

**Health Resources and Services Administration
Bureau of Primary Health Care
Health Center Outreach and Enrollment Assistance Fiscal Year 2016
HRSA-16-091
CFDA# 93.527**

Application Due Date in EHB: October 20, 2015

1. Purpose

This announcement details the fiscal year (FY) 2016 Health Center Outreach and Enrollment Assistance supplemental funding opportunity for health centers that received their initial Health Center Program section 330 of the Public Health Service (PHS) Act, as amended (42 U.S.C. 254b, as amended)) operational funds in FY 2015. 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 (CHIP).

2. Background

This supplemental funding opportunity is being funded under Section 330 of the PHS Act, as amended (42 U.S.C. 254b, as amended). The Affordable Care Act 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 2016 Health Center Outreach and Enrollment Assistance supplemental funding is to support health centers that received initial Health Center Program funding in FY 2015 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 their 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

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

to address consumer grievances, complaints, or questions about their health plan, coverage, or a determination.

- 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: Health Resources and Services Administration (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/about/healthcentersaca/outreachenrollment/>

- 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 2016 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 awardee 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 awardees' 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, awardee 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 health center's proportion of uninsured patients, as reported in calendar year 2014 Health Center Program Uniform Data System (UDS)².

HRSA will communicate through the HRSA Electronic Handbook (EHB) the maximum amount of supplemental funding each eligible Health Center Program awardee 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

Eligible organizations are those that received their initial Health Center Program (section 330 of the Public Health Service (PHS) Act, as amended (42 U.S.C. 254b, as amended)) operational funds in FY 2015.

Applicants are not eligible to receive funding if they have any of the following on their current grant award:

- 5 or more 60-day Health Center Program Requirement progressive action conditions
- 1 or more 30-day Health Center Program Requirement progressive action conditions

² Previous look-alike organizations are the only organizations that would have submitted through the Health Center Program Uniform Data System (UDS) in calendar year 2014.

Cost sharing or matching is not a requirement for this funding opportunity.

7. Allowable and Required Use of Funds

The purpose of the FY 2016 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 positions supported by outreach and enrollment assistance funding.

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 FTE³ 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;

³ A total of one FTE, not including volunteers.

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- Moveable equipment and supplies individually valued at \$5,000 or greater;
- Vehicles;
- 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 2016 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 (awardees 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 assisted⁴ by all health center outreach and enrollment assisters; and

⁴ "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.

6. The projected number of individuals to be enrolled⁵ in affordable insurance coverage.

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 and discuss how it will align with plans to ensure that all funded sites are verified as operational within the applicable 120-day timeframe, consistent with the requirement outlined in the initial FY 2015 funding Notice of Award;
- Recruit and hire new outreach and enrollment assisters;
- 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 2016 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 2016 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 2016 Health Center Outreach and Enrollment Assistance supplemental funding applications is **October 20, 2015, 5:00 PM ET**.

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

⁵ "Enrolled" is defined as the estimated number of individuals enrolled through the Marketplace, Medicaid, and CHIP by trained health center assisters.

10. Application Reviews

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.

Prior to award, HRSA will assess the status of all Health Center Program awardees applying for Outreach and Enrollments Assistance supplemental funding. Applicants are not eligible to receive funding if they have any of the following on their current grant award:

- 5 or more 60-day Health Center Program Requirement progressive action conditions
- 1 or more 30-day Health Center Program Requirement progressive action conditions

11. Award Notices

HRSA anticipates awarding FY 2016 Health Center Outreach and Enrollment Assistance supplemental funding in November 2015.

12. Additional Requirements

FY 2016 Health Center Outreach and Enrollment Assistance supplemental funding recipients are subject to the provisions of Executive Order 12372, as implemented by Uniform Guidance at 45 CFR 75, as well as all applicable administrative and national policy requirements, as established by existing awardees' Health Center Program operational fund awards. Executive Order 12372 allows states the option of setting up a system for reviewing applications from within their states for assistance under certain Federal programs. The Single Point of Contact (SPOC) for review within each participating state can be found at http://www.whitehouse.gov/omb/grants_spoc.

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.

Dun and Bradstreet Universal Numbering System Number and System for Award Management

Applicant organizations must obtain a valid DUNS number and provide that number in their application. Each applicant must also register with the System for Award Management (SAM) and continue to maintain 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 an agency (unless the applicant is an individual or federal agency that is exempted from those requirements under 2 CFR 25.110(b) or (c), or has an exception approved by the agency under 2 CFR 25.110(d)).

HRSA may not make an award to an applicant until the applicant has complied with all applicable DUNS and SAM requirements and, if an applicant has not fully complied with the requirements by the time HRSA is ready to make an award, HRSA may determine that the applicant is not qualified to receive an award and use that determination as the basis for making an award to another applicant.

13. Progress Reports

The awardee must submit progress reports to HRSA. The reports will document awardee 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/about/healthcentersaca/outreachenrollment/>. All standard Health Center Program awardee 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://bphc.hrsa.gov/about/healthcentersaca/outreachenrollment/ .
Program and budget related issues	<p>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</p>
Electronic submission issues	<p>BPHC Help Line Questions on navigating and completing forms http://www.hrsa.gov/about/contact/bphc.aspx or 1-877-974-BPHC (2742) Monday through Friday 8:30 AM to 5:30 PM (ET)</p>

Completing the Project Specific Line Item Budget and Budget Narrative Justification

FY 2016 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, the employee’s name, position, percentage of FTE, base salary, adjusted annual salary (If salary exceeds the salary limitation of \$183,300) and federal amount requested (see a generic example in the Federally-Supported Personnel Justification Table below). The Consolidated and Further Continuing Appropriations Act, 2015, Division G, § 203, (P.L. 113-235) states, “None of the funds appropriated in this title 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.” These salary limitations will apply in FY 2016, as required by law.

EXAMPLE - Federally-Supported Personnel Justification Table

Name	Position Title	% of FTE	Base Salary	Adjusted Annual Salary	Federal Amount Requested
R. Doe	Outreach and Enrollment Specialist	100	\$ 55,950	no adjustment needed	\$ 55,950
D. Jones	Outreach and Enrollment Coordinator	50	\$ 80,000	no adjustment needed	\$ 40,000

- 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.