	Anticipated August 2021

Item	Description
Period of Performance End Date	36 months from the date of award with 12-month budget periods
Anticipated Total Available Funding	\$80 million allotted per 12-month budget period; \$240 million total for 36-month period of performance, subject to funding availability
Estimated Maximum Award Amount	\$14,532,590.00
Estimated Maximum Number of Awardees	120

A. Program Description

A1. Purpose

The Cooperative Agreement to Support Navigators in Federally-facilitated Exchanges (Funding Opportunity) will enable recipients to operate as Exchange Navigators in states with an FFE, as authorized by the ACA. To view a current list of eligible states that will have an FFE in benefit year 2022, see Appendix VI, *List of States for which Cooperative Agreement Funding is Available*.

A2. Authority

This Cooperative Agreement is being issued by the Secretary of the U.S. Department of Health and Human Services (HHS) pursuant to Sections 1311(d)(4)(K), 1311(i), and 1321(c)(1) of the ACA. Section 1311(i) of the ACA states that an Exchange “shall establish a program under which it awards grants” to entities which facilitate education about and enrollment in qualified health plans (QHPs) through Exchanges. These entities are known as “Navigators.”

Please visit the following link to view the full list of relevant regulations that HHS has published under Title 45, part 155, subpart C of the Code of Federal Regulations: https://ecfr.io/Title-45/cfr155_main.

A3. Background

Section 1311(i) of the ACA requires Exchanges to establish a Navigator grant program. This Funding Opportunity is open to eligible entities and individuals (described in Section 1311(i)(2) of the ACA and 45 C.F.R. §155.210(a) and (c)) applying to serve consumers in states with an FFE. Entities and individuals cannot serve as federally certified Navigators without receiving federal cooperative agreement funding to perform Navigator duties. This is the sixth Funding Opportunity since 2013⁵ that will fund Navigators serving in FFEs.

A4. Program Requirements

Entities or individuals eligible to apply for this Funding Opportunity must be capable of carrying out, at a minimum, all Navigator duties required by the ACA and HHS regulations. The primary regulations that establish requirements for awardees under this Funding Opportunity are 45 C.F.R. §§ 155.210⁶ and 155.215⁷.

⁵ For more information on the previous Navigator funding opportunities and awardees, see <https://www.cms.gov/CCIIO/Programs-and-Initiatives/Health-Insurance-Marketplaces/assistance.html>.

⁶ 45 C.F.R. § 155.210, at https://ecfr.io/Title-45/se45.1.155_1210

⁷ 45 C.F.R. § 155.215, at https://ecfr.io/Title-45/se45.1.155_1215

These regulations establish duties that are required of all recipients of funding under this Funding Opportunity, including, but not limited to:

- Conducting public education activities to raise awareness about the Exchange;
- Facilitating selection of a QHP;
- Providing information in a manner that is culturally and linguistically appropriate to the needs of the population served by the Exchange, including individuals with limited English proficiency, and ensuring accessibility and usability of Navigator tools and functions for individuals with disabilities;
- Providing referrals to any applicable office of health insurance consumer assistance or health insurance ombudsman established under section 2793 of the Public Health Service Act, or any other appropriate state agency or agencies, for any enrollee with a grievance, complaint, or question regarding their health plan, coverage, or a determination under such plan or coverage;
- Complying with applicable training and conflict of interest standards;
- Obtaining the authorization of applicants for coverage available through an Exchange application prior to accessing their personally identifiable information; and
- Providing targeted assistance to serve underserved or vulnerable⁸ populations, as identified by the Exchange, within the Exchange service area.

As explained in 45 C.F.R. § 155.210(e)(8) and the preamble language discussing that provision⁹, the primary criteria to be used in identifying underserved or vulnerable populations in the FFEs is whether the community is disproportionately without access to coverage or care, or is at a greater risk for poor health outcomes as a result of disparities in health insurance coverage, access to quality care, and other social, environmental, and economic factors shown to impact health.

For purposes of this Funding Opportunity, the Exchange will consider a population to be underserved or vulnerable using factors such as race or ethnicity, gender, education or income, disability, geographic location (e.g., rural or urban), or sexual orientation. Examples of underserved or vulnerable populations may include, but are not limited to¹⁰:

- Racial and ethnic minorities
- Rural communities

⁸ 45 C.F.R. § 155.210(e)(8)

⁹ See <https://www.federalregister.gov/documents/2016/03/08/2016-04439/patient-protection-and-affordable-care-act-hhs-notice-of-benefit-and-payment-parameters-for-2017>

¹⁰ See *Serving Vulnerable and Underserved Populations* (Oct. 15, 2020), at: <https://marketplace.cms.gov/technical-assistance-resources/training-materials/vulnerable-and-underserved-populations.pdf>

- Lesbian, gay, bi-sexual, transgender, queer, and other (LGBTQ+) individuals
- Low income or homeless individuals
- American Indians and Alaska Natives (AI/AN)
- People with physical or intellectual disabilities or cognitive, hearing, speech, and/or vision impairments
- Pregnant women, new mothers, and women with children
- Individuals with mental health or substance-related disorders
- Individuals with HIV/AIDS
- Medicaid-eligible consumers who are not enrolled in coverage despite being eligible for Medicaid

Applicants may also propose additional underserved or vulnerable populations in their application for the FFE’s approval.

Prohibitions:

The regulations at 45 C.F.R. §§ 155. 210 and 155.215 establish prohibitions that apply to all recipients of funding under this Funding Opportunity (*see* Section D6. *Cost Restrictions* for additional prohibitions). These include, but are not limited to:

- Receiving 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;
- Charging any applicant for or enrollee in coverage available through the Exchange for application or other assistance related to Navigator duties;
- Compensating individual Navigators on a per-application, per-individual-assisted, or per-enrollment basis;
- Providing gifts¹¹ of any value to any applicant or potential enrollee as an inducement for enrollment;

¹¹ See 45 C.F.R. § 155.201210(d)(6) for definition of gifts: https://ecfr.io/Title-45/se45.1.155_1210

- Providing gifts to any applicant or potential enrollee for a reason other than as an inducement for enrollment must not exceed nominal value¹², either individually or in the aggregate, when provided to that individual during a single encounter¹³;
- Using Exchange funds to purchase gifts or gift cards, or promotional items that market or promote the products or services of a third party, that would be provided to any applicant for or potential enrollee in coverage available through the Exchange;
- Soliciting any consumer for application or enrollment assistance by going door-to-door or through other unsolicited means of direct contact, except in cases where the individual has a pre-existing relationship with the individual Navigator or Navigator entity and other applicable state and federal laws are otherwise complied with; and
- Initiating any telephone call to a consumer using an automatic telephone dialing system or an artificial or prerecorded voice, except in cases where the individual Navigator or Navigator entity has a relationship with the consumer and other applicable state and federal laws are otherwise complied with.

Required Training:

All entities and individuals carrying out Navigator functions under cooperative agreements awarded through this Funding Opportunity must successfully complete an HHS-developed training program and pass an online exam to ensure appropriate understanding of relevant Exchange-related information and must be federally certified before carrying out any Navigator functions. After initial certification, all entities and individuals carrying out Navigator functions must obtain continuing education and be recertified on at least an annual basis. Navigator entities awarded cooperative agreement awards must also comply with any state-specific requirements, so long as these state-specific requirements do not prevent application of the provisions of Title I of the ACA. Navigators will receive technical assistance from HHS to complete the required federal certification/recertification training in the Marketplace Learning Management System (MLMS).

¹² We have previously defined “nominal value” as a cash value of \$15 or less, or an item worth \$15 or less, based on the retail purchase price of the item, regardless of the actual cost. See 79 FR 30239, 30283 (May 27, 2014) at <https://www.govinfo.gov/content/pkg/FR-2014-05-27/pdf/2014-11657.pdf>.

¹³ This nominal value limit applies to all gifts, including gift items, gift cards, cash cards, cash, and promotional items that market or promote the products or services of a third party. Some illustrative examples of permissible gifts and promotional items include pens, magnets, or key chains worth \$15 or less each, including if such items bear the name or logo of a local business, or community or social service program. Such items may, for example, be provided to consumers at outreach and education events or at other forums attended by members of the general public, as long as they are not being provided as an inducement to enrollment. See 81 FR 12258 (March 8, 2016) at <https://www.govinfo.gov/content/pkg/FR-2016-03-08/pdf/2016-04439.pdf>.

Referrals and Consumer Assistance:

Navigators will be required to assist any consumer seeking assistance, even if that consumer is not a member of the community(ies) or group(s) the applicant expects to target, as outlined in its funding proposal. There may be some instances where a Navigator does not have the immediate capacity to help an individual. In such cases, the Navigator should make every effort to provide assistance in a timely manner, but could also refer consumers seeking assistance to other resources, such as the toll-free Exchange call center or certified application counselors. Although Navigators should not refer consumers to specific agents and brokers, they may refer consumers to general resources they can use to search for an agent or broker near where they live, such as Find Local Help on HealthCare.gov. Additionally, if a Navigator in an FFE is approached by a consumer who lives in a state with a State-based Exchange (SBE), or in a state with an FFE in which the Navigator has not been funded to serve, the Navigator must refer the consumer to an Exchange-approved assister in the consumer's state or, if available, a toll-free SBE consumer assistance number.

Multi-State Awardees:

An applicant may propose to serve populations in multiple FFEs through the submission of one application. However, the applicant must submit separate Budget Narratives and project (metric) goals for each FFE it proposes to serve (*see Section D. Application and Submission Information* for additional information). If an applicant is proposing to serve in more than one FFE, the applicant should be prepared to revise its project scope and budget upon award if it is not funded to serve in all proposed FFEs and/or at the full amount requested.

Continued Funding:

Continued funding throughout the 36-month period of performance will be contingent on timely submission of the non-competing continuation application, strong performance during the previous budget period(s), funding availability, and the awardee's ability to continue meeting all eligibility requirements laid out in this Funding Opportunity, including continuing to serve in a state(s) with an FFE.

Strong performance during the period of performance will be measured by looking at:

- Awardee's ability to meet the self-imposed performance metrics (project goals) laid out in their original approved application, including:
 - Ensuring its target number of FFE Navigators are federally trained and certified/re-certified each year by **October 1**, and
 - Achieving a completion rate of at least 50% for each of the remaining project goals in its approved application by the sixth month mark of each budget period;

- Quality and timeliness of weekly, monthly, quarterly, annual, and final report submissions, as determined by CMS, including:
 - Ensuring key personnel have access to all required CMS systems by the prescribed due date of the first programmatic report, and
 - Ensuring all FFE Navigators receive guidance supplied by CMS and are trained on how to properly count and report the number of consumers they assist with Navigator activities;
- Awardee’s compliance with the terms and conditions provided with its Notice of Award, including compliance with all applicable statutory and regulatory requirements¹⁴; and
- Awardee’s ability to effectively communicate with and respond in a timely manner to requests from their Project Officer throughout the period of performance.

Additional information about reporting requirements and FFE Navigator certification will be provided with the Notice of Award for the Cooperative Agreement to Support Navigators in Federally-facilitated Exchanges.

Additionally, HHS could terminate a cooperative agreement for poor performance, or alternatively the awardee might withdraw from the cooperative agreement program before the end of the 36-month period of performance. Should the FFE in a state (or, in the case of a multi-state award, all applicable states) in which a Navigator awardee has received funding through this Funding Opportunity transition from an FFE to an SBE or State-based Exchange on the Federal Platform (SBE-FP) before the 36-month project period of performance ends, the Navigator cooperative agreement would end and any unused funds would be returned to HHS. In accordance with 45 C.F.R. §155.106, any state seeking approval from HHS to operate an SBE or SBE-FP must coordinate with HHS on a jointly-developed transition plan, including a process and timeline for ending this cooperative agreement. In the case of a multi-state award, the Navigator cooperative agreement would remain in place for any FFE in a state that remains an FFE.

¹⁴ Failure to comply with the terms and conditions of this cooperative agreement, including compliance with all statutory and regulatory requirements, may result in placement on a formal corrective action plan. Awardees placed on a formal corrective action plan during the course of the 36-month period of performance may not receive additional Navigator cooperative agreement funding for the subsequent 12-month budget period, depending on their progress in meeting all of the terms in the corrective action plan.

Multi-Year Project Period and Funding Structure:

The period of performance under this specific Funding Opportunity will be for 36 months, funded in 12-month increments known as budget periods. Continued funding will be contingent on the awardee continuing to meet all Navigator program requirements, current program priorities, and the availability of funds. This multi-year funding structure is designed to provide greater consistency for Navigator awardee organizations and their staff from year to year, reducing yearly start up time and providing for a more efficient use of cooperative agreement funds.

Applicants must submit a proposal which covers the full 36-month period of performance. Although initial funding awarded through this Funding Opportunity will cover only the first 12-month budget period of the three-year period of performance, applicants must still submit an estimated budget for each budget period (years 1, 2, and 3) using the funding allocations appropriated for each FFE provided for the first budget year (*see* Section B2. *Award Amount*). For Years 2 and 3, recipients will be able to revise their budgets, based on actual¹⁵ funding available from HHS, as part of their non-competing continuation applications which will be required from all recipients prior to the end of each of the first two budget periods.

A non-competing continuation application is a financial assistance request (in the form of an application or performance/progress report) for a subsequent budget period within a previously approved period of performance for which a recipient does not have to compete with other applicants. Approval of this application will allow the awardee to continue implementing its project plan and to receive its next 12-month increment of funding. Non-competing continuation applications should be submitted no later than 90 days before the end of the current budget period (e.g., if the budget period will end on August 10, submit the non-competing continuation application by May 10). Exact requirements for the non-competing continuation application as well as due dates will be laid out in the terms and conditions that accompany each awardee's Notice of Award and guidance provided by the CMS Project Officer.

Due to their non-competitive nature, continuation applications will not be reviewed or scored by an objective review panel. Instead, all continuation applications will be reviewed by CMS staff.

A5. Technical Assistance and Information for Prospective Applicants

HHS will hold two sessions designed to provide technical assistance for potential applicants. These sessions will provide applicants with an overview of this project, relay budget guidance,

¹⁵ Actual funding available to awardees from HHS during years 2 and 3 of this 36-month project period will be determined based on the total amount of funding made available to the Navigator program for the 12-month budget period, as well as each awardee's performance during the prior budget period, as outlined in Section A4. *Continued Funding*. As a result, individual award amounts during years 2 and 3 may be higher or lower than the amount awarded for the first 12-month budget period.

and review the instructions for applying outlined in this Funding Opportunity. Applicants are encouraged to submit questions in advance of each session to Navigatorgrants@cms.hhs.gov.

Technical Assistance Session #1

- Wednesday, June 9, 2021 from 3:00 to 4:00pm Eastern Daylight Time
- https://goto.webcasts.com/starthere.jsp?ei=1418490&tp_key=a3299cfc8e

Technical Assistance Session #2

- Monday, June 28, 2021 from 3:00 to 4:00pm Eastern Daylight Time
- https://goto.webcasts.com/starthere.jsp?ei=1470197&tp_key=d748689859

B. Federal Award Information

B1. Total Funding

HHS expects to award up to \$240,000,000 over the 36-month period of performance and up to \$80,000,000 during the first 12-month budget period of this multi-year award, pending availability of funds and current program priorities.

Applicants selected for award under this Funding Opportunity will be issued funding for the first 12-month budget period of the multi-year award and will be required to submit a non-competing continuation application for continued funding of their award prior to the end of the first and second budget periods. Cooperative agreement award amounts may vary annually¹⁶ and all awards issued under this Funding Opportunity are subject to the availability of funds and current program priorities.

In the absence of funding, HHS is under no obligation to make awards under this Funding Opportunity or can change the award amount prior to the issuance of a Notice of Award.

B2. Award Amount

HHS expects to award up to \$240,000,000 over the 36-month period of performance, with up to \$80,000,000 awarded for the first 12-month budget period of this multi-year award, pending availability of funds. Although initial funding awarded through this Funding Opportunity will cover only the first 12-month budget period of the three-year period of performance, applicants must still submit an estimated budget for each budget period (years 1, 2, and 3), using the funding allocation for the FFE state(s) it will propose to serve as provided in *Table 1: FFE State*

¹⁶ Actual funding available to awardees from HHS during years 2 and 3 of this 36-month project period will be determined based on the total amount of funding made available to the Navigator program for the 12-month budget period, as well as each awardee's performance during the prior budget period(s), as outlined in Section A4. Program Requirements, *Continued Funding*. As a result, individual award amounts during years 2 and 3 may be higher or lower than the amount awarded for the first 12-month budget period and is not appealable.

Funding Allocations below. Each applicant is eligible for only one cooperative agreement award, so long as the state(s) in which they are awarded cooperative agreement funds remains a FFE. For Years 2 and 3 of the period of performance, awardees will be able to revise their budgets, based on actual funding available to HHS and current program priorities, as part of their non-competing continuation applications, which will be required from all awardees for continued funding of their award during the 36-month period of performance.

For the first 12-month budget period, each FFE service area (state) will receive an apportionment of the \$80,000,000 in total available funding in the amounts listed in *Table 1: FFE State Funding Allocations* below, with a minimum of \$1,000,000 available per FFE state.

Table 1: FFE State Funding Allocations
(\$1,000,000 minimum available per FFE state)

FFE State	Total Number of Uninsured (under 65)¹⁷	FFE QHP Selections (2021 Plan Year)¹⁸	Total Funding Apportioned to FFE State¹⁹
Alabama	242,100	169,119	\$1,842,245
Alaska	45,500	18,184	\$1,000,000
Arizona	382,600	154,504	\$2,340,415
Delaware	30,900	25,320	\$1,000,000
Florida	1,608,000	2,120,350	\$14,532,590

¹⁷ See *Health Insurance Coverage in the United States: 2019*, US Census Bureau, September 15, 2020, <https://www.census.gov/library/publications/2020/demo/p60-271.html>. This report presents statistics on health insurance coverage in the United States based on information collected in the Current Population Survey Annual Social and Economic Supplement (CPS ASEC) and the American Community Survey (ACS).

¹⁸ See *2021 Marketplace Open Enrollment Period Public Use Files*, available here: <https://www.cms.gov/research-statistics-data-systems/marketplace-products/2021-marketplace-open-enrollment-period-public-use-files>.

¹⁹ Should a state not currently included in this list revert from a State-based Exchange (SBE) or SBE using the Federal Platform (SBE-FP) to an FFE, CMS will determine how to establish funding for a Navigator program in that state at that time.

FFE State	Total Number of Uninsured (under 65) ¹⁷	FFE QHP Selections (2021 Plan Year) ¹⁸	Total Funding Apportioned to FFE State ¹⁹
Georgia	711,600	517,113	\$4,913,575
Hawaii	23,600	22,903	\$1,000,000
Illinois	404,300	291,215	\$3,218,700
Indiana	272,100	136,593	\$1,846,845
Iowa	76,100	59,228	\$1,000,000
Kansas	137,800	88,627	\$1,017,470
Louisiana	199,000	83,159	\$1,263,650
Michigan	298,200	267,070	\$2,640,160
Mississippi	200,000	110,966	\$1,330,800
Missouri	256,700	215,311	\$2,138,790
Montana	53,000	44,711	\$1,000,000
Nebraska	63,500	88,688	\$1,000,000
New Hampshire	59,100	46,670	\$1,000,000
North Carolina	650,100	535,803	\$4,951,640

FFE State	Total Number of Uninsured (under 65) ¹⁷	FFE QHP Selections (2021 Plan Year) ¹⁸	Total Funding Apportioned to FFE State¹⁹
North Dakota	32,000	22,709	\$1,000,000
Ohio	412,800	201,069	\$2,705,270
Oklahoma	255,700	171,551	\$1,884,390
South Carolina	301,200	230,050	\$2,373,980
South Dakota	47,300	31,375	\$1,000,000
Tennessee	376,300	212,052	\$2,585,590
Texas	2,808,000	1,291,972	\$13,843,410
Utah	138,100	207,911	\$1,668,605
West Virginia	60,400	19,381	\$1,000,000
Wisconsin	205,800	191,702	\$1,901,875
Wyoming	50,700	26,728	\$1,000,000

The formula used to calculate each FFE state’s allotment in the aforementioned *Table 1: FFE State Funding Allocations* incorporates the number of uninsured eligible residents under age 65²⁰ and the number of individuals enrolled in individual market Exchange coverage in the FFEs.

²⁰ See <https://www.census.gov/library/publications/2020/demo/p60-271.html>: “For all analyses, the population is restricted to the civilian, noninstitutionalized population. For reporting purposes, the Census Bureau broadly classifies health insurance coverage as private insurance or public insurance.”

This formula takes into account that Navigators will be working with uninsured individuals, as well as consumers currently enrolled in Exchange coverage. This formula is also intended to help HHS apportion funding to enable awardees to fulfill the full scope of responsibilities as FFE Navigators.

To obtain the portion (in percent) of the eligible uninsured in a given FFE state for the first 12-month budget period of the period of performance, the total number of uninsured (under age 65) eligible residents in each FFE state was divided by the total number of uninsured eligible residents among all FFE states. To obtain the portion (in percent) of consumers enrolled in QHP coverage in a given FFE state for the first applicable 12-month budget period of the 36-month period of performance, the total number of consumers enrolled in QHP coverage through a given FFE during the 2021 open enrollment for the individual market was divided by the total number of consumers enrolled in QHP coverage during the 2021 open enrollment for the individual market among all states with an FFE. The total funding amount available through this Funding Opportunity was then apportioned according to each FFE state's portion of uninsured eligible residents and portion of consumers enrolled in QHP coverage through the FFEs in 2021. In cases where a FFE state's apportionment was less than \$1,000,000, funding was rounded up to \$1,000,000 by proportionately reducing funding from all FFE states with apportionments larger than \$1,000,000. The funding apportionment formula and funding table will be updated in subsequent budget periods based on funding availability and new data (if available). Updates to the funding allocation formula and funding table will be communicated to recipients as a part of the Non-Competing Continuation Application process.

The amount of funding being requested by an applicant within a FFE for the first 12-month budget period should be proportional to the scope and breadth of the activities being proposed and the portion of the FFE they plan to target. For example, an applicant proposing to serve the entire state of Alaska could apply for a maximum \$1,000,000 of the appropriated funds in the aforementioned *Table 1: FFE State Funding Allocations*, for the first 12-month budget year. Alternatively, an applicant only proposing to serve part of the State of Alaska could apply for less than the total amount of appropriated funds in their FFE state, allowing multiple applicants (if available) to be selected for an award in the state of Alaska. When making awards, HHS reserves the right to reduce the budget requested, or only partially fund proposed activities, based on its review of the expected activities, the reasonableness of the budget submitted by the applicant, and the availability of remaining funds for the FFE for which an award is made.

Continued funding throughout the 36-month period of performance will be contingent on the following:

- Timely and complete submission of the annual non-competing continuation applications,
- Strong performance (see Section A4. *Program Requirements*) during the previous budget period(s),
- Funding availability,
- Current program priorities, and
- The awardee's ability to continue meeting all eligibility requirements laid out in this Funding Opportunity, including continuing to serve in a state(s) with an FFE.

In subsequent funding cycles, awardees could receive decreased funding, or their cooperative agreement could be terminated, due to poor performance. This Funding Opportunity provides detailed information on the cooperative agreement requirements related to these activities and instructions for application submission.

Individual cooperative agreement award amounts will vary annually depending on:

- Total funding available to the Navigator program;
- Annual rate of uninsured;
- Current program priorities;
- Number and quality of eligible Navigator cooperative agreement applicants for a given FFE;
- Size and scope of the underserved or vulnerable population(s) a Navigator cooperative agreement applicant proposes to reach within the FFE(s) it proposes to serve; and
- Whether funds requested are for allowable costs.

When making awards, HHS reserves the right to reduce the budget requested, or only partially fund proposed activities, or not at all, based on its review of:

- The expected scope of the proposed targeted FFE service area;
- The reasonableness of performance metrics (project) goals laid out in the application;
- Target population(s) served by the applicant;
- Scope and breadth of the activities being proposed and the size of the population to be targeted;
- Proposed budget submitted by the applicant;
- Other awarded Navigator recipients in a given FFE; and

- The availability of remaining funds for the Exchange service area(s) which an award is made.

CMS reserves the right to conduct pre-award Negotiations with potential awardees. Based on this review, CMS will determine which applicants will receive cooperative agreement awards and, consistent with the guidelines outlined in Section A. *Program Requirements*, the dollar amount of each award. Successful applicants will receive one cooperative agreement award based on this Funding Opportunity.

CMS decisions regarding funding levels for each of the FFEs, as established in the aforementioned *Table 1: FFE State Funding Allocations*, and decisions regarding the specific funding levels for each cooperative agreement award, are not appealable. The decision not to award a cooperative agreement is also not appealable²¹. Please also note that awardees cannot receive more funding than requested in their application and may not apply for more than the maximum amount allocated for the FFE state(s) it proposes to serve, as noted in *Table 1: FFE State Funding Allocations*.

B3. Anticipated Award Dates

The anticipated award date is August 27, 2021.

B4. Period of Performance

The anticipated period of performance, also known as the project period, is 36 months from the date of the notice of award and funded in 12-month increments called budget periods.

B5. Number of Awards

HHS estimates the number of awards to be 85 to 120. All awards are subject to funding availability. In the absence of funding, HHS is under no obligation to make awards under this announcement.

B6. Type of Award

These awards will be structured as cooperative agreements. Under the Federal Grant and Cooperative Agreement Act of 1977, 31 U.S.C. 6301, *et seq.*, and implementing regulations at 45 C.F.R. part 75, a cooperative agreement is an alternative assistance instrument to be used in lieu of a grant whenever substantial Federal involvement with the recipient during performance is anticipated. The difference between grants and cooperative agreements is the degree of Federal programmatic involvement rather than the type of administrative requirements imposed.

²¹ See <https://sam.gov/>

Therefore, statutes, regulations, policies, and the information contained in the HHS Grants Policy Statement²² that are applicable to grants also apply to cooperative agreements, unless the award itself provides otherwise (*see also* F4. *Cooperative Agreement Terms and Conditions*).

B7. Type of Competition

This will be a competitive Funding Opportunity open to all eligible applicants identified in Section C1. *Eligible Applicants*.

C. Eligibility Information

C1. Eligible Applicants

This Funding Opportunity is open to individuals and private and public entities capable of carrying out the Navigator duties and other program requirements in an FFE, as outlined in statute, regulations, and this announcement (*see* Section A. *Program Description*).

Eligible applicants include:

Government Organizations

- State governments
- County governments
- City of Township governments
- Special District governments
- Native American tribal governments (Federally recognized)
- Native American tribal organizations (other than federally recognized tribal governments)

Education Organizations

- Independent School Districts
- Public and State Controlled Institutions of Higher Education
- Private institutions of higher education

Public Housing Organizations

- Public housing authorities
- Indian housing authorities

Nonprofit Organizations

²² The HHS regulation (45 C.F.R. Part 75) *effective December 26, 2014*, supersedes information on administrative requirements, cost principles, and audit requirements for grants and cooperative agreements included in the current (2007) HHS Grants Policy Statement where differences are identified.

- Nonprofits having a 501(c)(3) status with the IRS, other than institutions of higher education
- Nonprofits that do not have a 501(c)(3) status with the IRS, other than institutions of higher education

Other Eligible Applicants

- For-profit Businesses (organizations other than small businesses)
- Small Businesses
- Individuals
- Others (see below)

Under section 1311(i)(2)(B) of the ACA, eligible entities may include, but are not limited to, community and consumer-focused nonprofit groups; trade, industry, and professional associations; commercial fishing industry organizations; ranching and farming organizations; chambers of commerce; unions; resource partners of the Small Business Administration; other public or private entities or individuals that meet the requirements of this section. Other entities may include but are not limited to Indian tribes, tribal organizations, urban Indian organizations, Alaska Natives, and State or local human service agencies, other licensed insurance agents and brokers²³ and other entities capable of meeting program requirements.

Eligible applicants may choose to partner with other entities and/or individuals to form a consortium of subrecipients²⁴ in order to target a larger total portion of the underserved or

²³ ACA 1311(i)(4) prohibits a Navigator from being “a health insurance issuer and from “receiv[ing] 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 [QHP].” CMS regulations at 45 C.F.R. 155.210(d)(1)-(4) and 155.215(a)(1) implement this statutory provision. In guidance, CMS has explained that agents and brokers who sell lines of insurance other than health insurance or stop loss insurance (for example, auto, life, and homeowners’ policies) would not be prohibited from receiving consideration from the sale of those other lines of insurance while serving as a Navigator. However, agents and brokers that sell lines of insurance other than health insurance or stop loss insurance, and that opt to become Navigators, would have to disclose these non-prohibited lines of business to the FFE and (in plain language) to each consumer assisted, per 155.215(a)(1)(i)(iv)(A).

²⁴ A consortium for the purposes of this Funding Opportunity refers to two or more individuals, two or more private or public organizations, or a combination of individual(s) and private or public organization(s) that have identified a lead entity to serve as the primary applicant for, and recipient of, federal funding, and that will serve as the pass-through entity for making federal funds awarded under the funding opportunity available to other consortium members. The lead applicant should demonstrate through its application a plan to establish subawards and contracts with other consortium members to fulfill all the requirements of this Funding Opportunity. Applicants should be aware that if they intend to transfer performance of any portion of the substantive programmatic work under a CMS Navigator cooperative agreement, they must indicate this information, to the extent known, at the time of the application. CMS prior approval is required for the transfer of substantive programmatic work from a recipient to a subaward or contract once the period of performance has commenced. CMS would consider activities that Navigators are required or authorized to perform under CMS Navigator program regulations to be substantive programmatic work subject to this prior approval requirement.

vulnerable populations. In the case of an application from more than one entity or individual (i.e., a consortium), applicants must designate a lead applicant to serve as the primary contact for, and recipient of, federal funding, and that will serve as the pass-through entity for making federal funds awarded under the Funding Opportunity available to other consortium members.

To receive a cooperative agreement, applicants will be expected to:

- Demonstrate that they have existing relationships in the communities they expect to target, or could readily establish those relationships²⁵, including relationships with uninsured and underinsured consumers, and with a particular emphasis on those populations which the Exchange has identified in this Funding Opportunity as being vulnerable or underserved (*see* Section A4. *Program Description*);
 - For purposes of this Funding Opportunity, the Exchange will consider a population to be underserved or vulnerable using factors such as race or ethnicity, gender, education or income, disability, geographic location (e.g., rural or urban), or sexual orientation. Examples of underserved or vulnerable populations include, but are not limited to²⁶:
 - Racial and ethnic minorities
 - Rural communities
 - Lesbian, gay, bi-sexual, transgender, queer, and other (LGBTQ+) individuals
 - Low income or homeless individuals
 - American Indians and Alaska Natives (AI/AN)
 - People with physical or intellectual disabilities or cognitive, hearing, speech, and/or vision impairments
 - Pregnant women, new mothers, and women with children
 - Individuals with mental health or substance-related disorders
 - Individuals with HIV/AIDS
 - Medicaid-eligible consumers who are not enrolled in coverage despite being eligible for Medicaid

²⁵ See ACA Section 1311(i)(2): <https://sites.google.com/site/healthreformnavigator/ppaca-sec-1311>, and CMS regulations at 155.210(c).

²⁶ See *Serving Vulnerable and Underserved Populations* (Oct. 15, 2020), at: <https://marketplace.cms.gov/technical-assistance-resources/training-materials/vulnerable-and-underserved-populations.pdf>

- Applicants may propose additional underserved or vulnerable populations in their applications for the FFE’s approval;
- Demonstrate their past successes leveraging local community partnerships and collaborations to reach consumers, including underserved or vulnerable populations, and how their experience will support their work as a Navigator awardee, including: conducting public education and outreach activities, assisting consumers in obtaining health coverage eligibility determinations, finding available health insurance options (including public programs), and working with individuals with limited English proficiency, individuals with disabilities, and underserved or vulnerable populations; and
- Discuss their experience providing information and services in a fair, accurate, and impartial manner to diverse communities, in a manner that is culturally competent and linguistically appropriate.

Previous HHS Navigator awardees should be prepared to describe their success with achieving project goals under any of the prior Navigator funding opportunities.

All applicants should indicate in the cover letter if they, or any of their consortium members if applicable, were ever on a formal corrective action plan, including receiving a warning letter, and for how long and when they successfully completed the corrective action plan, while serving as an HHS Navigator awardee or subawardee/contractor of an HHS Navigator awardee (or within last 3 years as an awardee of any other federal grant/cooperative agreement) and a description of how the issue(s) was resolved. In addition, CMS regulations, at 45 C.F.R. § 155.210(c)(1)(iii), require that entities that wish to become Navigators must meet any applicable State licensing, certification, or other standards, so long as such standards do not prevent the application of the provisions of Title I of the ACA.

C2. Cost Sharing or Matching

Cost sharing or matching is not a requirement of this Funding Opportunity.

C3. Letter of Intent

A letter of intent is not a requirement of this Funding Opportunity.

C4. Ineligibility Criteria

Each award made under this Funding Opportunity should not be used for activities funded by other CMS or federal grant/cooperative agreement awards. In the budget request, applicants should distinguish between activities that will be funded under this application and similar activities funded with other CMS or federal sources, if applicable.

The following entities are *ineligible* to apply under this Funding Opportunity:

- Health insurance issuers;
- Subsidiaries of health insurance issuers;
- Issuers of stop loss insurance and their subsidiaries;
- Associations that include members of, or lobby on behalf of, the insurance industry; or
- Recipients of any direct or indirect consideration 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. CMS has clarified in regulation that no health care provider shall be ineligible to operate as a Navigator in an FFE solely because it receives consideration from a health insurance issuer for health care services provided.

Consistent with 45 C.F.R. § 155.215(a)(1)(i), all applicants (individuals, entities, and all members making up a consortium) must submit a brief statement (one or two short paragraphs) within the Cover Letter attesting that they, as Navigator cooperative agreement applicants, are not ineligible entities, and include attestations that all other Navigator entities (including subrecipients and contractors performing Navigator duties, the Navigator(s) including the Navigator's staff),²⁷ do not have any of the prohibited relationships with health insurance or stop loss insurance issuers that are outlined above.

As is explained in 45 C.F.R. § 155.215 and the preamble language discussing that provision, some conflicts of interest (other than the prohibited relationships outlined above) would not be absolute bars to service as a Navigator, provided that the conflict of interest would not ultimately prevent the entity or individual from providing information and services in a fair, accurate, and impartial manner. In addition, in accordance with 45 C.F.R. § 155.215(a)(1)(ii) and in compliance with the Standard Terms and Conditions that will be included in the Notice of Award, **all successful applicants will be required to provide a written plan to remain free of conflicts of interest and to disclose to CMS, as operator of the FFE, certain non-disqualifying conflicts of interest as specified in 45 C.F.R. § 155.215(a)(1)(iv).**

C5. Single Application Requirement

Applicants may submit only one application. An applicant may propose to serve populations in multiple FFE service areas through the submission of one application with separate budget narratives and project (metric) goals for each FFE service area it proposes to serve (*see also* Sections A4. *Program Requirements* and B2. *Award Amount*).

²⁷ See the conflict of interest regulations at https://www.ecfr.gov/cgi-bin/text-idx?c=ecfr&rgn=div5&view=text&node=45:1.0.1.2.70&idno=45#se45.1.155_1215

C6. Continued Eligibility

Recipients must continue to meet all eligibility requirements and reporting deadlines (*see also* Sections A4. *Program Requirements*, C1. *Eligible Applicants*, and F5. *Reporting*) laid out in this Funding Opportunity to be eligible throughout the initial 12-month budget period, and to remain eligible for a non-competing continuation award for subsequent budget periods of the 36-month period of performance. In addition, recipients must demonstrate strong performance during the previous budget period(s) to be issued additional budget period funding. At any time in the period of performance, recipients could receive decreased funding or their award could be terminated if they fail to perform the requirements of the award.

C7. EIN, DUNS, and SAM Regulations

In order to apply, all applicants are required to have a valid Employer Identification Number (EIN), otherwise known as a Taxpayer Identification Number (TIN); a Dun and Bradstreet (D&B) Data Universal Numbering System (DUNS) number; and be registered in the System for Award Management (SAM) database (<https://beta.sam.gov/>) to be able to submit an application at grants.gov. See Appendix II. *Application and Submission Information* for descriptions of EIN, DUNS, and SAM.

C8. Foreign and International Organizations

Foreign and International Organizations are *not* eligible to apply.

C9. Other Eligibility Requirements

Not-applicable.

D. Application and Submission Information

D1. Address to Request Application Package

Application materials are available at <https://www.grants.gov>. Please note that CMS requires electronic submission of applications for all Notice of Funding Opportunities through the Grants.gov website. See Appendix II. *Application and Submission Information* for additional requirements and instructions on how to apply.

D2. Content and Form of Application Submission

a. Application Format

Applications determined to be ineligible, incomplete, and/or nonresponsive based on the initial screening may be eliminated from further review. However, in accordance with HHS Grants Policy, the CMS, Office of Acquisition and Grants Management (OAGM), Grants Management

Officer in his/her sole discretion, may continue the review process for an ineligible application if it is in the best interests of the government to meet the objectives of the program. Each application must include all contents of the application package, in the order indicated, and conform to the following formatting specifications:

- The required page size is 8.5” x 11” letter-size pages (one side only) with 1” margins (top, bottom, and sides).
- All pages of the project and budget narratives as well as other required narrative documents must be paginated in a single sequence.
- Font size must be at least 12-point with an average of 14 characters per inch (CPI).
- The **Project Narrative** may be single-spaced, double-spaced, or a combination of single and double-spaced. The page limit for this document is **20 pages**.
- The **Budget Narrative** may be single-spaced. The page limit for this document is **15 pages per FFE state**.
- The **Business Assessment of Applicant Organization** may be single spaced. The page limit for this document is **12 pages**.
- **Tables included within any portion of the application must have a font size of at least 12-point with a 14 CPI, *may* be single spaced, and must follow all other formatting requirements outlined in this section. Tables are counted towards the applicable page limits.**
- The **Project Abstract** is restricted to a **one-page summary** that may be single-spaced.
- The **total page limit** for an applicant proposing to serve in one FFE state is **48 pages**.
 - Applicants proposing to serve in multiple FFE states must submit a separate Budget Narrative for each FFE state they are proposing to serve.
 - If an applicant, for example, is proposing to serve two FFE states, then it must submit two separate budget narratives, each not exceeding the 15 page limit. In this example, the total page limit for the applicant would be 63 pages.

- The following required application documents are **excluded from the page limitations** described previously:
 - Standard Forms,
 - Mandatory Cover Letter/Cover Page
 - Project Site Location Form, and
 - Negotiated Indirect Cost Rate Agreement.

b. Standard Forms

The following forms must be completed with an electronic signature and enclosed as part of the application:

1. Project Abstract

A one-page abstract serves as a succinct description of the proposed project and must include the goals of the project (consistent with what is discussed in the *Project Narrative*), the subrecipients or contractors that will perform Navigator functions (if applicable), including those entities that are part of a consortium and consortium or project name (if applicable); the amount of funding requested for each FFE state per 12-month budget period for which the applicant seeks funding; the population(s) or group(s) that the applicant expects to target, including size of the underserved and vulnerable populations the applicant proposes to reach; an *alphabetized list of counties*, unless statewide (in which case note as such), that the applicant proposes to target within each FFE state(s) for which the applicant seeks funding; and a description of how the cooperative agreement will be used to perform Navigator functions as outlined in 45 C.F.R. § 155.210 and § 155.215. The abstract is often distributed to provide information to the public and Congress, so please write the abstract so that it is clear, accurate, concise, and without reference to other parts of the application. ***Exclude personal identifying information from the abstract.*** In the Grants Application Package at <https://www.grants.gov> select the Project Abstract Summary and complete the form.

2. SF-424: Official Application for Federal Assistance

Note: On SF-424 “Application for Federal Assistance”

- On Item 15 “Descriptive Title of Applicant’s Project,” state the specific cooperative agreement funding opportunity for which you are applying.
- Check “No” to item 19c, as Review by State Executive Order 12372 does not apply to this cooperative agreement funding opportunity.
- The Authorized Organizational Representative (AOR) completes and signs this form.

- ***Note: The signature of the individual that submits the application to Grants.gov populates throughout the application. The signature must match the name of the AOR. Other signatures will not be accepted.***

The AOR is the designated representative of the applicant/awardee organization with authority to act on the organization's behalf in matters related to the award and administration of grants. In signing a grant application, the AOR agrees that the organization will assume the obligations imposed by applicable Federal statutes and regulations and other terms and conditions of the award, including any assurances, if a grant is awarded. These responsibilities include accountability both for the appropriate use of funds awarded and the performance of the grant-supported project or activities as specified in the approved application.

3. SF-424A: Budget Information Non-Construction

4. SF-424B: Assurances-Non-Construction Programs

5. SF-LLL: Disclosure of Lobbying Activities

All applicants must submit this SF-LLL form. If your entity does not engage in lobbying, please insert "Non-Applicable" on the form and include the required AOR name, contact information, and signature. Please note that the application kit available online on the Grants.gov website is utilized for many programs and therefore Grants.gov may designate this form as optional to allow for flexibility amongst programs. However, this form is **required** as part of the application package and must be submitted for the application to be considered eligible for review.

6. Project Site Location Form(s)

All applicants must submit this Project Site Location form. Please note that the application kit available online in Grants.gov is utilized for many programs and therefore Grants.gov may designate this form as optional to allow for flexibility amongst programs. However, this form is **required** as part of the application package and must be submitted for the application to be considered eligible for review.

c. Mandatory Application Cover Letter

The applicant is required to include a cover letter that clearly provides the following information:

- Project Title
- Name of Applicant Organization
 - Applicant must specify who will perform the cooperative agreement activities under this Funding Opportunity (individual, entity, or consortium).

- In the case of an entity or consortium performing cooperative agreement activities, the lead applicant must list all consortium partners and provide a description of the organizational structure(s) of the entity or consortium and which partners will be paid with Navigator cooperative agreement funds to carry out the Navigator activities under this Funding Opportunity.
- Indicate whether the applicant is an eligible public or private entity, individual, or consortium and the entity type (e.g., community or consumer-focused nonprofit group, or any other entity or individual who meets the requirements set forth in 45 C.F.R. § 155.210)
- Authorized Organizational Representative (AOR) Name and Contact Information (email and phone number)
- Project Director Name and Contact Information (email and phone number)
- Internal and External Contacts²⁸ (first and last names, phone numbers, and email addresses, and if one of these roles are to be held by the AOR or PD that must be specified)
- FFE state(s) to be served and an alphabetized list of all counties the applicant proposes to target. If proposing to serve an entire FFE state(s), may note *statewide* instead.
- Total Amount of funding requested for the 36-month period of performance, per FFE if proposing to serve in multiple FFE states
- List of Organization’s Current Board of Directors
- Brief summary of whether the applying entity, individual, or any member of a consortium or contractor performing Navigator activities under this Funding Opportunity has ever been on a formal corrective action plan, including a warning letter, duration, and the status towards meeting all components of the corrective action plan, while serving as a HHS Navigator awardee (or within last 3 years as an awardee of any other federal grant/cooperative agreement). **Failure to provide this information in the cover letter may prevent an applicant from being funded.**

²⁸ If the applicant receives an award, the designated internal contact will be CMS’ point of contact for day-to-day matters related to the operation of the Cooperative Agreement (typically the same person as the identified Principal Investigator/Project Director). According to the HHS GPS, the Principal Investigator/Project Director (PI/PD) is the individual designated by the recipient, responsible for the scientific, technical, or programmatic aspects of the grant and for day-to-day management of the project or program. The awardees designated external contact will serve as the primary point of contact for external stakeholders, such as local, state, and regional entities interested in collaboration or media inquiries. This is also the person whose name and contact information is on things like the Navigator grantee summaries and CCIIO website for example.

- Brief statement in the Cover Letter attesting that the applying entity (including entity, individual, or any member of a consortium) is not an ineligible entity, as outlined in 45 C.F.R. §§ 155.210(d) and 155.215(a)(1)(i), and *C4. Ineligibility Criteria*. The letter **must** also include **attestations that all other Navigator entities (including subrecipients and contractors performing Navigator duties, the Navigator(s) including the Navigator's staff),²⁹ do not have any of the prohibited relationships with health insurance or stop loss insurance issuers that are outlined in C4. Ineligibility Criteria.**

d. Project Narrative (maximum of 20 pages)

The project narrative must be no more than 20 pages in length and is expected to address in a detailed, chronological, and organized manner all of the required elements included below. The applicant should explain how they plan to implement the first year of the multi-year cooperative agreement, and ultimately, meet the objective of providing Navigator services as outlined in 45 C.F.R. §§ 155.210 and 155.215. In addition, the applicant should include a high-level discussion of its plans for years two and three of the period of performance.

Under each element below, current Navigator awardees should provide information which is inclusive of activities funded or performed under their current HHS Navigator award and also distinguish any activities currently being funded through an HHS Navigator cooperative agreement from any new activities to be supported through this Funding Opportunity.

1. Type of entity and description of the community(ies) or group(s) the applicant expects to serve

- Applicants must clearly specify in the introduction of the Project Narrative whether they are current and/or past HHS Navigator awardees, or if they will be a new Navigator awardee.
- Applicants must list who will perform Navigator activities under this cooperative agreement (individual, entity, or consortium).
 - In the case of an entity or consortium performing Navigator activities, the applicant must describe the type of entity and provide a description of the organizational structure(s) of the entity or consortium, the role of each consortium member, the value they will add to the proposed project, and which consortium members will be paid with Navigator cooperative agreement funds to carry out Navigator activities.
- Applicants must also describe:

²⁹ See the conflict of interest regulations at https://www.ecfr.gov/cgi-bin/text-idx?c=ecfr&rgn=div5&view=text&node=45:1.0.1.2.70&idno=45#se45.1.155_1215

- The community(ies) or population(s) they expect to target and why;
 - Applicants that demonstrate a focus and commitment to target those populations or communities defined in this Funding Opportunity as being underserved or vulnerable, while also being prepared to assist any consumer seeking assistance, will receive a higher score in this category than applicants that do not.
 - The FFE state(s) and county(ies) in which this(ese) population(s) reside(s), and the reason for expecting that they will focus their efforts on primarily that (those) population(s) or community(ies); and
 - The percentage of the state’s uninsured population encompassed in the population(s) or community(ies) they expect to serve.
- Applicants proposing to serve in multiple areas of an FFE, or across multiple FFE states, are also expected to describe how they will balance their efforts among the different areas based on the needs of the uninsured populations in those areas.
 - Applicants proposing to serve across multiple FFEs *must also submit separate project (metric) goals (see sub-section e3. Plan Year 2021-2022 Project Goals)* for each FFE they are proposing to serve.
 - Tribal Applicants should list the federally recognized Indian Tribal lands of their target Tribal population, the counties covered, and how they plan to serve the different geographic areas of their target population in their application.

2. Scope of Activities

Applicants must describe how the applying entity, individual, or consortium proposes to operate as a Navigator(s), to include:

- A plan for carrying out, at a minimum, the required Navigator duties in statute and regulation (*see Section A4. Program Requirements* for an overview);
- A description of the applicant’s strategy for providing targeted assistance to the underserved or vulnerable population(s) the applicant plans to serve in their proposed FFE service area(s), while also being prepared to assist any consumer seeking assistance, including:
 - A discussion of the applicant’s plans for conducting public education and outreach activities to raise awareness about the FFEs and help consumers understand their health coverage options,
 - How the planned education and outreach activities will meet the needs of the identified underserved or vulnerable population(s),

- A description of some of the settings and venues where the planned education and outreach activities will take place and why these venues are appropriate for reaching the identified underserved or vulnerable population(s), and
 - A description of the applicant’s communication and marketing plan, highlighting the ways in which it has been tailored to meet the needs of the underserved or vulnerable population(s) the applicant is proposing to serve.
- A plan to facilitate selection of a QHP
 - This could include, for example, helping consumers understand their new health coverage and how to use it; assistance with updating an application for coverage through a Marketplace, including reporting changes in circumstances, and assisting with submitting information for eligibility redeterminations; answering questions about paying premiums for coverage enrolled in through a Marketplace; helping the consumer obtain assistance for post-enrollment problems such as failure to receive important coverage documents; educating consumers about their rights with respect to coverage available through the Marketplace, including the right to preventive health services without cost sharing; and helping the consumer obtain assistance with claims denials.
- A plan for making referrals to any applicable office of health insurance consumer assistance or health insurance ombudsman established under Section 2793 of the Public Health Service Act, or any other appropriate State agency or agencies, to assist enrollees with grievances, complaints, or questions about their health plan, coverage, or a determination related to their coverage.
- A discussion of the nature of the applicant’s existing relationships and how additional relationships could be readily established with employers and employees, consumers (including uninsured and underinsured consumers), or self-employed individuals, including:
 - How it plans to leverage these relationships to deliver effective, in-person outreach and enrollment assistance to its proposed underserved or vulnerable population(s), and
 - Providing a few examples (no more than three) of past successes leveraging these relationships to reach underserved or vulnerable consumers and increase awareness among the remaining uninsured of the coverage options available through the FFEs.

Applicants that demonstrate the ability to maintain these relationships and establish new relationships through a physical presence in their proposed service area(s) may receive a higher score in this category than those who do not.

- A plan for providing information to consumers in a manner that is culturally and linguistically appropriate, including individuals with limited English proficiency, and that is accessible to individuals with disabilities, consistent with the requirements of §§ 155.210(e)(5) and 155.215(c) and (d). Applicant’s plan should discuss:
 - How they will assess the needs of the population(s) they intend to serve, while also being prepared to assist any consumer seeking assistance, and
 - How the proposed approach and strategy will meet the needs of underserved or vulnerable population(s) based on factors such as race or ethnicity, gender, education or income, disability, geographic location (e.g., rural or urban), or sexual orientation (*see also* Section A4. *Program Requirements*).
- A plan to perform the statutory and regulatory duties of a Navigator for the entire length of the cooperative agreement;
- An attestation that all staff and volunteers working under this cooperative agreement will remain free of conflicts of interest during their term as a Navigator; and
- A plan to ensure staff and volunteers complete all required training prior to carrying out any required or authorized Navigator functions. Applicant’s plan should include:
 - A discussion of the individual/entity/consortium’s operational readiness to meet the self-imposed training and certification goals by October 1, 2021, and
 - Provide two examples of the applicant’s ability to ramp up quickly, including experience meeting project goals in a short time frame and managing subrecipients (if applying as a consortium).

3. Plan Year 2021-2022 Project Goals

Applicants should carefully develop project goals for carrying out the required Navigator activities during the first 12-month budget period of the 36-month period of performance with the following considerations in mind:

- Size of their proposed FFE service area(s)
- Target population(s)
- Size and scope of their budget request

Applicants proposing to serve multiple FFEs must develop and submit separate project goals for each FFE.

If awarded funds, recipients will need to submit project goals for budget years 2 and 3 of this 36-month period of performance as part of their annual non-competing continuation applications. More importantly, if awarded funds, recipients will be held accountable for meeting their

proposed project goals. Recipients will be required to submit weekly, monthly, and quarterly metric reports to CMS, which will be used to track awardee progress towards meeting the project goals outlined below. Failure to meet the proposed project goals, especially goals that relate to work performed during the open enrollment (OE) period, or decreasing project goals after funds are awarded, may negatively impact an awardee's application for future Navigator funding.

As described above, all applicants must submit project goals that align with the size and scope of their budget request for the first 12-month budget period within the 36-month period of performance for each of the items listed below. **All goals should be for the entire 2021-2022 budget period unless otherwise noted:**

- Number of public outreach, enrollment, and educational events (in-person or virtual) expected to be hosted for purposes of raising awareness about the FFEs and helping consumers understand their health coverage options
- Number of consumers expected to be reached through marketing and promotion activities, as measured through social media impressions, viewership, listenership, etc.
- Number of consumers expected to receive 1:1 assistance from an FFE Navigator in response to general or specific inquiries
- Number of consumers expected to be assisted by an FFE Navigator with enrolling or re-enrolling in a QHP
- Number of consumers expected to be assisted by an FFE Navigator with Medicaid/CHIP applications or referrals
- Number of FFE Navigators to be federally trained and certified/re-certified by **October 1, 2021**, broken out as follows:
 - Total percentage of full-time employees (FTE)
 - Total number of full-time and part-time Navigators
 - Total number of volunteer Navigators
- Number of FFE Navigators available to assist consumers **throughout the duration of the 2021-2022 budget period**, broken out as follows:
 - Total percentage of full-time employees (FTE)
 - Total number of full-time and part-time Navigators
 - Total number of volunteer Navigators

In addition to the required Navigator activities, applicants may also include project goals for assisting consumers with any of the *permissible* FFE Navigator activities outlined in 155.210(e)(9)³⁰ as part of their application.

4. Ensuring Privacy and Security of Consumer Personally Identifiable Information (PII)

Protecting consumers' personally identifiable information is of great importance and applicants should demonstrate the ability to ensure consumers are protected. Applicants should develop and include with their application a plan to protect the privacy and security of consumers' PII that includes a discussion of the following:

- How the applicant intends to comply with FFE privacy and security standards and to use computers, including laptops or tablets, in accordance with those standards and 45 C.F.R. § 155.260. The privacy and security standards for current Navigator awardees under opportunity CA-NAV-19-001 can be found here: <https://www.cms.gov/files/document/2020-privacy-and-security-terms-and-conditions-508-ejs-5-4-2021.pdf>;
- Process for ensuring all persons performing Navigator functions and others who have access to sensitive information or PII related to the organization's Navigator functions complete all required training related to ensuring privacy and security of consumer PII, including training on compliance with FFE privacy and security standards;
- Process for ensuring that applicants for coverage available through an Exchange application (1) are informed of the functions and responsibilities of Navigators, including that Navigators are not acting as tax advisers or attorneys when providing assistance as Navigators and cannot provide tax or legal advice within their capacity as Navigators; (2) provide authorization prior to a Navigator's obtaining access to their personally identifiable information; and (3) may revoke at any time the authorization provided to the Navigator;
- How the applicant plans to conduct ongoing monitoring throughout the duration of the period of performance to ensure that persons performing Navigator functions and others who have access to sensitive information or PII related to the organization's Navigator functions are protecting consumer PII and other sensitive data in

³⁰ These activities include assisting consumers with complex cases and other Exchange-related assistance; coverage to care; taxes, exemptions, and appeals; and referral activities. While these additional activities are no longer required, awardees who choose to perform these optional activities may continue to report this work to CMS as part of their weekly, monthly, and quarterly programmatic progress reporting.

accordance with their training and the organization's operating policies. Applicant should also discuss mitigation plans for addressing PII breaches, should any occur.

- Applicant should also discuss the following:
 - Plans for training persons performing Navigator functions and others who have access to sensitive information or PII related to the organization's Navigator functions on how to receive, secure, and handle PII or other sensitive data, and
 - Process for evaluating qualifications of persons performing Navigator functions and others who have access to sensitive information or PII related to the organization's Navigator functions for receiving, securing, and handling PII or other sensitive data, including if background checks are conducted. If background checks are conducted, applicants should explain on whom they are conducted, what would be considered to be adverse findings of a background check and/or findings that would preclude someone from working on the organization's Navigator activities or accessing PII related to those activities, and whether the following types of recommended background checks are used:
 - Office of Inspector General (OIG) Sanction Check
 - HHS OIG has a list that identifies individuals who are debarred/sanctioned from participating on any Federal programs.
 - Criminal Background Investigation
 - This type of investigation can include a national criminal database search, as well as a locality search (to include Federal, District & County Court and criminal records check).
 - State-required Background Check
 - This can include any investigations required of Navigators under state law.

5. Accomplishments

Applicants must include information regarding the individual, entity, or consortium's track record and accomplishments involving the activities outlined below. If the applicant is a consortium, accomplishments for each member should be discussed.

- Developing and maintaining relationships with key stakeholders, including employers and employees, consumers (including consumers who are uninsured and underinsured), and self-employed individuals. Applicant should highlight past successes leveraging local community partnerships and collaborations to reach marginalized communities;

- Conducting public education and outreach activities that raise awareness about the FFEs, focused on harder-to-reach populations and the remaining uninsured;
- Providing information and services in a fair, accurate, and impartial manner to underserved or vulnerable population(s) that have historically experienced health care access barriers in a manner that is culturally competent and linguistically appropriate to that community(ies), while remaining ready to serve any consumer seeking assistance;
- Facilitating enrollment in QHPs by helping consumers with varying levels of education, financial, and health literacy understand basic concepts related to health coverage and how to use their coverage once enrolled; and
- Effectively working with individuals with limited English proficiency, individuals with disabilities, underserved, vulnerable, or rural populations, including ensuring accessibility and usability of Navigator tools and functions³¹.

6. Expertise of Personnel

Applicants must ensure the following information is included in their application:

- Brief biographical statements for the key personnel (AOR and Project Director) discussing the level of expertise they have administering a federal grant (or cooperative agreement)³² and at least two examples of successful compliance with the terms and conditions associated with a federal grant (or cooperative agreement);
- Outline of how the AOR and Project Director will oversee and monitor the activities proposed in the project narrative;
- Description of the applicant's current staffing capacity, along with the anticipated timeline for bringing any additional staff (including FTE, PTE, and volunteers) onboard if awarded;
- Plan for ensuring that all paid and unpaid staff performing Navigator duties successfully complete the required federal certification or recertification training, as well as any applicable state Navigator requirements, before performing any Navigator functions in the FFEs;
- Description of staff's expertise with the FFEs, conducting public education and outreach activities, assisting consumers in obtaining health coverage eligibility determinations,

³¹ See 45 C.F.R. § 155.210(e)(5)

³² This discussion can include but is not limited to: compliance with submitting timely and accurate programmatic and financial reports in accordance with applicable guidance provided by the grantor (CMS or another federal agency (please specify the agency, grant name, and grant year); properly closing out a federal grant at the end of the period of performance (please specify the federal agency, grant name, and grant year) in the prescribed timeframe; or effectively communicating with and providing information as requested to assigned Project Officer and Grants Management Specialist.

finding available health insurance options (including public programs), and working with individuals with limited English proficiency, individuals with disabilities, and underserved or vulnerable populations; and

- Description of how the proposed staffing for this project reflects the cultural, linguistic, and other characteristics/preferences of the target population(s) that the applicant proposes to serve, and their ability to provide assistance to consumers in a way that is accessible and accommodating to meet the needs of individuals with disabilities.

If applicant is applying as the lead applicant for a consortium, the following should also be included:

- Description of the role each subrecipient will have in this project and the value they will add to the applicant's proposal; and
- Description of the current staffing capacity of each subrecipient, along with the anticipated timeline for bringing any additional staff (including FTE, PTE, and volunteers) onboard if awarded.

If selected for an award, applicants will be required to submit a plan to ensure personnel comply with the conflict of interest provisions in 45 C.F.R. § 155.215. For current and/or past HHS Navigator awardees, applications should describe the level of expertise of personnel both before and after receipt of previously awarded Navigator funding, including how they meet the requirements set forth in 45 C.F.R. §§ 155.210 and 155.215, and describe how any additional funding requested in this category will be used for new activities related to developing staff expertise, for example, training staff that the entity expects to add during the period of any new grant, or conducting recertification training for all existing staff.

e. Work Plan and Timeline (maximum of five pages)

A detailed timeline is required for the first 12-month budget period under the 36-month period of performance discussing the goals and objectives consistent with those outlined in the applicant's project narrative. The work plan should document plans for use of the funds, as well as associated timeframes, including time spent completing the HHS-provided training and examination prior to performing any Navigator-related functions. Prior HHS Navigator awardees who receive a new cooperative agreement will also be required to undergo recertification training. Applicants should identify, by name and title, the key personnel such as the AOR, PD, lead Navigator(s), and any other key individuals responsible for accomplishing the goals of the project.

f. Budget Narrative (maximum of 15 pages per FFE state)

Applicants should supplement standard form SF-424A with a Budget Narrative that includes a yearly breakdown of costs for each line item outlined in the SF-424A, according to a 12-month

period. Applicants should include a clear description of the proposed activities to be covered with award funds for each activity/cost within the line item. The application should clearly define the proportion of the requested funding designated for each activity and justify the applicant's readiness to receive funding. The budget must also separate out funding administered directly by the lead individual or entity from funding that will be provided to subrecipients, including consortium partners.

For additional information and instructions for completing the SF-424A and Budget Narrative, please refer to Appendix I. *Guidance for Preparing a Budget Request and Narrative*.

If the applicant is proposing to serve multiple FFE states, a separate Budget Narrative should be submitted for each state; however, **only one** SF-424A may be submitted and should include the total funds requested for each line item category for all Exchange states/service areas, as well as an overall total cooperative agreement request for all Exchange states/service areas. The Budget Narrative for each state should be no more than 15 pages in length. Additionally, **all applicants should be prepared to revise their project scope and budget upon award if they are not funded to serve in all proposed Exchange service areas and/or at the full amount requested.**

g. Business Assessment of Applicant Organization (maximum 12 pages)

As required by 45 CFR §75.205 for competitive grants and cooperative agreements, CMS evaluates the risk posed by an applicant before they receive an award. This analysis of risk includes items such as financial stability, quality of management systems, internal controls and the ability to meet the management standards prescribed in 45 CFR Part 75.

Applicants must review, answer, and submit the business assessment questions outlined in Appendix III. *Business Assessment of Applicant Organization* as part of their application.

D3. Unique Entity Identifier and System for Award Management (SAM)

Unless the applicant is an individual or Federal awarding agency that is excepted from those requirements under 2 CFR 25.110(b) or (c), or has an exception approved by the Federal awarding agency under 2 CFR 25.110(d)), each applicant is required to:

- i. be registered in SAM before submitting its application;
- ii. provide a valid unique entity identifier in its application; and
- iii. continue to maintain an active SAM registration with current information at all times during which it has an active Federal award or an application or plan under consideration by a Federal awarding agency.

The Federal awarding agency may not make a Federal award to an applicant until the applicant has complied with all applicable unique entity identifier and SAM requirements. If an applicant

has not fully complied with the requirements by the time the Federal awarding agency is ready to make a Federal award, the Federal awarding agency may determine that the applicant is not qualified to receive a Federal award and use that determination as a basis for making a Federal award to another applicant.

D4. Submission Dates and Times

All applications must be submitted electronically and be received through www.grants.gov by the date and time set forth below. Applications received after 3:00 pm, Eastern Time, on the date set forth below will not be reviewed or considered for award.

Due Date: July 6, 2021

3:00 PM Eastern U.S. Time (Baltimore, MD)

D5. Intergovernmental Review

Program is not subject to Executive Order 12372, “Intergovernmental Review of Federal Programs” (45 CFR 100). Please check box “C” on item 19 of the SF 424 (Application for Federal Assistance) as Executive Order 12372 does not apply to these cooperative agreements.

D6. Cost Restrictions

Prohibited Uses of Cooperative Agreement Funds

Awards issued by the Department of Health and Human Services through the Cooperative Agreement to Support Navigators in Federally-facilitated Exchanges Funding Opportunity may **not** be used for any of the following purposes:

- To cover the costs to provide direct health care services to individuals;
- To match any other Federal funds;
- To provide services, equipment, or support that are the legal responsibility of another party under Federal or State law (such as vocational rehabilitation or education services) or under any civil rights laws. Such legal responsibilities include, but are not limited to, modifications of a workplace or other reasonable accommodations that are a specific obligation of the employer or other party;
- To supplant existing State, local, or private funding of infrastructure or services such as staff salaries, etc.;
- To supplant funds provided under Funding Opportunity CA-NAV-19-001, entitled, “Cooperative Agreement to Support Navigators in Federally-facilitated Exchanges;”
- To cover any pre-award costs;

- To carry out services that are the responsibility of the Exchange, such as eligibility determinations and transferring enrollment information for consumers to a QHP;
- To assist consumers residing in a state with a State-based Exchange (*see* Appendix VI, *List of States for which Cooperative Agreement Funding is Available*) or in a state the Navigator has not been awarded cooperative agreement funding to serve. Exchange Navigators may provide these consumers with basic information about the Exchange, but should refer them to Navigators, the Exchange Call Center, and other resources within the state where the consumer resides for more in-depth assistance;
- To fund staff retreats or promotional giveaways; or
- To purchase gifts or gift cards, or promotional items that market or promote the products or services of a third party, that would be provided to any applicant or potential enrollee.

Other than for normal and recognized executive-legislative relationships or participation by an agency or officer of a State, local or tribal government in policymaking and administrative processes within the executive branch of that government, funds for the Cooperative Agreement to Support Navigators in Federally-facilitated Exchanges *may not*:

- Be used to pay the salary or expenses of any grant recipient, or agent acting for such recipient, related to any activity designed to influence the enactment of legislation, appropriations, regulation, administrative action, or executive order proposed or pending before the Congress or any State government, State legislature or local legislature or legislative body; or
- Be used for lobbying, but they can lobby *at their own expense* if they can segregate Federal funds from other financial resources used for that purpose.

Indirect Costs

If the applicant entity has a current negotiated indirect cost rate agreement (NICRA), and is requesting indirect costs, a copy of the current NICRA must be submitted with the application. Any non-Federal entity that has never received a negotiated indirect cost rate, except for those non-Federal entities described in Appendix VII(D)(1)(b) to 45 CFR part 75, may elect to charge a *de minimis* rate of 10% of Modified Total Direct Costs (MTDC) which may be used indefinitely. See also Section F2. *Administrative and National Policy Requirements* of this Funding Opportunity for more information on indirect costs.

D7. Mandatory Disclosure

Submission is required for all applicants, in writing, to the awarding agency and to the HHS Office of Inspector General (OIG), all information related to violations of federal criminal law involving fraud, bribery, or gratuity violations potentially affecting the federal award.

Disclosures must be sent in writing to:

U.S. Department of Health and Human Services
Centers for Medicare and Medicaid Services
Office of Acquisition and Grants Management
Attn: Director, Division of Grants Management
7500 Security Blvd, Mail Stop B3-30-03
Baltimore, MD 21244-1850

AND

U.S. Department of Health and Human Services
Office of Inspector General
ATTN: Mandatory Grant Disclosures, Intake Coordinator
330 Independence Avenue, SW, Cohen Building
Room 5527
Washington, DC 20201

URL: <https://oig.hhs.gov/fraud/report-fraud/index.asp>

(Include “Mandatory Grant Disclosures” in subject line)

Fax: (202) 205-0604 (Include “Mandatory Grant Disclosures” in subject line) or

Email: MandatoryGranteeDisclosures@oig.hhs.gov

Materials should be scanned and emailed to the Grants Management Specialist assigned to this Funding Opportunity.

E. Application Review Information

E1. Criteria

Applications must be submitted in the required format, no later than the deadline. If an applicant does not submit all of the required documents and does not address each of the topics described in D2. *Content and Form of Application Submission Information* (with cross reference to E1. *Criteria*), the applicant risks not being eligible and/or awarded. Applications are reviewed in accordance with criteria outlined below.

All applicants must submit the following:

- Standard Forms;
- Cover Letter;
- Project Narrative;
- Work Plan and Timeline;
- Budget Narrative;
- Business Assessment of Applicant Organization; and
- Negotiated Indirect Cost Rate Agreement (if applicable)

In order to receive a cooperative agreement award, an eligible entity, individual, or consortium must submit a proposal to operate as a Navigator in an FFE. Successful applicants are required to demonstrate that they will use cooperative agreement funds to, at a minimum, carry out all statutory and regulatory duties, as found in Section 1311(i) of the ACA, and 45 C.F.R. §§ 155.210 and 155.215, of a Navigator for the entire length of the 36-month period of performance, including those requirements outlined in Section A4. *Program Requirements of this Funding Opportunity*.

The review criteria are as follows (based on 200 points³³):

Project Narrative Topics	Total Available Points	Scoring Criteria Breakdown
<p>Type of entity and description of the community(ies) or group(s) the applicant expects to serve</p>	<p>25</p>	<ul style="list-style-type: none"> • (2 points) Applicants must clearly specify in the introduction of the Project Narrative whether they are current and/or past HHS Navigator awardees, or if they will be a new Navigator awardee. • (5 points) Applicants must list who will perform Navigator activities under this cooperative agreement (individual, entity, or consortium). <ul style="list-style-type: none"> ▪ In the case of an entity or consortium performing Navigator activities, the applicant must describe the type of entity and provide a description of the organizational structure(s) of the entity or consortium, the role of each consortium member, the value they will add to the proposed project, and which consortium members will be paid with Navigator cooperative agreement funds to carry out Navigator activities. • (13 points total) Applicant must also describe: <ul style="list-style-type: none"> • (8 points) The community(ies) or population(s) they expect to target and why. <ul style="list-style-type: none"> ▪ Applicants that demonstrate a focus and commitment to target those populations or communities defined in this Funding Opportunity as being underserved or vulnerable, while also being prepared to assist any consumer seeking assistance, will receive a higher score in this category than applicants that do not.

³³ To be considered for an award, an applicant must receive a score of at least 120 points from the objective review committee. See Appendix V. *Review and Selection Process* for additional information.

Project Narrative Topics	Total Available Points	Scoring Criteria Breakdown
		<ul style="list-style-type: none"> ▪ (3 points) The FFE state(s) and county(ies) in which this(ese) population(s) reside(s), and the reason for expecting that they will focus their efforts on primarily that (those) population(s) or community(ies). <ul style="list-style-type: none"> ▪ Applicants proposing to serve across multiple FFE states, are also expected to describe how they will balance their efforts among the different areas based on the needs of the underserved or vulnerable population(s) in each state. ▪ Tribal Applicants should list the federally recognized Indian Tribal lands of their target Tribal population, the counties covered, and how they plan to serve the different geographic areas of their target population in their application. ▪ (2 points) The percentage of the state’s uninsured population encompassed in the population(s) or community(ies) they expect to serve. • (5 points) Applicants should carefully develop project (metric) goals for carrying out Navigator activities during the first 12-month period budget period of the 36-month period of performance (<i>see also</i> sub-section e3. <i>Plan Year 2021-2022 Project Goals</i>) <ul style="list-style-type: none"> ▪ Applicants proposing to serve across multiple FFEs must submit separate project (metric) goals for each FFE they are proposing to serve.
Scope of Activities	75	<p>The applicant’s plan must demonstrate how the applicant will:</p> <ul style="list-style-type: none"> • (10 points) Conduct public education and outreach activities to raise awareness about the FFEs and help consumers understand their health coverage options, including:

Project Narrative Topics	Total Available Points	Scoring Criteria Breakdown
		<ul style="list-style-type: none"> ▪ How the planned education and outreach activities will meet the needs of the identified underserved or vulnerable population(s), and ▪ A description of some of the settings and venues where the planned education and outreach activities will take place and why these venues are appropriate for reaching the identified underserved or vulnerable population(s). • (10 points) Provide targeted assistance to the underserved or vulnerable population(s) the applicant plans to serve in their proposed FFE service area(s), while also being prepared to assist any consumer seeking assistance, including: <ul style="list-style-type: none"> ▪ A description of the applicant’s strategy for providing targeted assistance to the underserved or vulnerable population(s) the applicant plans to serve, and ▪ A description of the applicant’s communication and marketing plan, highlighting the ways in which it has been tailored to meet the needs of the targeted underserved or vulnerable population(s). • (10 points) Provide fair, accurate, and impartial information and services (including providing information that assists consumers with submitting the eligibility application, clarifying the distinctions among health coverage options, including QHPs, and helping consumers make informed decisions during the health coverage selection process). • (10 points) Facilitate selection of a QHP <ul style="list-style-type: none"> ▪ This could include, for example, helping consumers understand their new health coverage and how to use it; assistance with updating an application for coverage through a Marketplace, including reporting changes in

Project Narrative Topics	Total Available Points	Scoring Criteria Breakdown
		<p>circumstances, and assisting with submitting information for eligibility redeterminations; answering questions about paying premiums for coverage enrolled in through a Marketplace; helping the consumer obtain assistance for post-enrollment problems such as failure to receive important coverage documents; educating consumers about their rights with respect to coverage available through the Marketplace, including the right to preventive health services without cost sharing; and helping the consumer obtain assistance with claims denials.</p> <ul style="list-style-type: none"> • (10 points) Provide information in a manner that is culturally and linguistically appropriate to the population served by the Marketplace, including individuals with limited English proficiency, and that is accessible to individuals with disabilities, consistent with the requirements of §§155.210(e)(5) and 155.215(c) and (d). Applicant’s plan should discuss: <ul style="list-style-type: none"> ▪ How they will assess the needs of the population(s) they intend to serve, while also being prepared to assist any consumer seeking assistance, and ▪ How the proposed approach and strategy will meet the needs of underserved or vulnerable population(s) based on factors such as race or ethnicity, gender, education or income, disability, geographic location (e.g., rural or urban), or sexual orientation (<i>see also</i> Section A4. <i>Program Requirements</i>). • (5 points) Make referrals to any applicable office of health insurance consumer assistance or health insurance ombudsman established under Section 2793 of the Public Health Service Act, or any other appropriate State agency or agencies, to

Project Narrative Topics	Total Available Points	Scoring Criteria Breakdown
		<p>assist enrollees with grievances, complaints, or questions about their health plan, coverage, or a determination related to their coverage.</p> <ul style="list-style-type: none"> • (10 points) Demonstrate the nature of the applicant’s existing relationships and how additional relationships could be readily established with employers and employees, consumers (including uninsured and underinsured consumers), or self-employed individuals, including: <ul style="list-style-type: none"> ▪ How it plans to leverage these relationships to deliver effective outreach and enrollment assistance to its proposed underserved or vulnerable population(s), and ▪ Provide a few examples (no more than three) of past successes leveraging these relationships to reach underserved or vulnerable consumers and increase awareness among the remaining uninsured of the coverage options available through the FFEs. <p>Applicants that demonstrate the ability to maintain these relationships and establish new relationships through a physical presence in their proposed service area(s) may receive a higher score in this category than those who do not. (5 of the 10 points)</p> • (5 points) Ensure staff and volunteers complete all required training prior to carrying out any required or authorized Navigator functions, and an attestation that all staff and volunteers working under this cooperative agreement will remain

Project Narrative Topics	Total Available Points	Scoring Criteria Breakdown
		<p>free of conflicts of interest during their term as a Navigator. Applicant’s plan should include:</p> <ul style="list-style-type: none"> ▪ A discussion of the individual/entity/consortium’s operational readiness to meet the self-imposed training and certification goals by October 1, 2021, and ▪ Two examples of the applicant’s ability to ramp up quickly, including experience meeting project goals in a short time frame and managing subrecipients (if applying as a consortium). <ul style="list-style-type: none"> • (5 points) Comply with all statutory and regulatory requirements applicable to the Navigator program, as set forth in 45 C.F.R. §§ 155.210 and 155.215, for the entire length of the cooperative agreement period.
<p>Ensuring Privacy and Security of Consumer Personally Identifiable Information (PII)</p>	<p>30</p>	<p>Applicants should develop and include with their application a plan to protect the privacy and security of consumers’ PII that includes a discussion of the following:</p> <ul style="list-style-type: none"> • (5 points) How the applicant intends to comply with FFE privacy and security standards and to use computers, including laptops or tablets, in accordance with those standards and 45 C.F.R. § 155.260. The privacy and security standards for current Navigator awardees under opportunity CA-NAV-19-001 can be found here: https://www.cms.gov/files/document/2020-privacy-and-security-terms-and-conditions-508-ejs-5-4-2021.pdf • (5 points) Process for ensuring all persons performing Navigator functions and others who have access to sensitive information or PII related to the organization’s Navigator functions complete all required training related to ensuring privacy and security of consumer PII, including training on compliance with FFE privacy and security standards;

Project Narrative Topics	Total Available Points	Scoring Criteria Breakdown
		<ul style="list-style-type: none"> • (5 points) Process for ensuring that applicants for coverage available through an Exchange application (1) are informed of the functions and responsibilities of Navigators, including that Navigators are not acting as tax advisers or attorneys when providing assistance as Navigators and cannot provide tax or legal advice within their capacity as Navigators; (2) provide authorization prior to a Navigator’s obtaining access to their personally identifiable information; and (3) may revoke at any time the authorization provided to the Navigator; • (5 points) How the applicant plans to conduct ongoing monitoring throughout the duration of the period of performance to ensure that persons performing Navigator functions and others who have access to sensitive information or PII related to the organization’s Navigator functions are protecting consumer PII and other sensitive data in accordance with their training and the organization’s operating policies. Applicant should also discuss mitigation plans for addressing PII breaches, should any occur. • (10 points total) Applicant should also discuss the following: <ul style="list-style-type: none"> ▪ (5 points) Plans for training persons performing Navigator functions and others who have access to sensitive information or PII related to the organization’s Navigator functions on how to receive, secure, and handle PII or other sensitive data, and ▪ (5 points) Process for evaluating qualifications of persons performing Navigator functions and others who have access to sensitive information or PII related to the organization’s Navigator functions for receiving, securing, and handling PII or other sensitive data, including if background checks are conducted. If background checks are conducted, applicants should explain on whom they are conducted, what would be considered to

Project Narrative Topics	Total Available Points	Scoring Criteria Breakdown
		<p>be adverse findings of a background check and/or findings that would preclude someone from working on the organization’s Navigator activities or accessing PII related to those activities, and whether the following types of recommended background checks are used:</p> <ul style="list-style-type: none"> ▪ Office of Inspector General (OIG) Sanction Check <ul style="list-style-type: none"> • HHS OIG has a list that identifies individuals who are debarred/sanctioned from participating on any Federal programs. ▪ Criminal Background Investigation <ul style="list-style-type: none"> • This type of investigation can include a national criminal database search, as well as a locality search (to include Federal, District & County Court and criminal records check). ▪ State-required Background Check <ul style="list-style-type: none"> • This can include any investigations required of Navigators under state law.
Accomplishments	25	<p>Applicants must include information regarding the individual, entity, or consortium’s track record and accomplishments involving the activities outlined below. If the applicant is a consortium, accomplishments for each member should be discussed.</p> <ul style="list-style-type: none"> • (5 points) Developing and maintaining relationships with key stakeholders, including employers and employees, consumers (including consumers who are uninsured and underinsured), and self-employed individuals. Applicant should

Project Narrative Topics	Total Available Points	Scoring Criteria Breakdown
		<p>highlight past successes leveraging local community partnerships and collaborations to reach marginalized communities;</p> <ul style="list-style-type: none"> • (5 points) Conducting public education and outreach activities that raise awareness about the FFEs, focused on harder-to-reach populations and the remaining uninsured; • (5 points) Providing information and services in a fair, accurate, and impartial manner to underserved or vulnerable population(s) that have historically experienced health care access barriers in a manner that is culturally competent and linguistically appropriate to that community(ies), while remaining ready to serve any consumer seeking assistance; • (5 points) Facilitating enrollment in QHPs by helping consumers with varying levels of education, financial, and health literacy understand basic concepts related to health coverage and how to use their coverage once enrolled; and • (5 points) Effectively working with individuals with limited English proficiency, individuals with disabilities, underserved, vulnerable, or rural populations, including ensuring accessibility and usability of Navigator tools and functions.

Project Narrative Topics	Total Available Points	Scoring Criteria Breakdown
Expertise of Personnel	35	<p>Applicants must ensure the following information is included in their application:</p> <ul style="list-style-type: none"> • (5 points) Brief biographical statements for the key personnel (AOR and Project Director) discussing the level of expertise they have administering a federal grant (or cooperative agreement) and providing at least two examples of successful compliance with the terms and conditions associated with a federal grant (or cooperative agreement)³⁴; • (5 points) Outline of how the AOR and Project Director will oversee and monitor the activities proposed in the project narrative; • (10 points) Description of the applicant’s current staffing capacity, along with the anticipated timeline for bringing any additional staff (including FTE, PTE, and volunteers) onboard if awarded. <ul style="list-style-type: none"> ○ If applicant is applying as the lead applicant for a consortium, the following should also be included: <ul style="list-style-type: none"> ▪ Description of the role each subrecipient will have in this project and the value they will add to the applicant’s proposal; and ▪ Description of the current staffing capacity of each subrecipient, along with the anticipated timeline for bringing any additional staff (including FTE, PTE, and volunteers) onboard if awarded.

³⁴ The examples provided can be from activities under prior HHS Navigator cooperative agreement awards, or from a federal grant or cooperative agreement applicant received from another federal agency. Examples may include, but are not limited to: demonstrating compliance with submitting timely and accurate programmatic and financial reports in accordance with applicable guidance provided by the grantor (CMS or another federal agency (please specify the agency, grant name, and grant year)); properly closing out a federal grant at the end of the period of performance (please specify the federal agency, grant name, and grant year) in the prescribed timeframe; or effectively communicating with and providing information as requested to assigned Project Officer and Grants Management Specialist.

Project Narrative Topics	Total Available Points	Scoring Criteria Breakdown
		<ul style="list-style-type: none"> • (5 points) Plan for ensuring that all paid and unpaid staff performing Navigator duties successfully complete the required federal certification or recertification training, as well as any applicable state Navigator requirements, before performing any Navigator functions in the FFEs; • (5 points) Description of staff’s expertise with the FFEs, conducting public education and outreach activities, assisting consumers in obtaining health coverage eligibility determinations, finding available health insurance options (including public programs), and working with individuals with limited English proficiency, individuals with disabilities, and underserved or vulnerable populations; and • (5 points) Description of how the proposed staffing for this project reflects the cultural, linguistic, and other characteristics/preferences of the target population(s) that the applicant proposes to serve, and their ability to provide assistance to consumers in a way that is accessible and accommodating to meet the needs of individuals with disabilities.
Budget Narrative	10	<ul style="list-style-type: none"> • (10 pts) Detailed budget, adhering to the format outlined in Appendix I, <i>Guidance for Preparing a Budget Request and Narrative</i>, for the 36-month period of performance (to include SF-424A and Budget Narrative(s))³⁵.

³⁵ For current and past HHS Navigator awardees, this section should focus on activities which will be completed if selected for another Navigator award. The funding for these activities must not overlap with the funding provided for prior Navigator activities. Applicants should also include information on other sources of funding. If other funding, whether from a federal or non-federal source, is used for outreach, eligibility, and/or enrollment assistance, please explain what additional accomplishments or activities would be supported with federal funds received through this funding opportunity.

Project Narrative Topics	Total Available Points	Scoring Criteria Breakdown
		<ul style="list-style-type: none"> ○ If proposing to serve multiple FFEs, separate budget narratives must be provided for each FFE applicant is proposing to serve. If not, no points will be awarded for this category.
Total Available Points		200

E2. Review and Selection Process

Please refer to Appendix V. *Review and Selection Process* for more information on the review and selection process.

E3. Federal Awardee Performance Integrity Information System (FAPIIS)

In accordance with 45 CFR Part 75:

- i. CMS, prior to making a Federal award with a total amount of Federal share greater than the simplified acquisition threshold³⁶, is required to review and consider any information about the applicant that is in the designated integrity and performance system accessible through SAM (currently FAPIIS) (see 41 U.S.C. 2313);
- ii. An applicant, at its option, may review information in the designated integrity and performance systems accessible through SAM and comment on any information about itself that the HHS awarding agency previously entered and is currently in the designated integrity and performance system accessible through SAM.
- iii. CMS will consider any comments by the applicant, in addition to the other information in the designated integrity and performance system, in making a judgment about the applicant's integrity, business ethics, and record of performance under Federal awards when completing the review of risk posed by applicant as described in §75.205.

³⁶ *Simplified acquisition threshold* means the dollar amount below which a non-Federal entity may purchase property or services using small purchase methods. Non-Federal entities adopt small purchase procedures in order to expedite the purchase of items costing less than the simplified acquisition threshold. The simplified acquisition threshold is set by the Federal Acquisition Regulation at 48 CFR Subpart 2.1 (Definitions) and in accordance with 41 U.S.C. 1908.

F. Federal Award Administration Information

F1. Federal Award Notices

If successful, applicant will receive a Notice of Award (NoA) signed and dated by the CMS Grants Management Officer. The NoA is the legal document authorizing the cooperative agreement award issued to the applicant as listed on the SF-424 and available to the applicant organization through the online grants management system used by CMS and recipient organizations. Any communication between CMS and applicant prior to issuance of the NoA is not an authorization to begin performance of a project.

If unsuccessful, CMS notifies the applicant electronically to the email address as listed on its SF-424, within 30 days of the award date.

F2. Administrative and National Policy Requirements

a. National/Public Policy Requirements

By signing the application, the authorized organizational official certifies that the organization will comply with applicable public policies. Once a cooperative agreement is awarded, each recipient is responsible for establishing and maintaining the necessary processes to monitor its compliance and that of its employees and, as appropriate, subrecipients and contractors under the cooperative agreement with these requirements. Recipients should consult the applicable Appropriations Law, Exhibit 3 of the HHS Grants Policy Statement, titled Public Policy Requirements, located in Section II, pages 3-6, as well as the terms and conditions of award for information on potentially applicable public policy requirements.

Non-Discrimination

Recipients receiving awards under this cooperative agreement project must comply with all applicable Federal statutes relating to nondiscrimination, including, but not limited to:

- a. Title VI of the Civil Rights Act of 1964,
- b. Section 504 of the Rehabilitation Act of 1973,
- c. The Age Discrimination Act of 1975,
- d. Title II, Subtitle A of the Americans with Disabilities Act of 1990;
- e. Section 1557 of the Affordable Care Act;
- f. Title IX of the Education Amendments of 1972; and
- g. Applicable federal religious nondiscrimination laws, <https://www.hhs.gov/conscience/religious-freedom/index.html>, and applicable federal

conscience protection and associated anti-discrimination laws
<https://www.hhs.gov/conscience/conscience-protections/index.html>.

Accessibility Provisions

Recipients of federal financial assistance (FFA) from HHS must administer their programs in compliance with federal civil rights laws that prohibit discrimination on the basis of race, color, national origin, disability, age and, in some circumstances, religion, conscience, and sex. This includes ensuring programs are accessible to persons with limited English proficiency. The HHS Office for Civil Rights provides guidance on complying with civil rights laws enforced by HHS. Please see <https://www.hhs.gov/civil-rights/for-providers/provider-obligations/index.html>; and <https://www.hhs.gov/ocr/civilrights/understanding/section1557/index.html>.

- Recipients of FFA must ensure that their programs are accessible to persons with limited English proficiency. HHS provides guidance to recipients of FFA on meeting their legal obligation to take reasonable steps to provide meaningful access to their programs by persons with limited English proficiency. Please see <https://www.hhs.gov/civil-rights/for-individuals/special-topics/limited-english-proficiency/fact-sheet-guidance/index.html> and <https://www.lep.gov>. For further guidance on providing culturally and linguistically appropriate services, recipients should review the National Standards for Culturally and Linguistically Appropriate Services in Health and Health Care at <https://minorityhealth.hhs.gov/omh/browse.aspx?lvl=2&lvlid=53>.
- Recipients of FFA also have specific legal obligations for serving qualified individuals with disabilities. Please see <https://www.hhs.gov/ocr/civilrights/understanding/disability/index.html>.
- HHS funded health and education programs must be administered in an environment free of sex discrimination, including sexual harassment. Please see: <https://www.hhs.gov/civil-rights/for-individuals/sex-discrimination/index.html>; <https://www2.ed.gov/about/offices/list/ocr/docs/shguide.html>; and <https://www.eeoc.gov/eeoc-publications>.
- Recipients of FFA must also administer their programs in compliance with applicable federal religious nondiscrimination laws and applicable federal conscience protection and associated anti-discrimination laws. Collectively, these laws prohibit exclusion, adverse treatment, coercion, or other discrimination against persons or entities on the basis of their consciences, religious beliefs, or moral convictions. Please see: <https://www.hhs.gov/conscience/conscience-protections/index.html>; and <https://www.hhs.gov/conscience/religious-freedom/index.html>.

Recipients should review and comply with the reporting and review activities regarding accessibility requests outlined in Appendix IV, Accessibility Provisions to this Notice of Funding Opportunity.

Please contact the HHS Office for Civil Rights for more information about obligations and prohibitions under federal civil rights laws at <https://www.hhs.gov/ocr/about-us/contact-us/index.html> or call 1-800-368-1019 or TDD 1-800-537-7697.

b. Administrative Requirements

- All equipment, staff, and other budgeted resources and expenses must be used exclusively for the projects identified in the applicant’s original application or agreed upon subsequently with CMS, and may not be used for any prohibited uses.
- Consumers and other stakeholders must have meaningful input into the planning, implementation, and evaluation of the project.
- This award is subject to 45 CFR Part 75, Uniform Administrative Requirements, Cost Principles, and Audit Requirements for HHS awards [available at <http://www.ecfr.gov/cgi-bin/text-idx?node=pt45.1.75>], which implements 2 CFR Part 200, Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards (“Uniform Guidance”) effective December 26, 2014. If you are successful and receive a Notice of Award, in accepting the award, you agree that the award and any activities thereunder are subject to all provisions of 45 CFR part 75, currently in effect or implemented during the period of the award, other Department regulations and policies in effect at the time of the award, and applicable statutory provisions. See below for more information.

Uniform Administrative Requirements, Cost Principles, and Audit Requirements

Applicant and recipients should take particular note of the following information found in 45 CFR Part 75:

Uniform Administrative Requirements

In accordance with 45 CFR §75.112, all award recipients receiving federal funding from CMS must establish and comply with the conflict of interest policy requirements outlined by CMS (available for applicant upon request). In accordance with 45 CFR §75.113, Mandatory Disclosures, the non-Federal entity or applicant for a Federal award must disclose, in a timely manner, in writing to the HHS awarding agency or pass-through entity all violations of Federal criminal law involving fraud, bribery, or gratuity violations potentially affecting the Federal award. Non-Federal entities that have received a Federal award including the term and condition outlined in Appendix XII to 45 CFR Part 75 are required to report certain civil, criminal, or administrative proceedings to SAM. Failure to make the required disclosures can result in the imposition of any of the remedies described in §75.371, including suspension or debarment. (See

also 2 CFR Parts 180 and 376, and 31 U.S.C. 3321). For specific information on reporting such disclosures to CMS and HHS please see Section F3. *Terms and Conditions* of this NOFO.

Cost Principles

CMS grant and cooperative agreement awards provide for reimbursement of actual, allowable costs incurred and are subject to the Federal cost principles. The cost principles establish standards for the [allowability of costs](#), provide detailed guidance on the cost accounting treatment of costs as direct or indirect, and set forth allowability and allocability principles for selected items of cost. Applicability of a particular set of cost principles depends on the type of organization. Award recipients must comply with the cost principles set forth in HHS regulations at [45 CFR Part 75, Subpart E](#) with the following exceptions: (1) hospitals must follow Appendix IX to part 75; and (2) commercial (for-profit) organizations are subject to the cost principles located at 48 CFR subpart 31.2. As provided in the cost principles in 48 CFR subpart 31.2, allowable travel costs may not exceed those established by the Federal Travel Regulation (FTR).

There is no universal rule for classifying certain costs as either direct or indirect (also known as Facilities & Administration (F&A) costs) under every accounting system. A cost may be direct with respect to some specific service or function, but indirect with respect to the Federal award or other final cost objective. Therefore, it is essential that each item of cost incurred for the same purpose is treated consistently in like circumstances either as a direct or F&A cost in order to avoid double-charging of Federal awards. Guidelines for determining direct and F&A costs charged to Federal awards are provided in 45 CFR §§75.412 to 75.419. Requirements for development and submission of indirect (F&A) cost rate proposals and cost allocation plans are contained in Appendices III-VII, and Appendix IX to Part 75.

Indirect Costs

CMS will reimburse indirect costs to recipients under an award if (1) allowable under the governing statute, regulations, or HHS grants policy; (2) the recipient requests indirect costs; and (3) the recipient has a federally approved negotiated indirect cost rate agreement covering the grant supported activities and period of performance, or the non-federal entity has never received an indirect cost rate, except for those non-Federal entities described in Appendix VII(D)(1)(b) to 45 CFR part 75, and elects to charge a de minimis rate of 10% of Modified Total Direct Costs (MTDC).

If the applicant entity has a current negotiated indirect cost rate agreement (NICRA) and is requesting indirect costs, a copy of the current NICRA must be submitted with the application.

Commercial (For-Profit) Organizations: Indirect Costs are allowable under awards to for-profit organizations. The for-profit recipient must have a federally-approved negotiated indirect cost rate agreement covering the grant supported activities and period of performance. Indirect cost

rates for for-profit entities are negotiated by DFAS in the Office of Acquisition Management and Policy, National Institutes of Health (if the preponderance of their federal awards are from HHS), available at <http://oamp.od.nih.gov/dfas/indirect-cost-branch>, or other Federal agency with cognizance for indirect cost rate negotiation. If there is no federally-approved indirect cost rate for the specific period of performance and the for-profit recipient has never received an indirect cost rate, then the non-federal entity may elect to charge a de minimis rate of 10% of MTDC.

Cost Allocation

In accordance with 45 CFR §75.416 and Appendix V to Part 75 – State/Local Government-wide Central Service Cost Allocation Plans, each state/local government will submit a plan to the HHS Cost Allocation Services for each year in which it claims central service costs under Federal awards. Guidelines and illustrations of central service cost allocation plans are provided in a brochure published by the HHS entitled “A Guide for State, Local and Indian Tribal Governments: Cost Principles and Procedures for Developing Cost Allocation Plans and Indirect Cost Rates for Agreements with the Federal Government.” A copy of this brochure may be obtained from the HHS Cost Allocation Services at <https://rates.psc.gov>. A current, approved cost allocation plan must be provided to CMS if central service costs are claimed.

Public Assistance Cost Allocation Plans

Appendix VI to Part 75 – Public Assistance Cost Allocation Plans, provides that state public assistance agencies will develop, document and implement, and the Federal Government will review, negotiate, and approve, public assistance cost allocation plans in accordance with Subpart E of 45 CFR part 95. The plan will include all programs administered by the state public assistance agency. Where a letter of approval or disapproval is transmitted to a state public assistance agency in accordance with Subpart E, the letter will apply to all Federal agencies and programs. This Appendix (except for the requirement for certification) summarizes the provisions of Subpart E of 45 CFR part 95.

Audit Requirements

The audit requirements in 45 CFR Part 75, Subpart F, apply to each award recipient fiscal year that begins on or after December 26, 2014. A non-Federal entity that expends \$750,000 or more during the non-Federal entity's fiscal year in Federal awards must have a single or program-specific audit conducted for that year in accordance with the provisions of Subpart F, Audit Requirements.

Commercial Organizations (including for-profit hospitals) have two options regarding audits, as outlined in 45 CFR §75.501 (see also 45 CFR §75.216).

F3. Terms and Conditions

This Notice of Funding Opportunity is subject to the Department of Health and Human Services Grants Policy Statement (HHS GPS) at <http://www.hhs.gov/sites/default/files/grants/grants/policies-regulations/hhsgps107.pdf>. The general terms and conditions in the HHS GPS will apply as indicated unless there are statutory, regulatory, or award-specific requirements to the contrary. Standard and program specific terms of award will accompany the NoA. Potential applicants should be aware that special requirements could apply to cooperative agreement awards based on the particular circumstances of the effort to be supported and/or deficiencies identified in the application by the HHS review panel. HHS regulation (45 CFR Part 75) supersedes information on administrative requirements, cost principles, and audit requirements for grants and cooperative agreements included in the current HHS Grants Policy Statement where differences are identified. Recipients must also agree to respond to requests that are necessary for the evaluation of national efforts and provide data on key elements of their own grant or cooperative agreement activities.

CMS may terminate any award for material noncompliance. Material noncompliance includes, but is not limited to, violation of the terms and conditions of the award; failure to perform award activities in a satisfactory manner; improper management or use of award funds; or fraud, waste, abuse, mismanagement, or criminal activity.

In the event a recipient or one of its subrecipients enters into proceedings relating to bankruptcy, whether voluntary or involuntary, the Recipient agrees to provide written notice of the bankruptcy to CMS. The recipient must furnish the written notice within five (5) days of the initiation of the proceedings relating to bankruptcy filing to the CMS Grants Management Specialist and Project Officer. This notice includes:

- the date on which the bankruptcy petition was filed,
- the identity of the court in which the bankruptcy petition was filed,
- a copy of any and all of the legal pleadings, and
- a listing of Government grant and cooperative agreement numbers and grant offices for all.
- Government grants and cooperative agreements against which final payment has not been made.

Intellectual Property

Recipients under this funding opportunity must comply with the provisions of 45 CFR § 75.322, Intangible property and copyrights. The non-Federal entity may copyright any work that is subject to copyright and was developed, or for which ownership was acquired, under a Federal award. The Federal awarding agency reserves a royalty-free, nonexclusive, and irrevocable right to reproduce, publish, or otherwise use the work for Federal purposes, and to authorize others to do so. The non-Federal entity is subject to applicable regulations governing patents and inventions, including government-wide regulations issued by the Department of Commerce at 37 CFR part 401.

The Federal Government has the right to:

- 1) Obtain, reproduce, publish, or otherwise use the data produced under a Federal award; and
- 2) Authorize others to receive, reproduce, publish, or otherwise use such data for Federal purposes.

Prohibition on certain telecommunications and video surveillance services or equipment

As described in 2 CFR 200.216, recipients and subrecipients are prohibited to obligate or spend grant funds (to include direct and indirect expenditures as well as cost share and program) to:

- 1) Procure or obtain;
- 2) Extend or renew a contract to procure or obtain; or
- 3) Enter into contract (or extend or renew contract) to procure or obtain equipment, services, or systems that use covered telecommunications equipment or services as a substantial or essential component of any system, or as critical technology as part of any system. As described in Pub. L. 115-232, section 889, covered telecommunications equipment is telecommunications equipment produced by Huawei Technologies Company or ZTE Corporation (or any subsidiary or affiliate of such entities).
 - i. For the purpose of public safety, security of government facilities, physical security surveillance of critical infrastructure, and other national security purposes, video surveillance and telecommunications equipment produced by Hytera Communications Corporation, Hangzhou Hikvision Digital Technology Company, or Dahua Technology Company (or any subsidiary or affiliate of such entities).
 - ii. Telecommunications or video surveillance services provided by such entities or using such equipment.
 - iii. Telecommunications or video surveillance equipment or services produced or provided by an entity that the Secretary of Defense, in consultation with the

Director of the National Intelligence or the Director of the Federal Bureau of Investigation, reasonably believes to be an entity owned or controlled by, or otherwise, connected to the government of a covered foreign country.

F4. Cooperative Agreement Terms and Conditions of Award

The administrative and funding instrument used for this program is a cooperative agreement, an assistance mechanism used when CMS anticipates substantial CMS programmatic involvement with each recipient during the performance of the activities. Under each cooperative agreement, CMS' purpose is to support and stimulate the recipient's activities by involvement in, and otherwise working jointly with, the award recipient in a partnership role. To facilitate appropriate involvement during the period of this cooperative agreement, CMS and the recipient will be in contact at least once a month, and more frequently when appropriate.

Cooperative Agreement Roles and Responsibilities are as follows:

Centers for Medicare and Medicaid Services

CMS will have substantial involvement in program awards, as outlined below:

- Technical Assistance – CMS hosts opportunities for training and/or networking, which may include conference calls, topic-specific webinars, office hours, and other vehicles.
- Collaboration– CMS actively coordinates with other relevant Federal Agencies including but not limited to the Indian Health Service, the Internal Revenue Service, the Department of Homeland Security, the Administration for Children and Families, the Health Resources and Services Administration, the Centers for Disease Control and Prevention, and the Social Security Administration. In this way CMS facilitates compliance with the terms of the cooperative agreement and effectively supports recipients.
- Program Evaluation – CMS will work with recipients to implement lessons learned to continuously improve this program and the nation-wide implementation of Exchange Navigator Programs.
- Project Officers and Monitoring – CMS assigns specific Project Officers to each cooperative agreement award to support and monitor recipients throughout the period of performance. CMS Grants Management Officers, Grants Management Specialists, and Project Officers will monitor, on a regular basis, progress of each recipient. This monitoring may be by phone, document review, on-site visit, other meeting and by other appropriate means, such as reviewing program progress reports and Federal Financial Reports (FFR or SF-425). This monitoring will be used to determine compliance with programmatic and financial requirements.

- Monitoring and Implementation Support – CMS conducts a number of in-person and desk audits of recipients, as well as initial assessments, with the intention of understanding the recipient’s processes and assisting recipients with implementation support needs, as appropriate. CMS will also use these activities to identify recipient issues, and to help recipients maintain compliance with the terms identified in this Funding Opportunity.

Recipients

Recipients and assigned points of contact retain the primary responsibility and dominant role for planning, directing and executing the proposed project as outlined in the terms and conditions of the cooperative agreement and with substantial CMS involvement. Recipients shall engage in the following activities:

- State and Exchange Requirements – comply with applicable state law and all applicable current and future requirements of the FFEs, including those issued through rulemaking and guidance specified and approved by the Secretary of HHS.
- Collaboration and Sharing – collaborate with the critical stakeholders listed in this funding opportunity and the HHS team, including the assigned Project Officer. Recipients serving consumers in an FFE that is engaging actively with the federal government in the operation of certain aspects of the FFE may also be required to collaborate with any State agency helping to oversee the day-to-day management of the Navigator program.
- Reporting – comply with all reporting requirements outlined in this funding opportunity and the terms and conditions of the Cooperative Agreement to ensure the timely release of funds.
- Program Evaluation – cooperate with HHS-directed national program evaluations.
- Participate in technical assistance venues as appropriate.
- Program Standards – comply with all applicable current and future Exchange and cooperative agreement Navigator standards, as detailed in regulations, guidance, and the cooperative agreement terms and conditions provided with the NoA.

F5. Reporting

a. Progress Reports

Awardees must agree to cooperate with any Federal evaluation of the program and must provide required weekly, monthly, quarterly, annual, and final (at the end of the cooperative agreement period) reports in a form prescribed by CMS, as well as any additional reports as required. Reports will be submitted electronically. These reports will outline how cooperative agreement

funds were used, describe program progress, describe any barriers encountered including how any potential conflicts of interest were mitigated and process for handling non-compliant paid and unpaid staff performing Navigator duties, describe how the program ensured access to culturally and linguistically appropriate services, and detail measurable outcomes to include how many of those staff completed required training and became certified as Navigators and how many consumers were served. CMS will provide awardees with the format for program reporting and the technical assistance necessary to complete program reporting requirements. At each stage, CCIIO staff will evaluate reports and provide feedback to recipients and provide technical assistance as needed.

The applicant will not include PII in any weekly, monthly, quarterly, or final reports to HHS. In addition, the applicant must ensure compliance with the standards adopted by the FFE pursuant to 45 C.F.R. § 155.260 when providing Navigator services to consumers involving the use of PII. Additional details, including the due dates for the quarterly and final reports, will be provided in the terms and conditions of award.

b. Financial Reports

Required On-Line Reporting. CMS requires Recipients to submit quarterly cash transaction and semi-annual or annual expenditure financial reporting data through PMS in a consolidated single reporting system. This consolidated single reporting system includes submission of the following required fields in the Federal Financial Report (FFR or SF-425): lines 10.a through 10.c to reflect cash transactions data and lines 10.d through 10.h to reflect expenditures, obligations, and liquidations data. Failure to submit timely reports may result in the inability to access funds.

Quarterly Cash Transaction Financial Reporting

Report Submission Deadline. Unless superseded by program-specific statute or regulations or by CMS policy, in accordance with 45 CFR 75.341, the deadline for submitting the required Federal reporting is 30 days after the end of each quarter (i.e., by January 30, April 30, July 30 and October 30) and 90 days after the project has ended.

Semi-Annual, Annual, and Final Expenditure Reporting

Recipient must also report on Federal expenditures, Recipient Share (if applicable), and Program Income (if applicable and/or allowable) at least annually via the Payment Management System. Frequency of required expenditure reporting, whether semi-annually or annually, is stipulated in the Program Terms and Conditions of award. Expenditures, Recipient Share, and Program Income is reflected through completion of lines 10.d through 10.o of the FFR. Indirect costs are reflected through line 11 of the FFR.

c. Federal Funding Accountability and Transparency Act Reporting Requirements

New awards issued under this NOFO are subject to the reporting requirements of the Federal Funding Accountability and Transparency Act of 2006 (Pub. L. 109– 282), as amended by section 6202 of Public Law 110–252 and implemented by 2 CFR Part 170. Grant and cooperative agreement recipients must report information for each first-tier sub-award of \$30,000 or more in Federal funds and executive total compensation for the recipient’s and subrecipient’s five most highly compensated executives as outlined in Appendix A to 2 CFR Part 170 (available online at <https://www.fdrs.gov/>).

d. Audit Requirements

Recipients must comply with audit requirements outlined in HHS regulation 45 CFR Part 75 (implementing 2 CFR Part 200). See Subpart F – Audit Requirements. <http://www.ecfr.gov/cgi-bin/text-idx?node=pt45.1.75#sp45.1.75.f>.

e. Payment Management System Reporting Requirements

Once CMS issues an award, the funds are posted in recipient accounts established in the Payment Management System (PMS). Recipients may then access their funds by using the PMS funds request process.

The PMS funds request process enables recipients to request funds using a Personal Computer with an Internet connection. The funds are delivered to the recipient via Electronic Funds Transfer (EFT). If you are a new recipient, please go to PMS Access Procedures to find information to register in PMS. If you need further help with that process, please contact the One-DHHS Help Desk via email at pmssupport@psc.gov or call (877) 614-5533 for assistance.

f. Government-wide Suspension and Debarment Reporting Requirements

Before you enter into a covered transaction at the primary tier, you as the participant must notify the Federal agency office that is entering into the transaction with you, if you know that you or any of the principals for that covered transaction meets any of the conditions outlined in 2 CFR 180.335. At any time after you enter into a covered transaction, you must give immediate written notice to the Federal agency office with which you entered into the transaction if you learn either that you failed to disclose or circumstances have changed as outlined in 2 CFR 180.350.

G. CMS Contacts

Applicants should refer to the sources listed below for application questions including administrative, budgetary, or program requirements. Please reference "2021 Navigator NOFO" in the email subject line.

G1. Programmatic Questions

For Programmatic questions about this Funding Opportunity, please email: navigatorgrants@cms.hhs.gov.

G2. Administrative/Budget Questions

For administrative or budget questions about this funding opportunity, please email: Grants@cms.hhs.gov.

H. Other Information

CMS is not obligated to make any Federal award as a result of the publication of this NOFO.

Publication of this NOFO does not oblige CMS to award any specific project or to obligate any available funds.

CMS may cancel or withdraw this NOFO at any time.

Appendix I. Guidance for Preparing a Budget Request and Narrative

Applicants must request funding only for activities that will support this specific Notice of Funding Opportunity. All applicants must submit the Standard Form SF-424A as well as a Budget Narrative. The Budget Narrative provides detailed cost itemizations and narrative supporting justification for the costs outlined in SF-424A. Both the Standard Form SF-424A and the Budget Narrative must include a yearly breakdown of costs for the entire period of performance. Please review the directions below to ensure both documents are accurately completed and consistent with application requirements.

Standard Form SF-424A

All applicants must submit an SF-424A. To fill out the budget information requested on form SF-424A, review the general instructions provided for form SF-424A and comply with the instructions outlined below.

- Note: The directions in the Notice of Funding Opportunity (NOFO) may differ from those provided by Grants.gov. Please follow the instructions included in this NOFO as outlined below when completing the SF-424A.
- Note: The total requested on the SF-424 (Application for Federal Assistance) reflects the overall total requested on the SF-424A (Budget Information – Non-Construction) for the entire period of performance.

Section A – Budget Summary

- *Grant Program Function or Activity* (column a) = Enter “Name of Notice of Funding Opportunity” in row 1.
- *New or Revised Budget, Federal* (column e) = Enter the Total Federal Budget Requested for the project period in rows 1 and 5.
- *New or Revised Budget, Non-Federal* (column f) = Enter Total Amount of any Non-Federal Funds Contributed (if applicable) in rows 1 and 5.
- *New or Revised Budget, Total* (column g) = Enter Total Budget Proposed in rows 1 and 5, reflecting the sum of the amount for the Federal and Non-Federal Totals.

Section B – Budget Categories

- Enter the total costs requested for each Object Class Category (Section B, number 6) for each year of the period of performance. Notice of Funding Opportunities with a 5-year project period will utilize a second SF-424A form.

- Column (1) = Enter Year 1 costs for each line item (rows a-h), including the sum of the total direct charges (a-h) in row i. Indirect charges are reflected in row j. The total for direct and indirect charges for all year 1 line items is entered in column 1, row k (sum of row i and j).
- Column (2) = Enter Year 2 estimated costs for each line item (rows a-h), including the sum of the total direct charges (a-h) in row i. Indirect charges are reflected in row j. The total for direct and indirect charges for all year 2 line items is entered in column 2, row k (sum of row i and j).
- Column (3) = (If applicable) Enter Year 3 estimated costs for each line item (rows a-h), including the sum of the total direct charges (a-h) in row i. Indirect charges are reflected in row j. The total for direct and indirect charges for all year 3 line items are entered in column 3, row k (sum of row i and j).
- Column (4) = (If applicable) Enter Year 4 estimated costs for each line item (rows a-h), including the sum of the total direct charges (a-h) in row i. Indirect charges are reflected in row j. The total for direct and indirect charges for all year 4 items are entered in column 4, row k (sum of row i and j).
- Column (5) = Enter total costs for the period of performance for each line item (rows a-h), direct total costs (row i), and indirect costs (row j). The total costs for all line items are entered in row k (sum of row i and j). The total in column 5, row k should match the total provided in Section A – Budget Summary, New or Revised Budget, column g, row 5.
- If the NOFO is for a 5-year period of performance, please complete a second SF-424A form and upload it as an attachment to the application (this specific attachment does not count towards the page limit). Year 5 information is included in column 1 of Section B. Then enter the total for years 1-4 (per the first SF-424A form) in column 2 of Section B. The second SF-424A form will compute columns 1 and 2, reflecting total costs for the entire project period. This total should be consistent with the total Federal costs requested on the SF-424, Application for Federal Assistance. A blank SF-424A form can be found at Grants.gov: <https://www.grants.gov/web/grants/forms/sf-424-individual-family.html#sortby=1>

Budget Narrative – Sample Narrative and Instructions

Applicants must complete a Budget Narrative and upload it to the Budget Narrative Attachment Form in the application kit. Applicants request funding only for activities not already funded/supported by other funding sources. Awards support separate activities and new federal funding cannot be supplanted by other federal funding. In the budget request, applicant distinguishes between activities funded under this application and activities funded with other

sources. Other funding sources include other HHS grant programs, and other federal funding sources as applicable. **Insufficient budget detail and justification may negatively impact the review of the application.**

A sample Budget Narrative is included below.

A. (Personnel) Salaries and Wages

For each requested position, provide the following information: title of position; name of staff member occupying the position, if available; annual salary; percentage of time budgeted for this program (FTE or level of effort); total months of salary budgeted; and total salary requested. Also, provide a justification and describe the scope of responsibility for each position, relating it to the accomplishment of program objectives. These individuals must be employees of the applicant organization.

Note: As stated in applicable Appropriations Law, none of the funds appropriated shall be used to pay the salary of an individual, through a grant or other extramural mechanism, at a rate in excess of Executive Level II. This salary cap applies to direct salaries and to those salaries covered under indirect costs, also known as facilities and administrative (F & A). Please consult the following link to determine the applicable current salary cap: <https://www.opm.gov/policy-data-oversight/pay-leave/salaries-wages/>

Sample Budget

<i>Personnel Total</i>	\$ _____
<i>Grant</i>	\$ _____
<i>Funding other than Grant</i>	\$ _____
<i>Sources of Funding</i>	_____

Position Title	Name (if known)	Annual	Time	Months	Amount Requested
Project Director	Susan Taylor	\$45,000	100%	12 months	\$45,000
Finance Administrator	John Johnson	\$28,500	50%	12 months	\$14,250
Outreach Supervisor	Vacant	\$27,000	100%	12 months	\$27,000
Total:					\$86,250

Sample Justification

The format may vary, but the description of responsibilities should be directly related to specific program objectives.

Job Description: Project Director - (Name)

This position directs the overall operation of the project; responsible for overseeing the implementation of project activities, coordination with other agencies, development of materials, provisions of in-service and training, conducting meetings; designs and directs the gathering, tabulating and interpreting of required data; responsible for overall program evaluation and for staff performance evaluation; and is the responsible authority for ensuring necessary reports/documentation are submitted to CMS. This position relates to all program objectives.

B. Fringe Benefits

Fringe benefits are usually applicable to direct salaries and wages. Provide information on the rate of fringe benefits used and the basis for their calculation (reference NICRA if applicable). If a fringe benefit rate is not used, itemize how the fringe benefit amount is computed. This information must be provided for each position (unless the rates for all positions are identical).

Sample Budget

<i>Fringe Benefits Total</i>	<i>\$</i> _____
<i>Grant</i>	<i>\$</i> _____
<i>Funding other than Grant</i>	<i>\$</i> _____
<i>Sources of Funding</i>	_____

Fringe Benefit	Rate	Salary Requested	Amount Requested
FICA	7.65%	\$45,000	\$3443
Worker's Compensation	2.5%	\$14,250	\$356
Insurance	Flat rate - \$2,000 (100% FTE for 12 months)	\$2,000	\$2,000
Retirement	5%	\$27,000	\$1,350
Total			\$7,149

C. Travel

Dollars requested in the travel category are for **applicant staff travel only**. Travel for consultants is in the consultant category. Allowable travel for other participants, advisory committees, review panel, etc. is itemized in the same way specified below and placed in the “**Other**” category. Travel incurred through a contract is in the contractual category. Provide a narrative describing the travel staff members will perform. This narrative includes a justification of why this travel is necessary and how it will enable the applicant to complete program requirements included in the Notice of Funding Opportunity. List where travel will be undertaken, number of trips planned, who will be making the trip, and approximate dates. If mileage is to be paid, provide the number of miles and the cost per mile. The mileage rate cannot exceed the rate set by the General Services Administration (GSA). If travel is by air, provide the estimated cost of airfare. The lowest available commercial airfares for coach or equivalent accommodations is used. If per diem/lodging is to be paid, indicate the number of days and amount of daily per diem as well as the number of nights and estimated cost of lodging. Costs for per diem/lodging cannot exceed the rates set by GSA. Include the cost of ground transportation when applicable. Please refer to the GSA website by using the following link: <http://www.gsa.gov/portal/content/104877>.

Sample Budget

<i>Fringe Benefits Total</i>	\$ _____
<i>Grant</i>	\$ _____
<i>Funding other than Grant</i>	\$ _____
<i>Sources of Funding</i>	_____

Purpose of Travel	Location	Item	Rate	Cost
Site Visits	Neighboring areas of XXX	Mileage	\$0.545 x 49 miles (use mileage rate in effect at time of mileage incurrence) x 25 trips	\$668
Training (ABC)	Chicago, IL	Airfare	\$200/flight x 2 persons	\$400
		Luggage Fees	\$50/flight x 2 persons	\$100
		Hotel	\$140/night x 2 persons x 3 nights	\$840
		Per Diem (meals)	\$49/day x 2 persons x 4 days	\$392
		Transportation (to and from airport)	\$50/shuttle x 2 persons x 2 shuttles	\$200
		Transportation (to and from hotel)	\$25/shuttle x 2 persons x 2 shuttles	\$100
				\$2,700

Sample Justification

The Project Coordinator and the Outreach Supervisor will travel to (location) to attend a conference on the following topic XXXX held once a year in Chicago, IL. Attending this conference is directly linked to project goals/objectives and is a necessity because XXXX. The information and tools we will gather from attending this conference will help us to accomplish project objectives by XXXX. A sample itinerary is provided upon request. The Project Coordinator will also make an estimated 25 trips to birth center sites to monitor program implementation (# of birth centers, # of trips per site). We are still in the process of identifying all birth center sites, and identified an average mileage total for each site. This travel is necessary to ensure birth center sites are consistently and systematically collecting birth center data and submitting by deadlines provided. On-site monitoring will enable us to address concerns. This travel also furthers our efforts to accomplish specific project goals for the following reasons

D. Equipment

Equipment is tangible nonexpendable personal property, including exempt property, charged directly to the award having a useful life of more than one year and an acquisition cost of \$5,000 or more per unit. However, consistent with recipient policy, lower limits may be established.

Note: Technology items such as computers that do not meet the \$5,000 per unit threshold or an alternative lower limit set by recipient policy that may therefore be classified as **supplies**, must still be individually tagged and recorded in an equipment/technology database. This database should include any information necessary to properly identify and locate the item, for example; serial # and physical location of equipment (e.g. laptops, tablets, etc.).

Provide justification for the use of each equipment item and relate it to specific program objectives. List maintenance or rental fees for equipment in the “Other” category. Ensure that all IT equipment is uniquely identified. Show the unit cost of each item, number needed, and total amount.

Sample Budget

<i>Equipment Benefits Total</i>	\$ _____
<i>Grant</i>	\$ _____
<i>Funding other than Grant</i>	\$ _____
<i>Sources of Funding</i>	_____

Item(s)	Rate	Cost
All-in-one Printer, Copier, and Scanner (large scale)	1 @ \$5,800	\$5,800
X-Ray Machine	1 @ \$8,000	\$8,000
Total:		\$13,800

Sample Justification

Provide complete justification for all requested equipment, including a description of how the program utilizes the equipment. For equipment and tools shared amongst programs, please cost allocate as appropriate. Applicant should provide a list of hardware, software and IT equipment that will be required to complete this effort. Additionally, they should provide a list of non-IT equipment that will be required to complete this effort.

E. Supplies

Supplies includes all tangible personal property with an acquisition cost of less than \$5,000 per unit or an alternative lower limit set by recipient policy. Individually list each item requested. Show the unit cost of each item, number needed, and total amount. Provide justification for each item and relate it to specific program objectives. Classify technology items such as computers that do not meet the \$5,000 per unit threshold or an alternative lower limit set by recipient policy as **supplies** and individually tag and record in an equipment/technology database. If appropriate, General Office Supplies may be shown by an estimated amount per month times the number of months in the budget category.

Sample Budget

<i>Supplies Total</i>	\$ _____
<i>Grant</i>	\$ _____
<i>Funding other than Grant</i>	\$ _____
<i>Sources of Funding</i>	_____

Item(s)	Rate	Cost
Laptop Computer	2 @ \$1,000	\$2,000
Printer	1 @ \$200	\$200
General office supplies	12 months x \$24/mo x 10 staff	\$2,880
Educational pamphlets	3,000 copies @ \$1 each	\$3,000
Educational videos	10 copies @ \$150 each	\$1,500
Total:		\$9,580

Sample Justification

General office supplies will be used by staff members to carry out daily activities of the program. The project coordinator will be a new position and will require a laptop computer and printer to complete required activities under this Notice of Funding Opportunity. The price of the laptop computer and printer is consistent with those purchased for other employees of the organization and is based upon a recently acquired invoice (which can be provided upon request). The pricing of the selected computer is necessary because it includes the following tools XXXX (e.g. firewall, etc.). The education pamphlets and videos will be purchased from XXX and used to illustrate and promote safe and healthy activities. Usage of these pamphlets and videos will enable us to address components one and two of our draft proposal. Word Processing Software will be used to document program activities, process progress reports, etc.

F. Consultant/Subrecipient/Contractual Costs

A complete description and cost breakdown, as outlined below, is provided for each consultant, subrecipient or contract.

REQUIRED REPORTING INFORMATION FOR CONSULTANT HIRING

This category is appropriate when hiring an individual who gives professional advice or provides services (e.g. training, expert consultant, etc.) for a fee and who is not an employee of the Recipient organization. Submit the following required information for consultants:

1. Name of Consultant: Identify the name of the consultant and describe the person's qualifications.
2. Organizational Affiliation: Identify the organizational affiliation of the consultant, if applicable.
3. Nature of Services to be Rendered: Describe in outcome terms the consultation to be provided including the specific tasks to be completed and specific deliverables.
4. Relevance of Service to the Project: Describe how the consultant services relate to the accomplishment of specific program objectives.
5. Number of Days of Consultation: Specify the total number of days of consultation.

6. **Expected Rate of Compensation:** Specify the rate of compensation for the consultant (e.g., rate per hour, rate per day). Include a budget showing other costs such as travel, per diem, and supplies.
7. **Justification of expected compensation rates:** Provide a justification for the rate, including examples of typical market rates for this service in your area.
8. **Method of Accountability:** Describe how the applicant monitors progress and performance of the consultant. Identify who is responsible for supervising the consultant agreement.

REQUIRED REPORTING INFORMATION FOR SUBRECIPIENT APPROVAL

The costs of project activities to be undertaken by a subrecipient is included in this category. Please use formats from “Sample Budget” and “Sample Justification” above. For more information on subrecipient and contractual relationships, please refer to HHS regulation 45 CFR 75.351 *Subrecipient and Contractor Determinations* and 75.352 *Requirements for pass-through entities*.

REQUIRED REPORTING INFORMATION FOR CONTRACT APPROVAL

All recipients must submit to CMS the following required information for establishing a contract to perform project activities.

1. **Name of Contractor:** Who is the contractor? Identify the name of the proposed contractor and indicate whether the contract is with an institution or organization.
2. **Method of Selection:** How was the contractor selected? State whether the contract is sole source or competitive bid. If an organization is the sole source for the contract, include an explanation as to why this institution is the only one able to perform contract services.
3. **Period of Performance:** How long is the contract period? Specify the beginning and ending dates of the contract.
4. **Scope of Work:** What will the contractor do? Describe in outcome terms, the specific services/tasks performed by the contractor as related to the accomplishment of program objectives. Clearly define the deliverables.
5. **Method of Accountability:** Describe the monitoring plan of the progress and performance of the contractor during and on close of the contract period. Identify who will be responsible for supervising the contract.
6. **Itemized Budget and Justification:** Provide an itemized budget with appropriate justification. If applicable, include any indirect cost paid under the contract and the indirect cost rate used.

G. Construction (not applicable)

H. Other

This category contains items not included in the previous budget categories. Individually list each item requested and provide appropriate justification related to the program objectives.

Sample Budget

<i>Other Total</i>	\$ _____
<i>Grant</i>	\$ _____
<i>Funding other than Grant</i>	\$ _____
<i>Sources of Funding</i>	_____

Item(s)	Rate	Cost
Telephone	\$45 per month x 3 employees x 12 months	\$1,620
Postage	\$250 per quarter x 4 quarters	\$1,000
Printing	\$0.50 x 3,000 copies	\$1,500
Equipment Rental *specify item	\$1,000 per day for 3 days	\$3,000
Internet Provider Service	\$20 per month x 3 employees x 12 months	\$720
Word Processing Software (specify type)	1 @ \$400	\$400
Total:		\$8,240

[Some items are self-explanatory (telephone, postage, rent) unless the unit rate or total amount requested is excessive. If the item is not self-explanatory and/or the rate is excessive, include additional justification. For printing costs, identify the types and number of copies of documents to be printed (e.g., procedure manuals, annual reports, materials for media campaign).]

Sample Justification

We are requesting costs to accommodate telephone and internet costs for the 3 new hires that will be working on this project in the new space designated. We are also requesting printing and postage costs to support producing fliers to disseminate in the community and brochures to educate participants enrolled in the program. The word processing software will be used to help us track data and compile reports. To track and compile the data, we will need to rent _____. Without this equipment, we will not be able to produce this information in an accurate and timely manner.

I. Total Direct Costs

\$ _____

Show total direct costs by listing totals of each category.

J. Indirect Costs

\$ _____

To claim indirect costs, the applicant organization must have a current approved negotiated indirect cost rate agreement (NICRA) established with the Cognizant Federal agency unless the organization has never established one (see 45 CFR §75.414 for more information). If a rate has been issued, a copy of the most recent negotiated indirect cost rate agreement must be provided with the application.

Sample Budget

The rate is ____% and is computed on the following direct cost base of \$_____.

Personnel \$ _____
Fringe \$ _____
Travel \$ _____
Supplies \$ _____
Other \$ _____
Total \$ _____ x _____% = Total Indirect Costs

If the applicant organization has never received an indirect cost rate, except for those non-Federal entities described in Appendix VII(D)(1)(b) to 45 CFR part 75, the applicant may elect to charge a de minimis rate of 10% of modified total direct costs (MTDC). If the applicant has never received an indirect cost rate and wants to exceed the de minimis rate, then costs normally identified as indirect costs (overhead costs) can be budgeted and identified as direct costs. These costs should be outlined in the “other” costs category and fully described and itemized as other direct costs.

Appendix II. Application and Submission Information

Please CTRL/Click to access links or paste to your browser. Please note these are the most up-to-date directions and links we have. Applicants are advised to check the websites for any changes. Also, phone numbers are provided if additional assistance is needed as several websites have made recent changes to links and directions.

This NOFO contains all the instructions to enable a potential applicant to apply. The application is written primarily as a narrative with the addition of standard forms required by the Federal government for all grants and cooperative agreements.

With respect to electronic methods for providing information about funding opportunities or accepting applicants' submissions of information, CMS complies with Section 508 of the Rehabilitation Act of 1973 (29 U.S.C. 794d).

EIN, DUNS, AND SAM REQUIREMENTS (ALL APPLICATIONS)

Employer Identification Number

All applicants under this Notice of Funding Opportunity must have an Employer Identification Number (EIN), otherwise known as a Taxpayer Identification Number (TIN), to apply. **Please note, applicants should begin the process of obtaining an EIN/TIN as soon as possible after the Notice of Funding Opportunity is posted to ensure this information is received in advance of application deadlines. The process to obtain an EIN typically takes up to 5 weeks.**

Dun and Bradstreet (D&B) Data Universal Numbering System (DUNS Number)

All applicants must have a Dun and Bradstreet (D&B) Data Universal Numbering System (DUNS) number. The DUNS number is a nine-digit number that uniquely identifies business entities. To obtain a DUNS number access the following website: <https://fedgov.dnb.com/webform/> or call 1-866-705-5711. This number is entered in block 8c (on Form SF-424, Application for Federal Assistance). The organization name and address entered in block 8a and 8e should be exactly as given for the DUNS number.

Applicants should obtain this DUNS number as soon as possible after the Notice of Funding Opportunity is posted to ensure all registration steps are completed in time.

System for Award Management (SAM)

The applicant must register in the System for Award Management (SAM) database in order to be able to submit the application. Applicants can access <https://beta.sam.gov/> and complete the online registration. DUNS and EIN/TIN numbers are required to complete the registration

process. To register one or more domestic entities and appoint an entity administrator, the applicant organization must send a notarized letter to SAM. **Applicants should begin the SAM registration process as soon as possible after the Notice of Funding Opportunity is posted to ensure that it does not impair your ability to meet required submission deadlines. The process to register in SAM typically takes up to 2 weeks following receipt of the notarized letter (additional 5 weeks if an EIN must be established first).**

Each year organizations and entities registered to apply for Federal grants or cooperative agreements through Grants.gov must renew their registration with SAM. **Failure to renew SAM registration prior to application submission will prevent an applicant from successfully applying via Grants.gov. Similarly, failure to maintain an active SAM registration during the application review process can prevent CMS from issuing your agency an award.**

Applicants must also successfully register with SAM prior to registering in the Federal Funding Accountability and Transparency Act Subaward Reporting System (FSRS) as a prime awardee user. Please also refer to Section F5.c *Federal Funding Accountability and Transparency Act Reporting Requirements* of this Funding Opportunity for more information. Primary awardees must maintain a current registration with the SAM database, and **may make subawards only to entities that have DUNS numbers.**

Organizations must report executive compensation as part of the registration profile at <https://beta.sam.gov/> by the end of the month following the month in which this award is made, and annually thereafter (based on the reporting requirements of the Federal Funding Accountability and Transparency Act (FFATA) of 2006 (Pub. L. 109-282), as amended by Section 6202 of Public Law 110-252 and implemented by 2 CFR Part 170).

APPLICATION MATERIALS AND INSTRUCTIONS TO APPLY VIA GRANTS.GOV

CMS requires applications for all competitive Notice of Funding Opportunities to be submitted electronically through <https://www.grants.gov>. For assistance with this process contact support@grants.gov or 1-800-518-4726. Below is an overview of the instructions from the Grants.gov website. Applicants can access the site directly for more detailed information.

How to Register to Apply through Grants.gov

- *Obtain DUNS number.*
- *Complete SAM registration.*
- *Register.* Click the Register link and complete the on-screen instructions or refer to detailed instructions here:
<https://www.grants.gov/web/grants/applicants/registration.html>.
- *Add a Profile to the Account:* The profile corresponds to a single applicant organization the user represents (i.e., an applicant) or an individual applicant. If you work for or

consult with multiple organizations and have a profile for each, you may log in to one Grants.gov account to access all of your grant applications. To add an organizational profile enter the DUNS Number for the organization in the UEI (Unique Entity Identifier) field while adding a profile. For more detailed instructions about creating a profile refer to: <https://www.grants.gov/web/grants/applicants/registration/add-profile.html>

- *EBiz POC Authorized Profile Roles:* After you register and create an Organization Applicant Profile, the organization applicant's request for Grants.gov roles and access is sent to the EBiz POC. The EBiz POC will then log in and authorize the appropriate roles, which may include the AOR role, thereby giving you permission to complete and submit applications on behalf of the organization. You will be able to submit your application online any time after you have been assigned the AOR role. For more detailed instructions about creating a profile refer to: <https://www.grants.gov/web/grants/applicants/registration/authorize-roles.html>
- *Track Role Status:* To track your role request, refer to: <https://www.grants.gov/web/grants/applicants/registration/track-role-status.html>
- *Electronic Signature:* When applications are submitted through Grants.gov, the name of the organization applicant with the AOR role that submitted the application is inserted into the signature line of the application, serving as the electronic signature. The EBiz POC **must** authorize people who are able to make legally binding commitments on behalf of the organization as a user with the AOR role; **this step is often missed and it is crucial for valid and timely submissions.**

How to Submit an Application to CMS via Grants.gov

Grants.gov applicants can apply online using Workspace. Workspace is a shared, online environment where members of a grant team may simultaneously access and edit different webforms within an application. For each Notice of Funding Opportunity (alternatively, may be referred to as Funding Opportunity Announcement (FOA)), you can create individual instances of a workspace. *Note:* Search for the application package by entering in the Federal Assistance Listings (CFDA) number. This number is shown on the Federal Assistance Listings (or CFDA) website at <https://beta.sam.gov/help/assistance-listing> and cover page of the funding opportunity.

Applications cannot be accepted through any email address. Full applications can only be accepted through <https://www.grants.gov>. Full applications cannot be received via paper mail, courier, or delivery service.

Below is an overview of submitting an application. For access to complete instructions on how to apply for opportunities, refer to:

<https://www.grants.gov/web/grants/applicants/workspace-overview.html>

1) *Create a Workspace*: Creating a workspace allows you to complete it online and route it through your organization for review before submitting.

2) *Complete a Workspace*: Add participants to the workspace to work on the application together, complete all the required forms online or by downloading PDF versions, and check for errors before submission. The Workspace progress bar will display the state of your application process as you apply. As you apply using Workspace, you may click the blue question mark icon near the upper-right corner of each page to access context-sensitive help.

a. *Adobe Reader*: If you decide not to apply by filling out webforms you can download individual PDF forms in Workspace. The individual PDF forms can be downloaded and saved to your local device storage, network drive(s), or external drives, then accessed through Adobe Reader.

NOTE: Visit the Adobe Software Compatibility page on Grants.gov to download the appropriate version of the software at:

<https://www.grants.gov/web/grants/applicants/adobe-software-compatibility.html>

b. *Mandatory Fields in Forms*: In the forms, you will note fields marked with an asterisk and a different background color. These fields are mandatory fields that must be completed to successfully submit your application.

c. *Complete SF-424 Fields First*: The forms are designed to fill in common required fields across other forms, such as the applicant name, address, and DUNS Number. Once it is completed, the information will transfer to the other forms.

3) *Submit a Workspace*: An application may be submitted through workspace by clicking the Sign and Submit button on the Manage Workspace page, under the Forms tab.

Grants.gov recommends submitting your application package at least 24-48 hours prior to the close date to provide you with time to correct any potential technical issues that may disrupt the application submission.

4) *Track a Workspace Submission*: After successfully submitting a workspace application, a Grants.gov Tracking Number (GRANTXXXXXXXX) is automatically assigned to the application. The number will be listed on the Confirmation page that is generated after submission. Using the tracking number, access the Track My Application page under the Applicants tab or the Details tab in the submitted workspace.

For additional training resources, including video tutorials, refer to:

<https://www.grants.gov/web/grants/applicants/applicant-training.html>

Applicant Support: 24/7 support is available via the toll-free number 1-800-518-4726 and email at support@grants.gov. For questions related to the specific grant opportunity, contact the number listed in the application package of the grant you are applying for.

If you are experiencing difficulties with your submission, it is best to call the Grants.gov Support Center and get a ticket number. The Support Center ticket number will assist CMS with tracking your issue and understanding background information on the issue.

Timely Receipt Requirements and Proof of Timely Submission

All grant and cooperative agreement applications must be submitted electronically and **received** through <https://www.grants.gov> by 3:00 p.m. Eastern Standard or Daylight Time (Baltimore, MD) by the applicable deadline date. Please refer to the Executive Summary of this Notice of Funding Opportunity for submission deadline date.

Proof of timely submission is automatically recorded and an electronic date/time stamp is generated within the system when the application is successfully received by Grants.gov. The applicant with the AOR role who submitted the application will receive an acknowledgement of receipt and a tracking number (GRANTXXXXXXXX) with the successful transmission of their application. This applicant with the AOR role will also receive the official date/time stamp and Grants.gov Tracking number in an email serving as proof of their timely submission.

Please note, applicants may incur a time delay before they receive acknowledgement that the application has been accepted by the Grants.gov system. Applicants should not wait until the application deadline to apply because notification by Grants.gov that the application is incomplete may not be received until close to or after the application deadline, eliminating the opportunity to correct errors and resubmit the application. Applications submitted after the deadline, as a result of errors on the part of the applicant, will not be reviewed.

When CMS successfully retrieves the application, and acknowledges the download of submissions, Grants.gov will provide an electronic acknowledgment of receipt of the application to the email address of the applicant with the AOR role who submitted the application. Again, proof of timely submission shall be the official date and time that Grants.gov receives your application. Applications received after the established due date for the program will be considered late and will not be considered for funding by CMS.

Applicants using slow internet, such as dial-up connections, should be aware that transmission can take some time before your application is received. Again, Grants.gov will provide either an error or a successfully received transmission in the form of an email sent to the applicant with the AOR role attempting to submit the application. The Support Center reports that some applicants end the transmission because they think that nothing is occurring during the transmission process. Please be patient and give the system time to process the application.

To be considered timely, applications must be received by the published deadline date. However, a general extension of a published application deadline that affects all State applicants or only those in a defined geographical area may be authorized by circumstances that affect the public at

large, such as natural disasters (e.g., floods or hurricanes) or disruptions of electronic (e.g., application receipt services) or other services, such as a prolonged blackout. This statement does not apply to an individual entity having internet service problems. In order for there to be any consideration there must be an effect on the public at large.

Grants.gov complies with Section 508 of the Rehabilitation Act of 1973. If an individual uses assistive technology and is unable to access any material on the site, including forms contained within an application package, the individual can e-mail the contact center at support@grants.gov for help, or call 1-800-518-4726.

Appendix III. Business Assessment of Applicant Organization

Applicants review and answer the business assessment questions outlined below. There are eleven (11) topic areas labeled A-K, with a varying number of questions within each topic area. **Applicants MUST provide a brief substantive answer to each question (and supporting documentation as applicable).** If the answer to any question is non-applicable, please provide an explanation. Please note, if CMS cannot complete its review without contacting the applicant for additional clarification, the applicant risks selection for award.

A. General Information

1. Provide organization:
 - a. Legal name:
 - b. EIN:
 - c. Organizational Type:
2. What percentage of the organization's capital is from Federal funding? (percentage = total Federal funding received in previous fiscal year / organization's total gross revenue in previous fiscal year).
3. Does/did the organization receive additional oversight (ex: Correction Action Plan, Federal Awardee Performance and Integrity Information System (FAPIIS) finding, reimbursement payments for enforcement actions) from a Federal agency within the past 3 years due to past performance or other programmatic or financial concerns with the organization)?
 - a. If yes, please provide the following information: Name of the Federal agency; reason for the additional oversight as explained by the Federal agency:
 - b. If resolved, please indicate how the issue was resolved with the agency.
4. Does the organization currently manage grants with other U.S. Department of Health and Human Services components or other Federal agencies?
5. Explain your organization's process to ensure annual renewal in System for Award Management (to include FAPIIS).
6. Explain your organization's process to comply with (a) [45 CFR 75.113](#) Mandatory Disclosures and (b) your organization's process to comply with FFATA requirements.
7. Do you have conflict of interest policies? Does your organization or any of its employees have any personal or organizational conflicts of interest related to the possible receipt of these CMS award funds? If yes, please explain and provide a mitigation plan.
8. Does your organization currently, or in the past, had delinquent Federal debt in the last 3 years? If yes, please explain.
9. Has the organization obtained fidelity bond insurance coverage for responsible officials and employees of the organization in amounts required by statute or

organization policy? What is that amount?

10. Do you have (and briefly describe) policies and procedures in place to meet the requirements below? If not, explain your plan and estimated timeline for establishing these policies and procedures if selected for award.
 - a. make determinations between subrecipient versus contracts in accordance with [45 CFR 75.351](#)?
 - b. notify entities at the time of the award/agreement if they are a subrecipient in compliance with [45 CFR 75.352](#)?
 - c. manage, assess risk, review audits, and monitor the subrecipient as necessary to ensure that subawards are used for authorized purposes in compliance with laws, regulations, and terms and conditions of the award and that established subaward performance goals are achieved (45 CFR § [75.351–75.353](#))?

B. Accounting System

1. Does the organization have updated (last two years) written accounting policies and procedures to manage federal awards in accordance with 45 CFR Part 75?
 - a. If no, please provide a brief explanation of why not.
 - b. Describe the management of federal funds and how funds are separated (not co-mingling) from other organizational funds.
2. Briefly describe budgetary controls in effect to preclude incurring obligations in excess of:
 - a. Total funds available for an award.
 - b. Total funds available for a budget cost category.
3. Has any government agency rendered an official written opinion within the last 3 years concerning the adequacy of the organization's accounting system for the collection, identification, and allocation of costs under Federal awards?
 - a. If yes, please provide the name and address of the Agency that performed the review.
 - b. Provide a summary of the opinion.
 - c. How did your organization resolve any concerns?
4. How does the accounting system provide for recording the non-Federal share and in-kind contributions (if applicable for a grant program).
5. Does the organization's accounting system provide identification for award funding by federal agency, pass-through entity, Assistance Listing (CFDA), award number and period of funding? If yes, how does your organization identify awards? If not, please explain why not.

C. Budgetary Controls

1. What are the organization's controls utilized to ensure that the Authorized Organizational Representative (AOR), as identified on the SF-424, approves all

- budget changes for the federal award?
2. Describe the organization's procedures for minimizing the time between transfer of funds from the U.S. Treasury (e.g. Payment Management System) and disbursement for grant activities (See 45 CFR §75.305, "Payment.").

D. Personnel

1. Does the organization have a current organizational chart or similar document establishing clear lines of responsibility and authority?
 - a. If yes, please provide a copy.
 - b. If no, how are lines of responsibility and authority determined?
2. Does the organization have updated (last two years) written Personnel and/or Human Resource policies and procedures? If no, provide a brief explanation.
3. Does the organization pay compensation to Board Members?
4. Are staff responsible for fiscal and administrative oversight of HHS awards (Grants Manager, CEO, Financial Officer) familiar with federal rules and regulations applicable to grants and cooperative agreements (e.g. [45 CFR Part 75](#))?
5. Please describe how the payroll distribution system accounts for, tracks, and verifies the total effort (100%) to determine employee compensation.

E. Payroll

1. In preparation of payroll is there a segregation of duties for the staff who prepare the payroll and those that sign the checks, have custody of cash funds and maintain accounting records? Please describe.

F. Consultants (See appendix I in the NOFO for relevant information)

1. Are there written policies or consistently followed procedures regarding the use of consultants which detail the following (include explanation for each question below):
 - a. Briefly describe the organization's method or policy for ensuring consultant costs and fees are allowable, allocable, necessary and reasonable.
 - b. Briefly describe the organization's method or policy to ensure prospective consultants prohibited from receiving Federal funds are not selected.

G. Property Management

1. Briefly describe the system for property management (tangible or intangible) utilized for maintaining property records consistent with 45 CFR 75.320(d).
**Refer to ([45 CFR 75.2](#)) for definitions of property to include personal property, equipment, and supplies.
2. Does the organization have adequate insurance to protect the Federal interest in equipment and real property (see [45 CFR §75.317, "Insurance coverage."](#))? How does the organization calculate the amount of insurance?

H. Procurement

Describe the organization's procurement procedures (in accordance with [45 CFR §75.326--§75.335](#), "Procurement procedures")? If there are no procurement procedures, briefly describe how your organization handles purchasing activities. A. Include individuals responsible and their roles. B. Describe the competitive bid process for procurement purchases of equipment, rentals, or service agreements that are over certain dollar amounts.

I. Travel

1. Describe the organizations written travel policy. Ensure, at minimum, that:
 - a. Travel charges are reimbursed based on actual costs incurred or by use of per diem and/or mileage rates (see [45 CFR §75.474](#), "Travel costs.").
 - b. Receipts for lodging and meals are required when reimbursement is based on actual cost incurred.
 - c. Subsistence and lodging rates are equal to or less than current Federal per diem and mileage rates.
 - d. Commercial transportation costs incurred at coach fares unless adequately justified. Lodging costs do not exceed GSA rate unless adequately justified (e.g. conference hotel).
 - e. Travel expense reports show purpose and date of trip.
 - f. Travel costs are approved by organizational official(s) and funding agency prior to travel.

J. Internal Controls

1. Provide a brief description of the applicant's internal controls that will provide reasonable assurance that the organization will manage award funds properly. (see [45 CFR §75.303](#), "Internal controls.").
2. What is your organization's policy on separation of duties as well as responsibility for receipt, payment, and recording of cash transactions?
3. Does the organization have internal audit or legal staff? If not, how do you ensure compliance with the award? Please describe.
4. If the organization has a petty cash fund, how is it monitored?
5. Who in the organization reconciles bank accounts? Is this person familiar with the organization's financial activities? Does your organization authorize this person to sign checks or handle cash?
6. Are all employees who handle funds required to be bonded against loss by reason of fraud or dishonesty?

K. Audit

1. What is your organization's fiscal year?

2. Did the organization expend \$750,000 or more in Federal awards from all sources during its most recent fiscal year?
3. Has your organization submitted:
 - a. an audit report to the ***Federal Audit Clearing House (FAC)*** in accordance with the Single Audit Act in the last 3 years? (see 45 CFR §75.501, “Audit requirements” and 45 CFR §75.216 “Special Provisions for Awards to Commercial Organization as Recipient.”)
or
 - b. an independent, external audit? If no, briefly explain. If yes, address the following:
 - i. The date of the most recently submitted audit report.
 - ii. The auditor's opinion on the financial statement.
 - iii. If applicable, indicate if your organization has findings in the following areas: 1) internal controls, 2) questioned or unallowable costs, 3) procurement/suspension and debarment, 4) cash management of award funds, and 5) subrecipient monitoring.
 - iv. Include (if applicable):
 1. A description of each finding classified as Material Weakness.
 2. A description of each finding classified as Significant Deficiency.
4. Does the organization have corrective actions in the past 2 years for the findings identified above (3(iii))? If yes, describe the status (closed or open) and progress made on those corrective actions.

Appendix IV: Accessibility Requirements

CMS and its recipients are responsible for complying with federal laws regarding accessibility as noted in the Award Administration Information/Administration and National Policy Requirements Section.

The Recipient may receive a request from a beneficiary or member of the public for information in accessible formats. All successful applicants under this Notice of Funding Opportunity must comply with the following reporting and review activities regarding accessibility requests:

Accessibility Requirements:

1. **Public Notification:** If you have a public facing website, you shall post a message no later than **30** business days after award that notifies your customers of their right to receive an accessible format. Sample language may be found at: <https://www.medicare.gov/about-us/nondiscrimination/nondiscrimination-notice.html>. Your notice shall be crafted applicable to your program.

2. Processing Requests Made by Individuals with Disabilities:

a. Documents:

i. When receiving a request for information in an alternate format (e.g., Braille, Large print, etc.) from a beneficiary or member of the public, you must:

1. Consider/evaluate the request according to civil rights laws.
2. Acknowledge receipt of the request and explain your process within **2** business days.
3. Establish a mechanism to provide the request.

ii. If you are unable to fulfill an accessible format request, CMS may work with you in an effort to provide the accessible format as funding and resources allow. You shall refer the request to CMS within **3** business days if unable to provide the request. You shall submit the request, using encrypted e-mail (to safeguard any personally identifiable information), to the AltFormatRequest@cms.hhs.gov mailbox with the following information:

1. The e-mail title shall read “Grantee (Organization) Alternate Format Document Request.”
2. The body of the e-mail shall include:
 - a. Requester’s name, phone number, e-mail, and mailing address.
 - b. The type of accessible format requested, e.g., audio recording on compact disc (CD), written document in Braille, written

document in large print, document in a format that is read by qualified readers, etc.

c. Contact information for the person submitting the e-mail – Organization (Grantee), name, phone number and e-mail.

d. The document that needs to be put into an accessible format shall be attached to the e-mail.

e. CMS may respond to the request and provide the information directly to the requester.

iii. The Recipient shall maintain record of all alternate format requests received including the requestor's name, contact information, date of request, document requested, format requested, date of acknowledgment, date request provided, and date referred to CMS if applicable. Forward quarterly records to the AltFormatRequest@cms.hhs.gov mailbox.

b. Services

i. When receiving request for auxiliary aids and services (e.g., sign language interpreter) from a beneficiary or member of the public, you must:

1. Consider/evaluate the request according to civil rights laws.
2. Acknowledge receipt of the request and explain your process within **2** business days.
3. Establish a mechanism to provide the request.

ii. If you are unable to fulfill an accessible service request, CMS may work with you in an effort to provide the accessible service as funding and resources allow. You shall refer the request to CMS within **3** business days if unable to provide the service. You shall submit the request, using encrypted e-mail (to safeguard any personally identifiable information), to the AltFormatRequest@cms.hhs.gov mailbox with the following information:

1. The e-mail title shall read "Grantee (Organization) Accessible Service Request."
2. The body of the e-mail shall include:
 - a. Requester's name, phone number, e-mail, and mailing address.
 - b. The type of service requested (e.g., sign language interpreter and the type of sign language needed).
 - c. The date, time, address and duration of the needed service.
 - d. A description of the venue for which the service is needed (e.g., public education seminar, one-on-one interview, etc.)
 - e. Contact information for the person submitting the e-mail – Organization (Grantee), name, phone number and e-mail.

f. Any applicable documents shall be attached to the e-mail. CMS will respond to the request and respond directly to the requester.

iii. The Recipient shall maintain record of all accessible service requests received including the requestor's name, contact information, date of request, service requested, date of acknowledgment, date service provided, and date referred to CMS if applicable. Forward quarterly records to the AltFormatRequest@cms.hhs.gov mailbox.

3. Processing Requests Made by Individuals with Limited English Proficiency (LEP):

a. Documents:

i. When receiving a request for information in a language other than English from a beneficiary or member of the public, you must:

1. Consider/evaluate the request according to civil rights laws.
2. Acknowledge receipt of the request and explain your process within **2** business days.
3. Establish a mechanism to provide the request as applicable.

ii. If you are unable to fulfill an alternate language format request, CMS may work with you in an effort to provide the alternate language format as funding and resources allow. You shall refer the request to CMS within **3** business days if unable to provide the request. You shall submit the request, using encrypted e-mail (to safeguard any personally identifiable information), to the AltFormatRequest@cms.hhs.gov mailbox with the following information:

1. The e-mail title shall read "Grantee (Organization) Alternate Language Document Request."

2. The body of the e-mail shall include:

- a. Requester's name, phone number, e-mail, and mailing address.
- b. The language requested.
- c. Contact information for the person submitting the e-mail – Organization (Recipient), name, phone number and e-mail.
- d. The document that needs to be translated shall be attached to the e-mail.
- e. CMS may respond to the request and provide the information directly to the requester.

iii. The Recipient shall maintain record of all alternate language requests received including the requestor's name, contact information, date of request, document requested, language requested, date of acknowledgment, date request provided, and date referred to CMS if applicable. Forward quarterly records to the AltFormatRequest@cms.hhs.gov mailbox.

b. Services

i. When receiving request for an alternate language service (e.g., oral language interpreter) from a beneficiary or member of the public, you must:

1. Consider/evaluate the request according to civil rights laws.
2. Acknowledge receipt of the request and explain your process within **2** business days.
3. Establish a mechanism to provide the request as applicable.

ii. If you are unable to fulfill an alternate language service request, CMS may work with you in an effort to provide the alternate language service as funding and resources allow. You shall refer the request to CMS within **3** business days if unable to provide the service. You shall submit the request, using encrypted e-mail (to safeguard any personally identifiable information), to the AltFormatRequest@cms.hhs.gov mailbox with the following information:

1. The e-mail title shall read “Grantee (Organization) Accessible Service Request.”
2. The body of the e-mail shall include:
 - a. Requester’s name, phone number, e-mail, and mailing address.
 - b. The language requested.
 - c. The date, time, address and duration of the needed service.
 - d. A description of the venue for which the service is needed (e.g., public education seminar, one-on-one interview, etc.)
 - e. Contact information for the person submitting the e-mail – Organization (Recipient), name, phone number and e-mail.
 - f. Any applicable documents shall be attached to the e-mail.
 - g. CMS will respond to the request and respond directly to the requester.

iii. The Recipient shall maintain record of all alternate language service requests received including the requestor’s name, contact information, date of request, language requested, service requested, date of acknowledgment, date service provided, and date referred to CMS if applicable. Forward quarterly records to the AltFormatRequest@cms.hhs.gov mailbox.

Please contact the CMS Office of Equal Opportunity and Civil Rights for more information about accessibility reporting obligations at AltFormatRequest@cms.hhs.gov.

Appendix V. Review and Selection Process

The review and selection process will include the following:

- i. Applications will undergo an initial eligibility screening to determine their eligibility for further review using the criteria detailed in Sections C. *Eligibility Information*, and D. *Application and Submission Information* (with cross-reference to Appendix II, *Application and Submission Information*), of this Funding Opportunity.
 - **Applications that are received late, fail to meet the eligibility requirements as detailed in this Funding Opportunity, do not adhere to page limitations and other formatting requirement, or do not include all required forms, may be deemed ineligible for review by the objective review committee.**
 - The CMS/OAGM/GMO, in his or her sole discretion, may continue the review process for an ineligible application if it is in the best interest of the government to meet the objectives of the program.
- ii. Procedures for assessing the technical merit of cooperative agreement applications have been instituted to provide for an objective review of applications and to assist applicants in understanding the standards against which each application will be judged.
 - The review criteria described in Section E1. *Criteria*, will be used to conduct the initial eligibility screening and determine the technical merits of each application. Applicants should pay close attention to ensure they are addressing all criteria outlined in this Funding Opportunity.
- iii. Applications that successfully complete the initial eligibility screening will be deemed eligible for review and evaluation by an objective review committee.
 - The objective review committee will consist of qualified, unbiased experts and may include Federal and/or non-Federal reviewers.
 - Objective review committee members will review and score the applications based on the criteria outlined in Section E1. *Criteria*. Applications will receive a score of up to 200 points, with a minimum score of 120 points required to be considered for an award.
 - CMS reserves the right to request that applicants revise or otherwise modify their proposals and budget based on recommendations from the objective review committee.
- iv. The results of the objective review committee's review of the applications will be used to advise the CMS approving official in making final selection and award decisions.

- v. Following the objective review, the selection and award process may be separated into two stages:

Stage One

- During the first stage of the selection and award process, applications will be ranked by FFE state³⁷ based on their objective review committee score.
 - Within each FFE state, the highest ranking, qualified³⁸ applicant will be selected for an award, so long as there are no concerns identified during the review and selection process, as outlined in this Funding Opportunity, that would prevent selection of this entity.
 - If additional funds remain in the FFE state, they will be awarded to additional applicants in that state based on score, with a preference given to applicants whose proposals will increase the size and scope of the underserved or vulnerable population(s) to be reached by Navigators within the FFE.
 - Once there is no longer enough money in a given FFE state to fund at least 75% of the proposed budget of any of the remaining, unfunded qualified applicants, the remaining funds apportioned to the FFE state will be pooled with remaining funds from other FFE states for use during the second stage of the award selection process, as outlined below.
- If there are no eligible, qualified applicants proposing to serve a given FFE, the cooperative agreement funds apportioned to that FFE will be pooled with any remaining funds from other FFE states, if applicable, for use during the second stage of the selection and award process as outlined below.

Stage Two

- A second stage of the selection and award process will only occur if funds available through this Funding Opportunity were unused by an eligible FFE state (See Appendix VI, *List of States for which Cooperative Agreement Funding is Available*) during the first stage of the selection and award process.
- If this occurs, all remaining funds will be pooled and used to award additional eligible and qualified applicants across all FFEs, based on the criteria outlined below, until all available funding has been awarded.

³⁷ Applicants proposing to serve multiple FFE states will be ranked against applicants in each state they are proposing to serve.

³⁸ To be considered “qualified,” an applicant must receive a score of at least 120 points from the objective review committee.

- Preference during the second stage of the selection and award process will be given to those applicants whose proposals would increase the span of populations served by HHS Navigators and complement the coverage areas of other applicants selected for award in a given FFE state during stage one.
- The following criteria will be used to make award decisions during stage two of the selection and award process:
 - Scope of an applicant’s proposed FFE coverage area;
 - The performance metric goals as laid out in its application;
 - Target population(s) served by the applicant;
 - Scope and breadth of the activities being proposed and the size of the population to be served;
 - Proposed budget submitted by the applicant; and
 - Other applicants selected for award during stage one in a given FFE state.

When making awards during both stages of the selection and award process discussed above, HHS reserves the right to reduce the budget requested, or only partially fund proposed activities, or not at all, based on the aforementioned criteria.

- No applicant awarded through this Funding Opportunity will receive an award in excess of the requested amount included in its initial application. Regardless of score or regulatory requirements, an application might not be selected for funding if concerns are identified in the selection process, as outlined throughout this Funding Opportunity, and more specifically in D2.(g) *Business Assessment of Application Organization*, E3. *Federal Awardee Performance and Integrity Information Systems (FAPIIS)*, and this Appendix V. *Review and Selection Process* that would prevent selection of an entity. All awards will be announced at one time whether selected during the first or second stage of the selection and award process.
- The results of the objective review of the applications by qualified experts will be used to advise the CMS approving official. Final award decisions will be made by the CMS approving official. In making these decisions, the CMS approving official will take into consideration:
 - Recommendations of the objective review panel,
 - Responsiveness to CMS’s inquiries and clarifications to application,
 - Additional review factors as outlined in this section,

- Reviews for programmatic and grants/cooperative agreement management compliance,
- Reasonableness of the estimated cost to the government and anticipated results, and
- The likelihood that the proposed project will result in the benefits expected.

The decision not to award a cooperative agreement, or to award a cooperative agreement at a particular funding level, is not subject to an appeal to any CMS, HHS, or any other federal official or board.

- As noted in 45 CFR Part 75, CMS will do a review of risks posed by applicants prior to award. In evaluating risks posed by applicants, CMS will consider the below factors as part of the risk assessment (applicant should review the factors in their entirety at §75.205)
 - a. Financial stability;
 - b. Quality of management systems and ability to meet the management standards prescribed;
 - c. History of performance (including, for prior recipients of Federal awards: timeliness of compliance with applicable reporting requirements, conformance to the terms and conditions of previous federal awards, extent to which previously awarded amounts will be expended prior to future awards);
 - d. Reports and findings from audits performed under Subpart F of 45 CFR Part 75 and
 - e. Applicant's ability to effectively implement statutory, regulatory, and other requirements imposed on non-federal entities.
- CMS reserves the right to conduct pre-award Negotiations with potential awardees.

Appendix VI. List of States for which Cooperative Agreement Funding is Available through this Funding Opportunity

The following states (30) will have an FFE for benefit year 2022. Applicants may propose to serve consumers in any one or more of the States listed below.³⁹

Alabama	Montana
Alaska	Nebraska
Arizona	New Hampshire
Delaware	North Carolina
Florida	North Dakota
Georgia	Ohio
Hawaii	Oklahoma
Illinois	South Carolina
Indiana	South Dakota
Iowa	Tennessee
Kansas	Texas
Louisiana	Utah
Michigan	West Virginia
Mississippi	Wisconsin
Missouri	Wyoming

³⁹ Should a state not currently included in this list revert from a State-based Exchange or a State-based Exchange on the Federal Platform to an FFE, CMS will determine how to address funding for a Navigator program in this state at that time.

Appendix VII. Application Check-Off List

Required Contents

A complete proposal consists of the materials organized in the sequence below. Please ensure that the project and budget narratives are page-numbered and the below forms are completed with an electronic signature and enclosed as part of the proposal. **Everything listed below must be submitted through www.grants.gov, and formatting requirements followed.**

For specific requirements and instructions on application package, forms, formatting, please see:

Section D and Appendix II: Application and Submission Information

Section E: Application Review Information

Appendix I: Guidance for Preparing a Budget Request and Narrative

- Required Forms/Mandatory Documents (with an electronic signature by AOR)
- SF-424: Application for Federal Assistance
- SF-424A: Budget Information
- SF-424B: Assurances-Non-Construction Programs
- SF-LLL: Disclosure of Lobbying Activities
- Project Site Location Form(s)

All documents below are required unless stated otherwise.

- Applicant's Application Cover Letter (**excluded from page limitations**)
- Project Abstract Summary (**one** page)
- Project Narrative (maximum of **20** pages)
- Business Assessment of Applicant Organization (maximum of **12** pages)
- Work Plan and Timeline (maximum of **five** pages total)
- Budget Narrative (maximum of **15** pages, per FFE state applying to serve)
- Negotiated Indirect Cost Rate Agreement (NICRA), if applicable (**excluded from page limitations**)