

Expanding Coverage Through Consumer Assistance

This Request for Applications (RFA) invites organizations in the MFH region to apply for funds to assist eligible Missourians with enrolling in new health insurance coverage options and affordability programs made available through the Patient Protection and Affordable Care Act (ACA).

Marketplace Background

The ACA created new health insurance Marketplaces, also known as exchanges, where individuals, families, and small businesses (i.e., consumers) can shop for and purchase private health insurance based on quality and price. The health insurance Marketplace is the access point for consumers to compare and purchase insurance plans and for those who are eligible to apply for and receive subsidies. Individuals and families with incomes between 100 and 400 percent of the federal poverty level (FPL) will be eligible for subsidies to make health insurance more affordable. Consumers with incomes above 400 percent of FPL are not eligible for subsidies, but can utilize the Marketplace to shop for and enroll in health plans at the full commercial cost.

The ACA creates two types of Marketplaces, one for individuals and families and one for small businesses. The Small Business Health Options Program (SHOP), health insurance Marketplaces specifically for businesses with 50 or fewer workers, will provide employers with new ways to offer health insurance to their employees. Enrollment in the SHOP Marketplace can take place at any time and it is expected that the online enrollment option will be available by November 15, 2014. The next open enrollment period for individuals and families is expected to be November 15, 2014 to February 15, 2015, but is expected to shorten in future years.

Missouri's Marketplace is a Federally-Facilitated Marketplace (FFM), in which individuals, families, and small businesses may need help to shop for and enroll in health insurance. Three types of in-person assistance are available to help consumers in Missouri:

RFA Announced	April 1, 2014
Pre-Application Webinar	April 15, 2014 1:00-2:00pm CDT
Register for the Pre-Application Webinar	
Applications Due	April 30, 2014 4pm CDT
Application Review and Selection	May 1 – July 31, 2014
Grant Award Announcements	On or before August 1, 2014



- Navigators – entities selected and funded by the federal government charged with providing assistance to individuals and small businesses enrolling in health insurance through the FFM.

In 2013, [Primaris](#) and the [Missouri Association of Area Agencies on Aging](#) were the federal Navigator grantees.

- Certified Application Counselors (CACs) – individuals employed by trusted community-based organizations, providers, and/or others with expertise in social service programs that are certified by the United States Department of Health and Human Services (HHS) to provide assistance to consumers enrolling in health insurance through the FFM but do not receive public funding to provide this assistance. **Funding for CACs is the focus of this RFA.**

Current CAC organizations can be found on the Cover Missouri [website](#) and the federal HealthCare.gov [website](#).

- Agents and Brokers – licensed agents and brokers who are registered with the FFM and complete the required training can help consumers and small businesses select and enroll in health insurance plans.

Consumer assistance is also available through a Federal toll-free Exchange Call Center and online through the FFM website, [Healthcare.gov](#).

MFH Expanding Coverage Initiative

Approximately 15.6 percent of Missourians under age 65 are uninsured (approximately 792,000 individuals).ⁱ Compared to other states, Missouri ranks 26th on the percentage of people under age 65 who are uninsured.ⁱⁱ The number and percentage of Missouri’s uninsured decreased from 2012 to 2013 due to an improving economy and an increase in Missourians receiving Medicare (Babyboomers reaching age 65).ⁱⁱⁱ

In 2013, MFH established a five year initiative to expand health insurance coverage in the state. The goal of the Expanding Coverage Initiative is to reduce the uninsured rate in Missouri to less than 5 percent in 5 years. In order to reach this goal, stakeholders across Missouri are convening as the [Cover Missouri Coalition](#) to create awareness, facilitate enrollment, and increase health insurance literacy. The purpose of the Coalition is to share learning and best practices, maximize resources, identify challenges and opportunities, and build an inclusive plan to insure Missourians. To date, the Coalition has grown to over 150 organizations and 400 members. The *Cover Missouri Coalition* promotes collaborations to support the following strategies through a steering committee, working groups, and community partners.

Three primary strategies are being used to expand health coverage in Missouri:

- Awareness - engaging the uninsured population by creating broad awareness of the health insurance Marketplace and the availability of subsidies. The [Cover Missouri website](#) includes links to awareness materials created to date.

- Enrollment – facilitating enrollment of eligible individuals into health insurance through the Marketplace and MO HealthNet (Missouri’s Medicaid program).
- Health Insurance Literacy - helping Missourians have the knowledge, ability, and confidence to find and evaluate information about health plans; select the best plan for their own financial and health circumstances; and use the plan once enrolled.

Expanding Coverage Through Consumer Assistance

More than 300,000 uninsured Missouri residents are eligible for subsidized health insurance through the Marketplace. This RFA invites organizations located in and serving the [MFH funding area](#) to apply for funds to provide education and outreach about health insurance options, assist consumers with enrollment into health insurance, and assist consumers in understanding how to use their health insurance. As of March 1, 2014, 74,469 Missourians have selected a Qualified Health Plan (QHP) through the FFM.^{iv} MFH is particularly interested in applicants proposing to serve individuals who have difficulty enrolling in health insurance without the help of one-on-one assistance, including (but not limited to) individuals with low literacy, limited English proficiency, lower-income individuals, people with disabilities, and other hard-to-reach populations living in the MFH funding area.

The following are some statistics that are helpful in understanding potential target populations:^v

- 44 percent of uninsured Missourians have incomes between 138 and 399 percent of poverty, making them eligible for premium tax credits in the FFM.
- 37 percent of uninsured Missourians are between the ages of 25 and 44 years of age.
- 77 percent of uninsured Missourians live in metropolitan areas; 23 percent live in rural areas.
- 30 percent of uninsured Missourians are married; 51 percent have never been married.
- 51 percent of uninsured Missourians are employed.

This grant cycle includes two open enrollment periods (November 15, 2014 – February 15, 2015 and anticipated to be November 15, 2015 – January 15, 2016). These periods are expected to be the times of highest activity; however, organizations funded through this program should expect to serve consumers with pre-application and post-enrollment assistance such as outreach, education, responding to inquiries, account changes, filing hardship waivers, and new applications generated from “life change” events. New to the *Expanding Coverage Through Consumer Assistance* program in 2014 is the expectation that funded organizations will also help increase consumers’ health insurance literacy throughout the project period.

MFH is contracting with an organization to develop health insurance literacy resources (e.g., materials, train the trainer program, presentations) and provide training and technical assistance for three target audiences:

- Consumers, including those who have recently enrolled in new public and private coverage options, as well as those who have not yet been reached;
- Expanding Coverage grantees and Cover Missouri Coalition members who are providing in-person assistance to consumers with enrollment and engaging in outreach and education activities; and
- Health care professionals.

Grantees funded under this RFA will be expected to participate in health insurance literacy trainings and to utilize the resources and tools developed by the contractor.

Organizations can apply to be a Consumer Assistance Site or one of [five Regional Hubs](#). These application types are described below.

MFH encourages organizations to collaborate for purposes of responding to this RFA. Organizations that wish to partner on an application should designate one organization as the lead. The lead organization must assume responsibility for overall plan implementation, fiscal oversight, and reporting. Project partnership and work responsibilities must be clearly identified in a memorandum of understanding (MOU) that is signed by all participating organizations and submitted with the application.

Applicants must be prepared to deliver assistance and services to consumers seeking health insurance

no later than November 1, 2014. All grantees will be required to comply with all state and federal requirements. While Missouri licensure requirements are currently under review, information about obtaining entity and individual Missouri state licenses can be found [here](#). Information about obtaining CAC certification from the Centers for Medicare and Medicaid Services (CMS) can be found [here](#). MFH strongly encourages organizations that are not currently a CMS CAC site to apply for this designation prior to submitting a proposal for this funding opportunity. Once an organization is designated by CMS to be a CAC site, the organization will receive instructions on how to access the CAC training and take the required tests. Training modules can be previewed [here](#). Current CAC sites and CACs will be required to complete the recertification process as determined by CMS.

The **health insurance literacy contractor** will provide training and technical assistance to the three audiences through the following methods:

- Develop an effective and tested collection of Health Insurance Literacy resources and provide training on these resources;
- Increase the capacity of Expanding Coverage grantees and Coalition members to effectively conduct health insurance literacy activities;
- Increase consumer knowledge, ability, and confidence to find and evaluate health plans; select the best plan for their own circumstances; and use the plan once enrolled;
- Develop a robust Health Insurance Literacy toolkit and provide training to health care professionals; and
- Enhance the capacity of health care professionals to address health insurance literacy with patients and families.

Consumer Assistance Requirements

Consumer Assistance Sites are expected to employ Certified Application Counselors. CACs supported by this grant program must:

- Be employed by a Consumer Assistance Site or a Regional Hub.
- Complete the online HHS training program (MFH requires CACs to complete up to 20 hours of Navigator training in addition to the 5 hours of CAC training required by CMS), pass any exams, and comply with all state and federal privacy, security, and conflict of interest standards to gain certification or complete any recertification requirements.
- Maintain expertise in Missouri's FFM eligibility, enrollment, and program specifications.
- Conduct public education activities utilizing MFH educational materials and messages to raise awareness about Missouri's FFM.
- Provide information and services in a fair, accurate, and impartial manner; such information must acknowledge other health programs such as Medicaid and the Children's Health Insurance Program (CHIP).
- Provide information in a manner that is culturally and linguistically appropriate to the needs of the population being served by the FFM, including individuals with limited English proficiency, and ensure accessibility and usability for individuals with disabilities in accordance with the Americans with Disabilities Act (ADA) and Section 504 of the Rehabilitation Act.
- Provide services in the strictest of confidence and abide by the Health Insurance Portability and Accountability Act (HIPAA) where applicable.
- Assist individuals in completing the application for health insurance.
- Facilitate* selection of a QHP.
- Provide information about tax credits and subsidies.
- Provide assistance on understanding health insurance terms and how to use health insurance.
- Provide 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.
- Track and report counseling session enrollment data including, but not limited to: number of applications started and completed; outcome of the counseling sessions; referrals made; number of lives covered by enrollment; and number of enrollees.

CACs employed by Consumer Assistance Sites supported through this grant program which serve the SHOP market must meet the above requirements and must:

- Complete any additional training for assisting employers using the SHOP as required by HHS.
- Support small businesses and their employees with education and information about the SHOP and the Small Business Health Care Tax Credit.
- Help employers understand contribution strategies and how they affect the employer depending on company tax status.
- Facilitate* employer plan selection.
- Assist employers with uploading employee rosters to the SHOP website that include information about which employees will be receiving benefits, the benefit amount, and type.
- Assist small business employees in accessing their SHOP accounts and completing their applications for health insurance.
- Explain to employees the waiver process and how it relates to “life change” events.

*CACs are distinct from brokers because CACs are not licensed to sell insurance by the Missouri Department of Insurance, Financial Institutions, and Professional Registration (DIFP); thus CACs **will not** provide advice on plan selection and **will not** perform functions on behalf of their customers. CACs will assist consumers in evaluating their health insurance needs and completing an application to enroll in health insurance through the FFM.

In addition to the duties described above, CACs will be required to assist any consumer seeking assistance, even if that consumer is not a member of the community or group the applicant expects to serve. If there is an instance where a CAC does not have the capacity to help an individual, the CAC should make every effort to provide assistance in a timely matter, but can also refer the consumer to other resources, such as the Federal toll-free Exchange Call Center or to another CAC or Navigator in Missouri who may have better capacity to serve that individual. If a CAC is approached by a consumer who does not live in Missouri, the CAC should refer the consumer to the Federal toll-free Exchange Call Center.

All Consumer Assistance Sites supported by this grant program must:

- Be a trusted organization in the community with a convenient, accessible location(s).
- Elect to serve either the individual, small business, or both the individual and small business markets.
- Recruit, employ, manage, supervise, and provide administrative support to CACs.
- Ensure all training and certification and/or recertification requirements for CACs are met and maintained.

- Comply with all state and federal privacy, security, and conflict of interest standards and ensure CAC compliance.
- Ensure CACs and staff interacting with consumers or accessing personal information of consumers have completed a thorough background screening (e.g., National Service Criminal History, including FBI, statewide repository, and sex offender registry checks).
- Serve lower income and vulnerable populations, such as the Lesbian, Gay, Bisexual and Transgender community, or specific ethnic, cultural, language, diagnosis, and disability communities.
- Conduct outreach and public education utilizing MFH educational materials and messages to help inform Missouri communities about new opportunities for accessing health insurance and assistance paying for it.
- Provide in-person assistance to consumers (by appointment, walk-in, or otherwise as defined by the applicant). In-person assistance includes, but is not limited to, providing education about insurance terms and the full range of health insurance options, helping complete an application for health insurance, and helping the consumer understand how to use their health insurance plan once enrolled.
- Provide appropriate referrals and facilitate appropriate connections with other consumer assistance providers.
- Provide telephone access for setting appointments, answering questions, and resolving problems with a maximum call response time of two business days.
- Respond to telephone and electronic inquiries within two business days.
- Ensure that appropriate staff participate in health insurance literacy trainings and utilized technical assistance as appropriate through the Health Insurance Literacy training and technical assistance provider.
- Provide appropriate infrastructure, management, and support to CACs. Infrastructure requirements include ADA accessible space, telephone and fax, reliable internet access, computer/tablet, scanner, and printer.
- Submit information about enrollment sites and outreach and enrollment events to Cover Missouri for inclusion in the zip code locator and events list and ensure that information is accurate and up-to-date.
- Participate in convenings and/or learning collaboratives with other Consumer Assistance Sites, Regional Hubs, the Expanding Coverage technical assistance provider (Community Catalyst), and the Health Insurance Literacy training and technical assistance provider.
- Ensure counseling session data collected by CACs is submitted.
- Administer data collection tools and provide weekly, monthly, quarterly, and annual reporting in the format requested by MFH. Reporting will include information about

partnerships, resources, outreach, enrollment, and health insurance literacy activities and will be submitted through an online system to the external evaluator.

- Engage with Expanding Coverage contractors as appropriate (e.g., awareness and enrollment technical assistance contractor — Community Catalyst, evaluation contractor — Washington University, health insurance literacy contractor-to be determined).

Consumer Assistance Sites will be able to rely on their Program Officer, the technical assistance provider (Community Catalyst), the Cover Missouri Coalition, and Regional Hubs for advice and guidance.

Regional Hubs supported by this grant program must meet the CAC and Consumer Assistant Site requirements. If applicable, SHOP requirements must be met as well. In addition, Regional Hubs must:

- Have a staff member who functions at least part-time as the Regional Hub Manager.
- Identify services among Consumer Assistance Sites and CACs in their regions to ensure a coordinated system of referrals exists to help support consumers with specific needs.
- Act as a hub for outreach, including but not limited to, coordinating outreach and enrollment events, delivering public presentations, and identifying regional and local opportunities for outreach.
- Support training at Regional Hub meetings or other formats, which may include staffing a trainer who can help with training in the region, staffing a mentor who is able to support peers in the region, and/or engaging external expertise.
- Convene (physical or virtual) Consumer Assistance Sites, CACs, and other non-grantee partners in their region for information sharing, networking, mentoring, and collaborative learning regularly.
- Report monthly on hub activities in the format requested by MFH through an online evaluation system.
- Participate in the *Cover Missouri Coalition* that will meet on a bimonthly basis in person in central Missouri and provide updates to Regional Hub partners

Communicate regularly with all hub partners and CACs to ensure any information regarding Cover Missouri, the Missouri FFM, and/or any other relevant topics is shared.

Regional Hubs will be selected based on geographic location, capacity for enhanced delivery of services, ability to reach organizations throughout the defined region, and connectedness with regional organizations to ensure that the Regional Hub will be well-positioned to serve as a facilitator and convener. Organizations selected as a Regional Hub must function as a Consumer Assistance Site in addition to the Regional Hub requirements above. An organization may elect on the project plan to be considered for Consumer Assistant Site funding if not selected to serve as a Regional Hub.

Evaluation and Monitoring

It is MFH's intent that grantees facilitate enrollment in health insurance through the Marketplace for Missourians seeking assistance with their applications. To ensure that grantees are providing quality services in accordance with the expectations articulated above and to ensure program integrity and success, MFH will be conducting ongoing monitoring and evaluation. Grantees will be expected to collect data on a standard set of metrics including but not limited to:

Outreach

- Number and type of outreach activities conducted including: dates of activities, type of events, population/geographic areas reached, and outreach strategies utilized.
- Number and type of mass media activities conducted including: who conducted activity, and population/geographic areas reached.
- Number of people reached through outreach and media efforts.

Enrollment

- Number of enrollment sites.
- Number of counseling sessions.
- County where counseling session occurred.
- Number of applications started.
- Number of applications completed including: date of enrollment, final insurance status (e.g., Medicaid, QHP with tax credit, QHP no tax credit), number of lives covered by enrollment application (i.e., eligible family members).
- Reasons for incomplete applications.
- Number and reasons of referrals to other consumer assistance providers.
- Number of completed applications.
- Achievement and maintenance of certification including number of CACs trained and certified.
- Post enrollment customer satisfaction surveys.

Health Insurance Literacy

- Number and type of consumer facing health insurance literacy activities including dates of activities, populations/geographic areas reached, and strategies used.
- Number of people reached through health insurance literacy activities.
- Health insurance literacy survey with consumers.

A standard method for collecting and reporting data on these metrics will be made available to grantees and training and technical assistance will be provided on collecting and reporting data.

Consumer Assistance Sites and Regional Hubs are expected to budget appropriate staff time to fulfill evaluation requirements.

Consumer Assistance Sites and Regional Hubs will be responsible for submitting weekly and monthly reporting and CACs will be responsible for reporting on counseling session enrollment activities through an online system to the external evaluator, Washington University. Reports will detail the above data and highlight progress toward engagement and enrollment goals outlined in the project plan. Consumer Assistance Sites and Regional Hubs will also be responsible for MFH quarterly interim reports which provide an assessment of activities (e.g., barriers and successful outreach and enrollment strategies), a forecast for upcoming months, and recommendations for strategic adjustments, if applicable. Grantees' programmatic effectiveness will determine whether future funding will be provided under this MFH program.

Budget and Awards

There is \$3.8 million available for grants in 2014 under the *Expanding Coverage Through Consumer Assistance* program. Applicants may apply for a maximum of \$350,000 over the 18 month grant period (September 1, 2014 – February 29, 2016) to cover programming costs related to activities under this project. Applicants selected to serve as Regional Hubs are eligible to receive an additional \$75,000 to address Regional Hub requirements. Regional Hub applicants should clearly describe in their budget narrative how the additional funds will be spent for additional hub activities. MFH anticipates making 15-20 grant awards under this funding program.

The anticipated award announcement date is **on or before August 1, 2014**.

Grantees may begin utilizing funding for non-enrollment activities (e.g., hiring new staff, conducting outreach events, and training staff) immediately upon receiving a signed contract. However, no employee of an organization may conduct enrollment activities with grant funding prior to completing all required state and federal training and certification/licensure requirements.

The amount of funding awarded will be based on the scope and breadth of the activities being proposed and the proportion of the uninsured population served. MFH reserves the right to reduce the budget request based on its review of the proposed population and budget submitted by the applicant.

Projects must meet [general MFH guidelines](#) regarding eligible and excluded activities.

Eligibility Requirements

The applicant and the majority of the population served must be located in the [MFH funding area](#). Applicants must meet the [general MFH funding guidelines](#).

Organizations receiving consideration from health insurance issuers for reasons other than enrollment in insurance products (e.g., reimbursement for the provisions of medical services or grant funding for educational activities related to community health) are eligible to apply for this grant. Federally qualified health centers are not eligible to apply for this grant.

How to Apply

Applications must be completed online (link below). Required documentation is listed below. Upon completion of the online form, applicants must choose the “Review and Submit” button for the online application to be received by MFH.

Applications will be accepted beginning April 1, 2014, and must be received by April 30, 2014 by 4pm CDT. Please plan accordingly and submit your application by the deadline as MFH cannot accept applications that are submitted past the deadline.

To start a new online application, [click here](#).

To return to a previously saved online application, [click here to log into your account](#).

Application Requirements

Applications that do not contain all of the required documentation will not be reviewed unless an applicant has contacted and obtained approval from MFH prior to submission to explain why certain documentation is unavailable. Incomplete applications will not be advanced to consideration for funding.

- Online application acknowledgement.** Submit the [one-page form](#), making sure to include an original signature of the CEO.

- Application narrative.** Following the outline below, submit a narrative up to 10 double-spaced pages with 11-point Arial font and 1 inch margins. Proposals that do not follow these guidelines will not be considered for funding.
 - A. Type of entity and description of the community(ies) or group(s) the applicant expects to serve. Include:
 - Description of the lead organization’s structure.
 - Description, if applicable, of partners included on the project including roles and responsibilities; include signed MOUs for all partners. If applicant is currently a CAC and/or Navigator organization, include a brief description of previous partners’ engagement in enrollment and/or outreach activities and how these partnerships will be maintained and utilized going forward, and identify which partners, if any, will be new.
 - Reason for selecting community(ies) or group(s) and why the applicant is best positioned to serve this community. If applicant is currently a CAC and/or Navigator organization, include a brief description of previous community(ies) or groups served and justification for targeting the same or different populations for the grant period.
 - Number of consumers expected to be served with outreach/education and enrollment (separate estimates) and how the numbers was determined.

- Percentage of state's uninsured population the expected community(ies) or group(s) account for.

For assistance in determining the number of people and percentage of a county's uninsured population, applicants may refer to [Appendix B](#).

B. How the applicant proposes to operate as a Consumer Assistance Site and/or Regional Hub. Include:

- Plan for managing CACs and ensuring the requirements of CACs are fulfilled inclusive of complying with state and federal rules.
- Plan to ensure CACs complete all required training and obtain certification/recertification by November 1, 2014. If the applicant already has CACs on staff, include an attachment with the names of those CACs and certification date (the attachment will not count towards the proposal page limit).
- Plan for carrying out the requirements of a Consumer Assistance Site, including outreach strategies, partnerships, tactics and tools used to reach target population, and hours of operation. If the applicant is previously a CAC and/or Navigator organization, include an attachment with a list of the enrollment sites including address and counties served (the attachment will not count towards the proposal page limit).
- If the applicant is previously a CAC and/or Navigator organization, briefly describe any lessons learned from outreach and enrollment activities and how these lessons will influence enrollment and outreach strategies in the grant award period.
- Plan for carrying out the requirements of a Regional Hub, if applicable. Regional Hub applicants are allowed one additional page for this plan bringing the total page limit for the narrative to 11.
- Description of existing relationships, or how relationships can be readily established with employers, employees, consumers (including uninsured and underinsured consumers), or self-employed individuals likely to be eligible for enrollment in a QHP.
- Brief statement attesting that the applicant and any partners in the application are not an ineligible entity, including an employee with a relationship with health insurance issuers.
- Plan to remain free of conflicts of interest during the project period.
- Plan to comply with data privacy and security standards, ensure confidentiality of personally identifiable information and other sensitive data, and secure information stored and processed on behalf of the FFM.
- Plan to collect and manage data, including key staff responsible.

C. Information regarding the applicant's experience involving the following activities:

- Developing and maintaining relationships with key stakeholders including employers and employees, consumers (including uninsured and underinsured consumers), and self-employed individuals likely to be eligible for enrollment in a QHP.
- Assisting consumers, including those from target population(s), with the process of obtaining health care eligibility determinations and obtaining and using health insurance.
- Conducting public education and outreach activities with the target population(s).
- Providing information and services to individuals with varying levels of education and financial, health, and health insurance literacy in a manner that is culturally and linguistically appropriate.
- Working with individuals with limited English proficiency, individuals with disabilities, populations underserved in the current private health insurance market, and vulnerable populations.

D. Expertise of personnel, including:

- Information on how the *Expanding Coverage Through Consumer Assistance program* fits into the organization's existing structure or how the organization will adjust to accommodate this program. Include reporting structure, key or lead staff, and any contracted employees or volunteers that will administer and/or implement this program.
- Description of staff expertise with the public and/or private health insurance market, conducting public education and outreach activities, assisting consumers in obtaining health insurance determinations, and finding available health insurance options (including Medicaid and CHIP).
- Description of staff expertise working with individuals with limited English proficiency or disabilities, populations underserved in the current private health insurance market, and vulnerable populations.
- Expertise demonstrating the ability to perform work that is culturally and linguistically appropriate and work that is accessible to individuals with disabilities.

- Federal Funding.** Applicants that anticipate applying for the federal funding to serve as Navigators or CACs and/or to provide education and outreach about the FFM must include a one page description of their plan for the federal grant money and an explanation for how federal and MFH dollars will be spent if both grants are awarded. This attachment will not count towards the narrative page total.

- Project Plan.** Submit a complete [project plan](#). The Project Plan document does not count toward the narrative page total.

Applicants should specify on the Project Plan whether they are applying for consideration as a Consumer Assistance Site, a Regional Hub, or either; which regions they intend to serve; whether they are applying to provide assistance in the individual market, SHOP market or both; and if they are applying for federal consumer assistance funding opportunities.

- Project budget.** Submit the [one-page budget spreadsheet](#). Regional Hub applicants should use the second tab of the budget spreadsheet for line items related to Regional Hub activities.
- Budget narrative.** Submit a [budget narrative](#) that details each line item requested. Regional Hub applicants must clearly identify associated costs with performing Regional Hub activities.
- Memorandum(s) of Understanding (MOUs).** Include signed MOU(s) as appropriate that outline roles and responsibilities between the applicant and partner organization(s).
- Annual audit report.** Provide the most recent audit report prepared by a CPA and issued less than 15 months prior to date of application submission. Send the complete report including audit letter, financial statements, and notes to the financial statements. If a recent audit report is unavailable, provide the most recent IRS Form 990 tax return (without supporting schedules, except schedule O).
- Annual budget.** Provide the current fiscal year's approved expense budget. The budget must show detailed annual expense by type of expense.
- Current income statement, unaudited.** The income statement must have been issued fewer than 75 days prior to the date application is submitted.
- Current balance sheet, unaudited.** The balance sheet must have been issued fewer than 75 days prior to the date application is submitted.

Selection Criteria

Applications meeting the minimum qualifications will be reviewed by a team of MFH staff and external evaluators. The review criteria are as followed based on 100 points:

- Type of entity and description of population to be served - 15 points
- Scope of activities – 25 points
- Applicant experience – 20 points
- Personnel expertise – 15 points
- Project plan – 15 points
- Budget and budget narrative – 10 points

Additional credit may be awarded for:

- Serving vulnerable populations
- Working in partnerships

MFH intends to make awards to a variety of entities throughout the MFH region to achieve broad geographic reach, to serve diverse populations, and to assist small businesses and their employees.

Right to Reject

MFH reserves the right to:

- Reject any or all applications submitted.
- Request additional information from any or all respondents.
- Conduct discussions with respondents to ensure full understanding of and responsiveness to the solicitation requirements.
- Negotiate modifications to a respondent's application prior to final award for the purpose of obtaining best and final offers.
- Approve subcontractors proposed or used in carrying out the work.

Inquiries

If you have questions about the goals or content of this RFA please contact Colleen Beckwith or Jessi LaRose, Health Policy Officers, at cbeckwith@mffh.org and jarose@mffh.org.

More information about the online application process is available on the [Applying Online page](#) of the MFH website. For additional questions about the online application, please contact Jenny Minelli at 314-345-5531 or jminelli@mffh.org.

About the Missouri Foundation for Health

The Missouri Foundation for Health (MFH) is an independent philanthropic foundation dedicated to improving the health of people in our region. MFH works as a changemaker, educator, and partner to promote community health and increase access to care for the uninsured and underserved.

ⁱ U.S. Census Bureau. (2013). Current Population Survey, 2012 Annual Social and Economic Supplement.

ⁱⁱ U.S. Census Bureau. (2013). Current Population Survey, 2012. Annual Social and Economic Supplement. Table HI05. Health Insurance Coverage Status and Type of Coverage by State and Age for All People: 2012.

ⁱⁱⁱ Ibid.

^{iv} Department of Health and Human Services ASPE Issue Brief (2014). Health Insurance Marketplace: March Enrollment Report.

^v Department of Health and Human Services ASPE Issue Brief (2014). Health Insurance Marketplace: March Enrollment Report.

^v McBride, T. (2013). *Characteristics of the uninsured in Missouri*. Retrieved from <https://www.mffh.org/mm/files/Characteristics%20of%20the%20Uninsured.pdf>