

ACA Health Center Outreach and Enrollment Assistance Fiscal Year 2015
HRSA-15-126
CFDA# 93.527

1. Purpose

This announcement details the fiscal year (FY) 2015 Health Center Outreach and Enrollment Assistance supplemental funding opportunity for existing Health Center Program grantees (health centers currently funded under section 330 of the Public Health Service (PHS) Act, as amended (42 U.S.C. 254b)). Section 330(b)(1)(A)(iii) requires that health centers establish “services designed to assist health center patients in establishing eligibility for and gaining access to Federal, State, and local programs that provide or financially support the provision of medical, social, housing, educational, or other related services.” These funds are being invested in health centers to expand current outreach and enrollment assistance activities and facilitate enrollment of eligible health center patients and service area residents into affordable health insurance coverage through the Health Insurance Marketplaces, Medicaid and the Children’s Health Insurance Program.

2. Background

This supplemental funding opportunity is being funded under Section 10503 of the Patient Protection and Affordable Care Act (P.L. 111-148), as amended by the Healthcare and Education Reconciliation Act (P.L. 111-152), collectively referred to as the Affordable Care Act. The health care law includes a variety of provisions designed to promote accountability, affordability, quality, and accessibility in the health care system. As new insurance options have become available, consumers need information and assistance to understand new health insurance options and identify the affordable coverage that best meets their needs.

The Affordable Care Act created new competitive private health insurance marketplaces, called the Affordable Insurance Marketplace (also referred to as “Exchanges”), that have provided millions of Americans and small businesses with access to affordable health insurance coverage. Through the Marketplace, eligible individuals are able to receive premium tax credits and cost sharing reductions to help with the cost of insurance coverage.

The health care law also gives states the opportunity to expand their Medicaid programs with significant funding support from the federal government. Beginning in January 2014, most individuals under 65 years of age with incomes below 133 percent of the federal poverty level (FPL) became eligible for Medicaid in states that participated in this expansion.

Consumers in every state have access to a single, streamlined application process that enables them to determine if they, or a family member, are eligible for enrollment under Medicaid, CHIP, or if they are eligible for financial assistance for a qualified health plan offered through the Marketplace and, if so, facilitate the enrollment process. Individuals may access this

application on-line, over the phone, on paper, and in-person. Multiple types of assistance are available to assist individuals in learning about coverage options, affordability, and insurance enrollment.

3. Funding Opportunity Requirements

The purpose of the FY 2015 Health Center Outreach and Enrollment Assistance supplemental funding is to support health centers that did not receive supplemental outreach and enrollment funding in FY 2013 in raising awareness of affordable insurance options and providing eligibility and enrollment assistance through in reach with uninsured patients of health centers and outreach to residents in their approved service areas. To receive the outreach and enrollment assistance supplemental funds, a health center must:

- A. Increase the health center’s current outreach and enrollment assistance capacity. This can be accomplished by expanding the hours of existing outreach and eligibility/enrollment assisters and/or by hiring new outreach and enrollment assisters. A minimum of at least 1.0 full-time equivalent (FTE) must be added to the health center’s current outreach and enrollment assistance capacity. Health center outreach and enrollment assisters supported by this funding opportunity must:
 - a. Demonstrate and maintain expertise in: eligibility and enrollment rules and procedures; the range of qualified health plan options and insurance affordability programs; the needs of underserved and vulnerable populations; and privacy and security standards.
 - b. Perform, at a minimum, the following required duties:¹
 - i. Conduct public education activities to raise awareness about coverage options available under Medicaid, CHIP, and the Marketplace;
 - ii. Help individuals understand and access affordable options;
 - iii. Provide information and assistance in a fair, accurate, and impartial manner;
 - iv. Provide information and assistance in a manner that is culturally and linguistically appropriate to diverse communities and accessible to individuals with disabilities; and
 - v. Provide referrals to any applicable office of health insurance consumer assistance or ombudsman established under Section 2793 of the PHS Act to address consumer grievances, complaints, or questions about their health plan, coverage, or a determination.

¹ For additional guidance on activities and expectations for use of funds, see <http://www.hrsa.gov/grants/apply/assistance/OE>.

- B. Ensure all health center outreach and enrollment assisters (i.e., current and newly supported) comply with and successfully complete all required and applicable federal and/or state consumer assistance training and comply with all associated regulations and requirements, as are required for personnel carrying out consumer assistance functions.

Note: HRSA strongly encourages applicants that have not done so already, to begin the process of satisfying organization- and assister-level requirements for certified application counselors or the state equivalent. More information is available from your Primary Care Association, your Marketplace, and/or in HRSA's Health Center Outreach and Enrollment Assistance FAQs available at <http://bphc.hrsa.gov/outreachandenrollment/>.

- C. Demonstrate the capacity to conduct “in reach” with currently uninsured health center patients and “outreach” to non-health center patients in their approved service area. Health center outreach and enrollment assisters will be required to help any patient or resident seeking outreach and enrollment assistance. In instances where health center outreach and enrollment assisters do not have the immediate capacity to adequately help an individual due to language or other barriers, the assisters must provide timely referrals to other resources, such as the toll-free Marketplace Call Center, or to other state or local entities that can more effectively serve that individual.
- D. Describe how collaboration with other health centers, primary care associations and providers in their service area will occur to ensure that outreach and enrollment assistance activities are coordinated with other local, regional, and/or state-wide outreach and enrollment assistance efforts and training requirements.
- E. Comply with all applicable requirements of section 330 of the PHS Act, as amended, applicable regulations, and guidelines, including the Health Center Program requirements available at <http://bphc.hrsa.gov/about/requirements>. HRSA will evaluate progress relative to the proposed work plan and may condition funding based on progress and adherence to Federal guidance and Marketplace requirements, including training, conflict of interest, and adherence to Culturally and Linguistically Appropriate Services (CLAS) standards.

4. Summary of Funding

HRSA will award approximately \$8 million under the FY 2015 Health Center Outreach and Enrollment Assistance supplemental funding opportunity through formula-based supplemental awards to eligible section 330 funded health centers. Outreach and Enrollment Assistance supplemental funding will be provided to each grantee in the same special population funding proportion(s) as its existing operational grant funding. Requests for Health Center Outreach and Enrollment Assistance supplemental funding must be reasonable and appropriate based on

the scope and breadth of the outreach and enrollment assistance activities being proposed and the projected number of patients and service area residents to be assisted.

Supplemental awards, minus \$5,000 in one-time funds, will be incorporated into grantees' ongoing base funding with the expectation that health centers will continue to conduct outreach and enrollment activities at a similar level of effort and report appropriate progress in future years. However, as with all Health Center Program funding, future support is dependent on the availability of appropriated funds in subsequent fiscal years, grantee satisfactory performance, and a determination that continued funding is in the best interest of the Federal government.

5. Funding Methodology

Funding allocations will be derived from the following formula:

- A base amount of \$54,000;
- An additional \$5,000 for initial one-time expenditures (e.g., supplies); and
- An additional amount allocated by the grantees' proportion of uninsured patients, as reported in calendar year 2013 Health Center Program Uniform Data System (UDS).

HRSA will communicate through the HRSA Electronic Handbook (EHB) the maximum amount of supplemental funding each eligible Health Center Program grantee may request. Depending on the number of approvable applications, HRSA may make adjustments in award amounts consistent with funds available for this supplemental funding opportunity. Cost sharing or matching is not a requirement for this funding.

6. Eligible Applicants

Organizations receiving Health Center Program (section 330 of the PHS Act, as amended) operational funds that did not receive outreach and enrollment supplemental funding in FY 2013 are eligible to apply for FY 2015 Health Center Outreach and Enrollment Assistance supplemental funding. Health centers that have been determined and notified by HRSA as materially noncompliant with Health Center Program requirements are not eligible for this funding opportunity.

In addition, organizations that received initial Health Center Program grant funding through a New Access Point opportunity in FY 2013 or FY 2014 (e.g., new start NAPs) that have not verified that at least one site in scope is operational and providing services as of the date of this funding opportunity release are not eligible for this supplemental funding.

7. Allowable and Required Use of Funds

The purpose of the FY 2015 Health Center Outreach and Enrollment Assistance supplemental funding is to support health centers in raising awareness of affordable insurance options and

providing eligibility and enrollment assistance to uninsured patients and residents in their service areas.

Applicants must propose to support a minimum of 1.0 new full time equivalent(s) (FTEs) to support new and/or expanded outreach and enrollment assistance efforts. Pre-award costs up to 90 days are allowable under this funding opportunity. This funding cannot be used to support the provision of primary health care services or personnel other than outreach and enrollment assisters. Health centers may not use outreach and enrollment assistance funds to supplant other resources (federal, state, local or private) intended to support outreach and enrollment assistance activities.

Additionally, HRSA encourages health centers to consider hiring qualified veterans for open outreach and enrollment assistance positions. In 2011, HRSA launched the Health Centers Hire Veterans Challenge with a goal to hire an average of one veteran per grantee site over the next 3 years or approximately 8,000 veterans nationwide. Interested health centers may learn more about the Health Centers Hire Veterans Challenge at <http://bphc.hrsa.gov/veterans/>.

The following allowable uses of Health Center Program grant funds will generally apply to the supplemental outreach and enrollment assistance funds, unless specifically excluded in this funding announcement (see below).

- Personnel, including at least one FTE² outreach and enrollment assister who will be trained to facilitate enrollment in new affordable insurance options;
- Fringe benefits for outreach and enrollment assisters;
- Moveable equipment and supplies to support outreach and enrollment assistance individually valued at less than \$5,000 (e.g., personal computers, educational materials, scanners for consumers to use in uploading consumer supporting documentation to accompany applications, wireless cards, materials necessary to ensure no consumer Personally Identifiable Information (PII) is compromised);
- Leasing of temporary space for the sole purpose of outreach and enrollment assistance activities (e.g., leasing space in a community center);
- Paid media, mailers, and other broad-based strategies to promote the availability of health center enrollment assistance to non-health center patients.
- Training in support of outreach and enrollment assistance efforts; and
- Local travel in support of outreach and enrollment assistance efforts.

The following uses of funds are not allowable under this funding opportunity:

- Support for personnel other than outreach and enrollment assisters;
- Fringe benefits other than those to support outreach and enrollment assisters;
- Moveable equipment and supplies individually valued at \$5,000 or greater;
- Vehicles;

² A total of one FTE, not including volunteers.

- Primary health care services;
- Construction costs (including minor alterations and renovation and fixed/installed equipment);
- Facility or land purchases; and
- Incentives (e.g., gift cards, food, free services).

8. Application Requirements

The FY 2015 Health Center Outreach and Enrollment Assistance supplemental funding application contains the following sections/forms that must be completed within HRSA’s Electronic Handbook (EHB). HRSA will provide detailed instructions on accessing, completing, and submitting the electronic application separately.

- a) SF-424
- b) Project Narrative

Applicants must discuss the following through completion of an electronic application form:

1. How the health center will use outreach and enrollment assistance funding and leverage current resources to meet the eligibility assistance and enrollment needs in the health center’s approved service area; and
2. How the health center will coordinate outreach and enrollment assistance efforts with other health centers (grantees and look-alikes), Primary Care Associations, and other state, local, and/or regional efforts.

In addition, the application must include:

3. The projected number of additional funded outreach and enrollment assister FTEs;
4. The projected number of health center outreach and enrollment assisters who will successfully complete all required and applicable federal and/or state consumer assistance training. This number includes new proposed FTEs funded through this supplement and current outreach and enrollment assisters, including volunteers, who will dedicate some or all of their time to outreach and enrollment assistance activities;
5. The projected number of individuals to be assisted³ by all health center outreach and enrollment assisters; and
6. The projected number of individuals to be enrolled⁴ in affordable insurance coverage.

³ “Assisted” is defined as trained health center assisters supporting the actual or potential enrollment in health insurance provided through Marketplace qualified health plans and/or enrollment in Medicaid or CHIP.

c) Work Plan

Applicants must attach to the application a brief work plan for achievement of project goals and objectives consistent with the project narrative and budget narrative justification. The work plan should document major activities, the name and title the individual(s) responsible for accomplishing each major activity, and timeframes. Major activities may include:

- Develop outreach and enrollment assistance coordination/collaboration plans;
- Recruit and hire new outreach and enrollment assisters (expected within 30 days of award);
- Successfully complete all required and applicable federal and/or state consumer assistance training;
- Perform outreach and enrollment assistance activities; and
- Evaluate progress and revise strategies as appropriate.

d) Budget

Each FY 2015 Health Center Outreach and Enrollment Assistance supplemental funding application must contain a completed Standard Form (SF) 424, SF-424A, and Line-Item Budget.

e) Budget Narrative Justification

Each FY 2015 Health Center Outreach and Enrollment Assistance supplemental funding application must contain a Budget Narrative Justification that clearly describes each cost element and explains how each cost contributes to meeting the project's goals and objectives for the first 12-months. Please refer to *Appendix A: Completing the Project-specific Line Item Budget and Budget Narrative Justification* for additional budget information.

9. Application Submission Dates and Times

Applications must be submitted electronically in HRSA's Electronic Handbook (EHB). The due date for submission of FY 2015 Health Center Outreach and Enrollment Assistance supplemental funding applications is October 6, 2014, at 5:00 PM ET.

Note that this application requires final submission by the health center's authorizing official.

10. Application Reviews

⁴ "Enrolled" is defined as the estimated number of individuals enrolled through the Marketplace, Medicaid, and CHIP by trained health center assisters.

HRSA will conduct reviews for completeness, eligibility, and allowable costs. HRSA reserves the right to request a re-budgeting of funds if an application is not fully responsive to any Outreach and Enrollment Assistance supplemental funding requirements or if ineligible activities are proposed.

In addition, HRSA will assess the status of all Health Center Program grantees applying for Outreach and Enrollments Assistance supplemental funding. Applicants will not receive funding if they have either five or more 60-day or one or more 30-day Health Center Program requirement progressive action conditions. HRSA reserves the right to review fundable applicants for compliance with HRSA program requirements, including program performance, through reviews of site visits, audit data, Uniform Data System (UDS) or similar reports, Medicare/Medicaid cost reports, external accreditation, and other performance reports, as applicable. The results of this review may impact final funding decisions.

11. Award Notices

HRSA anticipates awarding FY 2015 Health Center Outreach and Enrollment Assistance supplemental funding in October 2014.

12. Additional Requirements

FY 2015 Health Center Outreach and Enrollment Assistance supplemental funding recipients must comply with applicable requirements of section 330 of the PHS Act, as amended, applicable regulations, and guidelines, including the Health Center Program Requirements available at <http://bphc.hrsa.gov/about/requirements>, as well as grant requirements specified in 45 CFR Part 74, and 45 CFR Part 92, as applicable.

If funded to conduct outreach and enrollment assistance activities, the health center must revise its current Form 5C: Other Activities in the H80 grant folder to add “Non-Clinical Outreach” to the form or to update the existing entry for Non-Clinical Outreach as appropriate to align with funded outreach and enrollment activities (e.g., update frequency and locations).

Pursuant to existing law, and consistent with Executive Order 13535 (75 FR 15599), health centers are prohibited from using Federal funds to provide abortion services (except in cases of rape or incest, or when the life of the woman would be endangered). This includes all funds awarded under this announcement and is consistent with past practice and long-standing requirements applicable to grant awards to health centers.

13. Quarterly Progress Reports

The awardee must submit quarterly progress reports (QPRs) to HRSA. The QPRs will document grantee progress on meeting outreach and enrollment assistance-specific goals, particularly the number of outreach and enrollment assisters trained, the number of assists provided through outreach and enrollment assistance activities, and the number of individuals estimated to have

successfully enrolled. More information on health center reporting requirements is available in the QPR Frequently Asked Questions, located at <http://bphc.hrsa.gov/outreachandenrollment/>. All standard Health Center Program grantee reporting requirements also apply.

14. Agency Contacts

TYPE OF ASSISTANCE NEEDED	PLEASE CONTACT
General technical assistance	To review available resources, including O/E assistance FAQs visit http://www.hrsa.gov/grants/apply/assistance/OE .
Program and budget related issues	The Outreach and Enrollment Team Health Resources and Services Administration Bureau of Primary Health Care Office of Policy and Program Development Email: bphc-oe@hrsa.gov
Electronic submission issues	BPHC Help Line Questions on navigating and completing forms bphchelpline@hrsa.gov or 1-877-974-BPHC (2742) Monday through Friday 8:30 AM to 5:30 PM (ET)

Completing the Project Specific Line Item Budget and Budget Narrative Justification

FY 2015 Health Center Outreach and Enrollment Assistance supplemental funding applicants are required to provide a one-year line item budget and a narrative that explains each amount requested for each line in the budget. The budget narrative justification must specifically list each cost element, describe how each cost will support the achievement of proposed objectives, and contain sufficient detail to enable HRSA to determine if costs are allowable. Include the following in the budget narrative justification:

- **Personnel:** Personnel costs must list each outreach and enrollment assister to be supported with these outreach and enrollment funds, name (if possible), position title, percent full time equivalency, and annual salary.
- **Fringe Benefits:** List the components that comprise the fringe benefit rate, for example health insurance, taxes, unemployment insurance, life insurance, retirement plan, tuition reimbursement. The fringe benefits must be directly proportional to that portion of personnel costs allocated for the project.
- **Travel:** List travel costs according to local travel needs. For travel, the mileage rate, number of miles, reason for travel and staff member/consumers completing the travel should be outlined. The budget must also reflect the travel expenses associated with participating in meetings and other proposed trainings or workshops.
- **Supplies:** Separately list the items to support outreach and enrollment assistance, including moveable equipment and supplies individually valued at up to \$5,000 (e.g., personal computers, educational materials, scanners for consumers to use in uploading consumer supporting documentation to accompany applications, wireless cards, materials necessary for staff to ensure no consumer Personally Identifiable Information (PII) is compromised).
- **Contractual:** Applicants are responsible for ensuring that their organization or institution has in place an established and adequate procurement system with fully developed written procedures for awarding and monitoring all contracts and potential conflicts of interest. Applicants must provide a clear explanation as to the purpose of each contract, how the costs were estimated, and the specific contract deliverables.
- **Other:** Put all other allowable costs that do not fit into any other category into the “Other” category and provide a detailed explanation of each cost.