

**Department of Health and Human Services
Center for Medicare & Medicaid Services
Center for Medicaid and CHIP Services
Funding Opportunity: Connecting Kids to Coverage (CKC)
HEALTHY KIDS American Indian/Alaska Native 2023
OUTREACH AND ENROLLMENT COOPERATIVE AGREEMENTS**

Frequently Asked Questions Set #1

Q1: We are unsure about our eligibility status for the HEALTHY KIDS American Indian/Alaska Native 23 (HK AI/AN 23) funding opportunity. Would you provide additional information regarding the grant eligibility?

A: You can check your eligibility on the grants.gov website at:

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

Also, please see pages 22 and 23 of the NOFO for a complete list of eligible entities who may apply. Eligibility for the grants is described in Section 2113(f)(2)(B) of the Social Security Act. It states that the following entities are eligible:

(1)(C) An Indian tribe or tribal consortium, a tribal organization, an urban Indian organization receiving funds under title V of the Indian Health Care Improvement Act (25 U.S.C. 1651 et seq.), or an Indian Health Service provider.

Q2: What is the page limit for the application, including the page limits for required sections of the application? Are there required documents that are not included in the application page limit? What is the required page size, font size, and spacing of the application?

A: Please refer to the Appendix VI. Application Check-Off List on page 96 of the Notice of Funding Opportunity (NOFO) for additional information. The required sections of the application have various page limits as outlined below and detailed on page 27 of the NOFO:

- Project Narrative – page limit of 40 pages
- Budget Narrative – page limit of 5 pages
- Business Assessment of Application Organization – page limit of 12 pages

- Project Abstract – page limit of 1 page

Required application documents that are not included in the application page limit are: Standard Forms, the Application Cover Letter/Cover Page (optional), Project Site Location Form, and Indirect Cost Rate Agreement.

The required page size for the application is 8.5" x 11" letter size pages with 1" margins (top, bottom, and sides). The font size must be at least 12-point with an average of 14 characters per inch. All pages of the project and budget narratives as well as other required narrative documents must be paginated in a single sequence.

Q3: Are job descriptions for key personnel required? If so, are the job descriptions written in narrative format or numbered format, and where in the application should job descriptions be included?

A: Yes, job descriptions are required. Please refer to the Section E. Application Review Information: E1. Criteria on pages 42 and 43 of the NOFO for additional information. Include brief job descriptions for the Project Director and other positions paid under the cooperative agreement along with a statement of the percentage of time that each person will be working on this project and the percentage of time that is spent on duties outside of the cooperative agreement activities. Please include job descriptions in narrative format in the Staffing Plan.

Q4: Can you confirm whether the award amount of \$1.0 million is per one-year budget period or the total amount for the three-year period? What do you anticipate to be the average grant award for the three years of the funding period?

A: The award amount of \$1.0 million is for the three-year period. CMS does not have an estimate for the average grant award. We anticipate the awards will depend on the requested grant funding amounts, the enrollment and retention goals, the related budget to support the goals, and the number of applications that will be awarded.

Q5: We are a large organization with a few programs that could apply for this grant opportunity. Is it possible to submit one grant with multiple locations?

A: Yes, one grant can be submitted with multiple locations within an eligible entity.

Q6: Please describe how CMS reviewers will closely evaluate the applicant's proposed goals and take that into consideration regarding funding requests as stated in the review criteria.

A: Reviewers will be evaluating applications using the evaluation criteria listed on pages 38 – 44 of the NOFO.

Q7: For some previous CMS grant opportunities, Letters of Intent were required. Please clarify if they are required under this grant opportunity.

A: No. Applicants are not required to submit a Letter of Intent to apply for this grant opportunity.

Q8: Based on overall scores and ranking, will you fund more than one eligible entity in a state, or is there a prohibition of more than one eligible entity per state receiving funding?

A: CMS may award more than one eligible entity to some states as there is no prohibition to restrict funding to one eligible entity or less per state.

Q9: Would you provide examples of alternative methods for verifying new enrollments and renewals that don't depend on state or county agencies?

A: Successful grantees have employed a variety of alternative methods to validate the required data. In some cases, the grantee contacted the potential enrollee to verify if they were enrolled or renewed into Medicaid or CHIP. In other cases, grantees utilized a state-maintained database to verify coverage status.

Q10: Would you provide more detail on the circumstances under which you might waive the 90-day planning period requirement, especially for new grantees? Is there somewhere in the narrative we should indicate we'd be interested in waiving that? What kind of justification for waiving it might you be looking for in the project narrative?

A: CMS requires a 90-day start-up planning period in your application. It is not recommended that new applicants reduce this requirement. If your grant is awarded, CMS will work with the awardee to start up the grant, and CMS will determine when the awardee has achieved complete readiness to become fully operational. At that time, CMS may waive or reduce this time period. You may use grant funds to employ individuals and begin operations during this planning period.

Q11: Are there key staff titles that must be included in the Budget Narrative (i.e. Project Director)?

A: Yes, 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. Please refer to Appendix I. Guidance for Preparing a Budget Request and Narrative, pages 62 and 63 of the NOFO.

Q12: If an applicant has experience in screening and signing people up for public benefits, particularly SNAP, may the applicant propose to include SNAP screening into the principal outreach and enrollment activities? Would this be looked upon favorably?

A: The purpose of this cooperative agreement is to reduce the number of AI/AN children who are eligible for, but not enrolled in, Medicaid and CHIP and to improve retention of eligible children currently enrolled in these programs. SNAP enrollment, while a positive outcome that might result from screening families for public health coverage, will not be included as a performance measure outcome for this cooperative agreement program. All applications are reviewed according to the Review Criteria on pages 38 – 44 of the NOFO.

Q13: Is there a way I can find out what tribal organizations in my county or state are current or former Connecting Kids to Coverage grantees?

A: Information about current and previous grantees is available at:

<https://www.insurekidsnow.gov/campaign-information/outreach-enrollment-grants/index.html>

Q14: Does 50 percent of the Project Director's time mean 50 percent FTE? If the Project Director works less than full time, but exceeds the 50 percent of their time, are they qualified to be the Project Director?

A: The Project Director must spend a minimum of the equivalent of 50 percent of a full-time position. For example, if the Project Director works 40 hours per week, we expect the Project Director to devote 20 hours to the grant. If the Project Director works less than full time, it is expected that the Project Director dedicate at least 20 hours fully to this project.

Q15: If a grantee is able to demonstrate their outreach activities funded under the CKC grant has produced new applicants and renewals to their current enrollment staff (staff not funded under the grant), can those new applicants/renewals be counted and verified as enrollments for this grant in the monthly progress reports?

A: No. Please note that all applications, enrollments and renewals need to be directly attributable to this specific grant funding (page 39 of the NOFO). All other outcomes can be reported separately as additional outcomes, but CMS is primarily focused on the outcomes that have been achieved as a direct result of federal funding under this specific funding opportunity.

Q16: If you received multiple applications from an eligible entity in a state, would you notify prospective applicants of interest to encourage collaboration?

A: No. CMS does not release the names of applicants nor do we release the names of organizations that were not funded. Potential applicants can certainly reach out to other organizations within their targeted areas to work on the mutual goals that are the focus of this funding opportunity.

Q17: Will you please send additional information in reference to how to apply for the grant?

A: Information on the process of applying for a federal grant is located at:
<https://www.grants.gov/web/grants/applicants/apply-for-grants.html>. Additional information on applying for this particular grant is available at: <https://www.grants.gov/web/grants/view-opportunity.html?oppId=342869>.

Q18: What is considered newly enrolled? For example, if a participant was previously enrolled in Medicaid in the last two to five years and recently enrolls today, would it be considered a renewal or a new enrollment?

A: A child or parent is considered newly enrolled if he or she was not enrolled in Medicaid or CHIP at the time of assistance.

Q19: The NOFO indicates HEALTHY KIDS American Indian/Alaska Native 2023 (HK AI/AN 2023) grants will be awarded pending availability of funding. What will trigger availability of the HK AI/AN 23 funds?

A: The HK AI/AN 23 funds are approved and available in the amount of \$6,000,000.

Q20: Are optional attachments allowable (e.g., letters of support/commitment, sample contract with subrecipients, organizational chart)? If yes, is there a maximum page number/file size for optional attachments?

A: The required documents and optional attachments are outlined in Section D2. Content and Form of Application Submission on pages 27 through 33 and Appendix VI. Application Check-off List on pages 96 and 97. Please note, Letters of Support are welcome but are not considered in the merit review process and are removed from the consideration for selection of award recipients.

Q21: The NOFO uses the phrase, “substantial interactive assistance”, would CMS please clarify what this means?

A: Substantial interactive assistance is described as application and renewal assistance delivered directly to AI/AN families in person, by phone, or online, by a member of your organization or project partner, resulting from funding from the Centers for Medicare & Medicaid Services under the HEALTHY KIDS Act. This does not include sending mailings, emails or calling people with a pre-recorded message.

Q22: For purposes of the \$5,000 limit on promotional items, what is considered a promotional item? Giveaways, like pacifiers or pens, or print materials, like flyers or palm cards?

A: There is no definitive list available for promotional items. Any expenses must be reasonable and in accordance with the goals of the program and will need to be prior approved by CMS. Print materials such as flyers and palm cards are not considered promotional items.

Q23: Will the technical assistance webinar be recorded?

A: Yes, the webinar will be recorded and posted to insurekidsnow.gov.

Q24: If an MOU is unable to be established with the state Medicaid office, what alternative methods can be used to verify new enrollments, successful renewals and denials?

A: The applicant must describe to CMS how it plans to create and implement a well-designed and effective alternative data method or other data sharing agreement to verify new enrollments and renewals. This may include obtaining a copy of the award letter from the Medicaid or CHIP applicant or working with an entity, such as a managed care plan or health-based clinic to verify required data.

Q25: Can you elaborate about the factors other than merit that will impact the selection of application, especially the one about geography and scale?

A: Factors other than merit include diversity in project approaches, the use of strategies most likely to achieve success, the level of need in the project location area, in addition to the geographic diversity and scale that adequately addresses the purposes of the NOFO.

Q26: Does the \$1.0 million per award amount include indirect costs, or are Facilities and Administration (F&A) costs provided in addition (at the federally negotiated rate)?

A: Yes, indirect cost is included in the award amount. Please refer to section F2. Administrative and National Policy Requirements pages 46 - 51 of the NOFO for more information on indirect costs.

Q27: On page 35 of the NOFO, it states that recipients are prohibited from using funding for contracted evaluation services. Does this include budgeting funding for a statistician at the applicant's home institution?

A: Budgeting for a statistician at the applicant's primary organization is allowed. However, HK AI/AN 23 recipients will be prohibited from using any cooperative agreement funding for contracted evaluation services.

Q28: Can we develop a budget that is larger for years two and three and less in year one due to the planning period?

A: Yes. However, all budgets are reviewed on a case-by-case basis. The organization's budget should be based on organizational need. The potential recipient can request less than \$333,333

the first year to allow an increase for years two and three. Keeping in mind, the budget must justify the actions of the organization in a detailed and concise budget, complete with an itemized breakdown document and narrative.

Q29: Will CMS prioritize funding for projects that have a higher percentage of AI/AN children in their target population? What if an organization serves more eligible adults/parents/pregnant people than children?

A: This funding opportunity is focused on enrolling and retaining eligible AI/AN *children* in Medicaid and CHIP, and targeting the hardest to reach uninsured children to reduce coverage disparities. We encourage applicants to include targeted adult populations because they are shown to result in child enrollments. For example, we encourage applicants to include parents in outreach and enrollment efforts because a large body of research suggests this is effective in increasing children's enrollment and access to care. We also encourage applicants to include pregnant individuals because the infants born to individuals who are enrolled in these programs at the time of the birth are automatically deemed eligible for Medicaid or CHIP for one year, without an application or further determination of eligibility. In addition, increasing enrollment of eligible pregnant individuals in Medicaid and CHIP promotes improved maternal and infant health outcomes.

Q30: Will we need to submit a budget narrative for all three years or just year one with notes on expenses that will be different from years one through three?

A: Yes, the budget narrative will need to outline the budget for all three years of the grant period. Additional information regarding the Budget Narrative may be found on pages 43 and 44, and in Appendix I. Guidance for Preparing a Budget Request and Narrative on pages 60 through 72 of the NOFO.

Q31: If we were an AI/AN 2020 grantee, and were unable to do some of our outreach strategies due to the pandemic, should we consider these strategies as new strategies for this grant?

A: You may include previous strategies that you were unable to implement. We also encourage you to review Appendix VII. Outreach Activities to Consider on pages 98 – 100 of the NOFO

and Appendix VIII. Using Parent Mentors of Medicaid or CHIP enrolled Children as Mentors to Parents of Uninsured Children on pages 101 and 102 to develop outreach strategies for this grant.

Q32: Will CMS count substantial interactive assistance provided to help an enrollee understand an ex-parte renewal notice as a renewal? Or, should ex-parte renewals to be excluded entirely from reported data?

A: This would be considered enrollment education and would not count as substantial assistance.

Q33: If an applicant has an existing and valid MOU agreement, should it be included as an attachment and described in the narrative? Is anything further required for the grant application if the MOU/data sharing agreement is already in place?

A: We are asking non-state applicants to describe their plans to secure an MOU or other data-sharing agreement with the state or county Medicaid/CHIP agencies within 90-days after the cooperative agreement is awarded. If your organization already has a MOU established you do not need to include it as attachment, but please describe the agreement you have in place.

Q34: Can you share a list of past awardees?

A: You may find current and prior grantees and the awarded amounts on the InsureKidsNow.gov, under the Outreach & Enrollment Grants heading at:

<https://www.insurekidsnow.gov/campaign-information/outreach-enrollment-grants/index.html>.

Q35: Is there information regarding how much the total award amount is allotted in each state?

A: We do not have an allotted amount per state. The \$6 million funding amount is open to all eligible entities.

Q36: In regards to Parent Mentors, must they have a child/guardian “currently” enrolled in Medicaid/CHIP, or is it acceptable to have had the recent experience of having a child/guardian recently enrolled?

A: A parent mentor is an individual who is a parent or guardian of at least one child who is enrolled in Medicaid or CHIP. Please refer Appendix VIII. Using Parents of Medicaid or CHIP enrolled Children as Mentors to Parents of Uninsured Children, pages 101 and 102 of the NOFO.

Q37: We are a current AI/AN CKC grantee, so we are familiar with the monthly data reports. Will grantees only report application assistance (# of applications submitted, approved, denied, etc.) completed by grant-funded positions? Or will grantees be allowed to report application assistance based on grant strategies, such as the use of parent-mentors not paid/compensated directly through the grant?

A: Grantees will report on the number of applications submitted, approved, and denied completed by grant funded positions only. All other outcomes can be voluntarily reported, but CMS is primarily focused on the required metrics.

Q38: Would parent mentors be expected to be paid or volunteers?

A: We expect parent mentors to be paid. Based on the study cited in footnote on page 15 of the NOFO, parent mentors were paid \$15 per hour. The study found that hiring parent mentors provided employment opportunities for underserved communities, helped reduce uninsurance rates, improved health care access, and increased quality of care. You may view the study at: https://www.healthaffairs.org/doi/10.1377/hlthaff.2017.1272?url_ver=Z39.88-2003&rfr_id=ori:rid:crossref.org&rfr_dat=cr_pub%20%200pubmed.

Q39: Can the Principal Investigator/Project Director (PI/PD) split the 50 percent effort?

A: No. We require that one person serves as the project director as the main point of contact for the grant.

Q40: For the budget narrative, is a centralized office space lease agreement eligible to be covered by this cooperative agreement?

A: Yes, grant funds can be used for leasing space.

Q41: Is there a certain bank account that is required to be associated with the application?

A: Banking information and requirements are available on the Payment Management System website at: <https://pms.psc.gov/grant-recipients/banking-add-change.html>.

Q42: Do applicants for the HEALTHY KIDS AI/AN 2023 grant that have no violations to disclose still have to submit in writing to the OIG and HHS as part of their application? Or is this required on an as-needed basis (if/when a violation occurred)?

A: Applicants need to report if/when a violation has occurred. Please refer to pages 35 and 36 of the NOFO for details.

Q43: If the state has elected to provide the 12-month extended postpartum coverage option to individuals who were enrolled in Medicaid or CHIP while pregnant, should applicants count assistance provided to postpartum individuals to complete a renewal of their Medicaid or CHIP coverage at the end of the extended postpartum coverage period?

A: Yes, applicants should count assistance provided to postpartum individuals who are enrolled in Medicaid or CHIP and due for renewal at the end of the 12-month postpartum period. States that adopt the 12-month extended postpartum coverage option will not need to conduct a redetermination or renewal prior to the end of the extended postpartum coverage period. The applicant may count as completing a renewal application once the extended postpartum coverage period has ended.

Q44: If the state has elected not to provide the 12-month extended postpartum coverage option, should applicants “count” assistance provided to pregnant individuals to complete a renewal of their Medicaid or CHIP coverage at the end of the 60-day postpartum coverage period?

A: Yes, the applicant may count completing a Medicaid or CHIP request for information or renewal application for pregnant individuals once their 60-day postpartum coverage period has ended or at their next regular renewal period if they are enrolled in a group that does not consider pregnancy as a factor of eligibility.

Q45: Can you confirm which of the following items are considered promotional items? Postcards for initial promotion and reminders, leave-behind information, flyers or other items for posting, mailing, sharing, etc., posters for promotion of events, and student information packets.

A: The items listed above are educational materials, not promotional items as outlined under the supplies section. Please refer to page 67 of the NOFO.

Q46: Can one Authorized Organizational Representative (AOR) sign the SF-424 and another (different) AOR submit the application?

A: No. Only one Authorized Organizational Representative (AOR) completes and signs the form. 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. Please refer to page 29 of the NOFO.

Q47: May we utilize a portion of time of an employed eligibility worker to fulfill the parent mentoring role if they fit all of the criteria and are already trained on the strategies listed in Appendix VIII?

A: Yes. Please refer to the staffing plan criteria on pages 42 and 43 of the NOFO to allocate their time accordingly.

Q48: Are you required to upload resumes? If so, are resumes to be uploaded in grants.gov as other attachment form?

A: Yes, a resume is required for the Project Director.

Q49: We have an additional funding source that helps to pay for this project which we would use to match CMS funds. Can we construct the budget in a way in which we are providing the match at 100% for individual line items, funded by the non-CMS source? In other words, if we submitted a budget in which we are requesting funds for salary, benefits and travel are covered by CMS, but other line items (such as D-H on the SF-424) are covered with matching funds.

A: We don't require cost-sharing or matching as outlined on page 24 of the NOFO. Please review pages 34 and 35 of the NOFO, Prohibited Use of Award Funds as it relates to matching. Please note as outlined on pages 20 and 39, all applications, enrollments, renewals and denials reported should be directly attributable to this cooperative agreement. For example, if a HEALTHY KIDS AI/AN 2023 recipient is also a Navigator award recipient under the Cooperative Agreement to support Navigators in Federally-facilitated Exchanges, only enrollment and renewal data directly attributed to CKC HEALTHY KIDS AI/AN 2023 funding should be reported.