

**Question and Answer RFP # 03410-157-15**  
**VHC Navigator Organization Grant(s) - (SFY2016)**

1. Why was the Navigator funding reduced in 2016? Is this the reason the Tier 1 organizations can only budget up to \$40,000?

**Answer:**

The funding of this grant was determined in accordance with the available budget, which is significantly less than past years.

2. Some organizations in the past and current grant cycles have had navigators under the grants that are employees of the clinics in our coalition, not the bidding organization itself, and that has been allowed. I just wanted to make sure that that is still ok.

**Answer:**

The RFP states that individual navigators must “be employed by a Navigator Organization” (p.9) If the clinics in the coalition are not navigator organizations they can partner and designate a lead organization to apply comply with grant specifications. Another explanation can be found on p. 7 of RFP:

***“Partnerships***

*Organizations can and are encouraged to partner with other organizations to submit one application – and are encouraged to do so if their capacity alone cannot meet Navigator organization duties and requirements. However, all applications must be submitted by a prime applicant. The prime applicant will hold the contract with the State and be responsible for reporting and oversight of Navigators. Organizations that are a primary applicant on one application may not also be identified as a partner on another application. Applicants who partner with other organizations must describe the compensation and reporting relationship with the partner organization(s), as well as a description of the expected Navigator staffing at the partner organization. Grantees will be required to provide the state with a copy of agreement(s) with the partner organization(s) that delineate the expectations for work under the Navigator grant.”*

3. Our navigators do a significant amount of follow up work to get people enrolled. This past year VHC had us include those numbers as part of our community outreach. Is there a better way to account for all the follow up work we do for Vermonters that have an application in process, but have issues getting enrolled? Is there a place to address this work in the RFP?

**Answer:**

On page 10 of the Request for Proposals we explain how navigator organizations can account for activities regarding community outreach. The RFP provides:

Specific outreach and education activities conducted, number of individuals reached per activity, and the perceived success of each activity:

- Number of applications assisted/completed by Navigators

- Number of enrollments (plan selection) assisted/completed by Navigators
- Number of individuals served for education/consultation
- An average of time spent with customer
- Identified community partnerships
  - Description of partnerships
  - Length of partnership
- Qualitative reporting on successes, challenges, observations – including:
  - Relationships with population/community organizations
  - Contact with/collaboration with other Navigator organizations

4. The RFP mentions QHP renewals, but doesn't have that as a projection or ask us to talk about that work. Where would that be measured? Would it count as a follow up?

**Answer:**

We interpret assistance regarding qualified health plan renewals as part of enrollment. Thus, where the RFP designates reporting of an enrollment function as the reporting we would document the work performed.

5. Are volunteers who are certified as navigators allowed as part of this upcoming grant year as they have been in the past?

**Answer:**

No. The RFP states: Individual Navigators must be employed by a Navigator Organization

6. Are we able to bill administrative costs as a set admin percentage or do they need to be detailed out in line by line costs?

**Answer:**

Navigator organizations may bill administrative costs in response to this bid in varying ways, in accordance with their discretion. Bidders should understand two principles regarding administrative costs: The State of Vermont has the right to judge excessive administrative costs, and the State has the right to judge administrative costs in the overall validity of the bid. Also, bidders are subject to an audit of any administrative costs billed to the State under this bid.

7. How many grants will be awarded to each Tier and will they be broken down into Regions?

**Answer:**

The State of Vermont has the right to determine the number of awards based on the mix of grantees it believes can most effectively provide comprehensive coverage to Vermonters across the State. No fixed number has been determined.

8. Will enrollment and application submitted numbers include phone-assisted COC's?

**Answer:**

Yes, as long as the definition of reporting enrollment/ applications is correct.

For example:

“Application” is defined as single portal or paper application, regardless of number of individuals included on it, e.g., an application with five family members on it is counted as ONE application;

“Submitted by Navigators” is defined as submitted through the Navigator’s portal account or through the customer’s portal account with Navigator assistance or on paper with Navigator assistance

“Navigator assistance” is defined as the Navigator providing assistance with the actual completion and submission of the application. Simply providing someone with a paper application or directing them to the electronic application does not count as Navigator assistance.

**See also: PDF Attachment “Navigator Grant Reporting Guide”**

9. Will referrals to other community programs be counted as consultations?

**Answer:**

The definition of a consultation is as follows: A single encounter, at least 10 minutes in length, regardless of the number of individuals/family members included in it, e.g., a consultation/education session with a couple of family regarding their options for enrollment would be counted as ONE session; all sessions should be counted, even if the individual returns and is counted elsewhere as completing an application at a later date.

Since we are unclear on what is meant exactly by “Community Programs”, we are unable to answer this question.

10. Can any Tier I navigator be funded at higher than \$40,000?

**Answer:**

No, each Tier 1 Navigator organization has a ceiling of \$40,000 for grant funding this year.

11. Medicaid industry standards define "Outreach" as population-based and includes things like mass mailings, radio ads, ads in the paper, posts on FPF, etc. "Communication" is targeted outreach where there is direct communication with an individual (one-on-one interactions at the fair, phone calls, etc.). Is VHC looking for us to combine both of these in our projections? Can we include these items or is VHC looking for only outreach events where we can verify the message reached the person (tabling, personalized letters, etc.)?

**Answer:** See page.10 of RFP for details:

***“Evaluation of Navigator Organizations***

*Navigator Organizations will be responsible for monthly reporting to Vermont Health Connect. Reports will include:*

*Specific outreach and education activities conducted, number of individuals reached per activity, and the perceived success of each activity.*

For example, current outreach reporting activities include:

- Attendance at a public event or setting (e.g., tabling/canvassing)
- Informational meeting with community group, organization or employer
- Media event (Public Service Announcement, Radio Show, Newspaper Ad, etc.)
- Social Media Activity
- Disseminated general information about Vermont Health Connect (e.g., via e-newsletter, etc.)

Population based outreach and one-to-one outreach efforts are considered and counted as such.

**12.** If we can include things like radio and newspaper ads, how should we count this if we utilize the same medium more than once? For instance, if our newspaper is distributed to 4,000 people and we do an ad in August and then again in March, do we only include these individuals once or can/should we include them in each quarter?

**Answer:**

The State of Vermont will not pay for duplications in the area of outreach unless the organization can show the duplicative effort resulted in assistance to potential enrollees on the Vermont Health Benefit Exchange.

**13.** How are completed enrollments defined? Does "Enrollments Completed" refer to the number of individuals having picked a plan?

**Answer:**

Enrollments are defined by the number of applications completed, regardless of the number of individuals included on each. (See # 8 above.)

**14.** Completed enrollments: Since they aren't included in "Applications Submitted", I'm assuming this is where we would include family members enrolling on the same application?

**Answer:**

Correct, if plan was selected. If 1 application is submitted for 1 family – it only counts as 1 application submitted.

**15. Individual Consultations/Education:** Just want to be sure that this is where we would include the following:

- i. All the follow-up work we do AFTER we have completed the application (rushing the application, helping figure out billing problems, doing a COC)
- ii. Answering general questions about the plans, the ACA, enrollment deadlines, etc.
- iii. Anyone we help who already has an application in the system - even if we are helping them pick a new plan for 2016.

**Answer:**  
Correct.

**16.** Could you clarify the defined number Outreach activity events – on page 6 it says “no less than 2 events per quarter” and on page 8 it states “providing a visible VHC presence at community venues, events, fairs and festivals at least 5 times during grant period.”

**Answer:**  
2 events can be *any* events but at least 5 times a year needs to be a presence at community venues, etc. The 2 events can be included among the 5 per year.

**17.** On page 10 can you clarify what would be involved with the “quarterly work plans?” This appears to be a redefined requirement from last year.

**Answer:**  
What is planned for each quarter to accomplish their projections – for example, if a large event is planned to take place during a certain quarter and will contribute toward projections, that information should be included in the work plan. The State’s expectation of a quarterly report is for the organization to report events it projects will increase the goals of this work, increase enrollment on the State Based Exchange, target underserved populations and improve customers interactions with the exchange. Page 10 of the RFP defines it: *Work-plan for the coming quarter – including upcoming events, community meetings, etc.*

**18.** On page 10, do we need to budget for distribution of satisfaction surveys or will this be the sole responsibility of VHC?

**Answer:**  
Satisfaction surveys will be conducted by Vermont Health Connect with assistance of Navigators. No costs are anticipated to cover Navigator organization expenses for this process; Navigator assistance is expected as part of the work responsibilities of the grantee. Therefore the costs should not be budgeted.