FY 2025 Navigator Grant Program Request for Proposals: Responses to Applicant Questions

Updated February 9, 2024

Application Process

Is there an "Intent to apply” date for this RFP?

There is no preliminary process, such as a letter of intent, for this RFP. The application process is available for all eligible agencies and proposals must be submitted by 1 p.m. Central time on February 22, 2024.

Are the required attachments “fillable”?

Attachments A, C, D, E and F are fillable PDF documents, with the exception of the signature line. This is to ensure that the attachments are submitted with a valid signature that is either handwritten or follows MNsure’s electronic signature policy. Attachment B is not a fillable PDF.

During the webinar, did you provide any resources for grant writers or any suggestions for affordable professional grant writers?

MNsure does not provide recommendations for grant writing resources for potential applicants.

Does a navigator agency need to apply for the RFP to continue receiving navigator per-enrollee payments?

No. Per-enrollment payments are not the subject of this RFP. Grant funding is in addition to per-enrollment payments that contracted navigator organizations receive for successful applications and enrollments.

Will there be a template/requirement to submit Excel worksheets for workplan, detailed and summary budget as there has been in previous rounds of funding?

Applicants will not submit a workplan, detailed and summary budget in Excel worksheets. Selected grantees will need to complete a detailed work plan with strategies and tactics for completing the grant objective, as well as a summary and detailed budget as part of contract negotiation in Stage 4 of the evaluation and selection process.
Does a paid partnership mean a contract between two agencies (the navigator agency and another independent contractor agency coming to an agreement to work together) or individuals within the navigator agency who currently have a role such as ownership, director and/or manager. Please elaborate the definition of the paid partnership.

A paid partnership involves two or more separate agencies. Individuals are not eligible to apply for a grant. In a paid partnership there must be a lead agency that will receive the grant funds and is legally responsible for the contract. The paid partner is a separate entity that must be a public, tribal, private for-profit or nonprofit agency. The lead agency will distribute grant funds to the paid partner. Additional specific information on paid partnerships is on pages 5-6, 13, 14-15 and 24 of the RFP.

Is this the first time a grant like this has been done?

This is MNsure's eighth request for proposals for a navigator grant program. The grant goals, requirements, and evaluation and selection change with each RFP to meet MNsure's current program needs. Please review the details for this RFP carefully.

Objective and Strategies

How should we count the people who maintain coverage? The objective is about "SOF population will gain or maintain health insurance." I understand "gain" but not how "maintain" is counted. Does "maintain" mean renewal, or it is more like case management? So, for example, if someone wants help with reviewing a qualified health plan, does that count as maintaining? What if they don’t change their plan, they keep the same one so it can’t be verified by MNsure that we helped, would that also count as maintain?

The RFP requires applicants to set an objective to clarify the scope of the work to be achieved by the grant. The objective should capture the outcomes of the full range of work navigators do to help consumers.

For “maintaining” health insurance coverage, the objective could include activities that prevent an individual from otherwise losing coverage, such as responding to a renewal notice. However, it can also reflect activities that help a consumer stay in the appropriate type of coverage, such as reporting changes in circumstances between renewals or meeting to review qualified health plan options.

Grantees will be expected to collect and report data to demonstrate progress on achieving their grant objective, so grantees should base their objective on results that they can track and include data in their monthly reporting.

In the specific example of meeting with a consumer to review their QHP options for the next plan year, this activity could be counted as part of meeting the objective if the agency tracks that they met with a consumer for this purpose and the consumer is from their Statement of Focus
population. The grantee should be able to provide documentation of the activity upon MNsure’s request.

**Data Collection**

I do not understand the difference between these two questions and what they are asking. Could you please share more about what you are looking for in each and any particular differences?

*Data Collection: Application Support* Describe what information will be tracked and how data will be collected that can be reported to MNsure to show application support strategies are helping the SOF population get eligibility for health care programs.

*Data Collection: Objective* Describe what information will be tracked and how data will be collected and reported to MNsure to demonstrate progress towards the grant objective (the number of individuals from the SOF population who will gain or maintain health insurance coverage during the grant period).

Grantees will be required to collect and report data to demonstrate progress on accomplishing their strategies and achieving their grant objective.

Data reported for the objective will focus on the outcomes of the strategies and how many individuals from the State of Focus (SOF) population gained or maintained coverage. For the example objective on page 9 of the RFP, “400 recent refugees/immigrants settling in Northeast Minnesota will obtain or maintain health insurance coverage,” the grantee would need to track the immigration status of those they assist to be able to report on their progress.

For this example objective, the monthly report to MNsure might say, “In September, 24 individuals from the SOF population obtained coverage through new applications, submitting required verifications and updating existing applications and 18 maintained coverage by submitting verifications, reporting life events, completing renewals and shopping and/or enrolling in private plans.” Please note that the agency may have assisted more people than the 42 they reported, but the other individuals did not fall within the grant’s SOF population.

A more detailed explanation of how the grantee achieved these results will come from the data reported for the individual strategies. The specific data collected will depend on the grant’s strategies. For the example application support strategy on page 10 of the RFP, “follow-up with applicants to support submitting required verifications,” the data collected by the agency might be to track the date contact is made by phone, text or email with a consumer they assisted with submitting an application. The monthly report to MNsure might say: “In September, 12 calls/texts/emails were made to follow up on submitting verifications last month, eight were to consumers from our SOF population. Contacts were made in Amharic, Oromo and Somali and Karen languages.”

While MNsure can verify overall numbers of those successfully assisted with an application, enrolling in a qualified health plan or completing a renewal, much of the activity an agency will
perform under the grant cannot be independently verified by MNsure. If requested, the grantee will need to provide the specific data the grantee collected that supports what they report to MNsure.

**Budget and Financial Management**

**Does 1 person have to be dedicated at least .5 FTE or could 2 or 3 people combine duties to total at least .5 FTE?**

The goal of the grant program is to ensure there is a network of experienced navigators able to provide comprehensive support to consumers in all aspects of the process of applying for and maintaining coverage. Having a single staff person dedicated at least half-time to providing navigator services supports developing and maintaining expertise in helping with the many complex consumer scenarios. No staffing model is required, but preference will be given to grants that have at least one person devoted at least half-time (16 or more hours per week) year-round to grant outreach and enrollment activities.

**Do navigator per-enrollee payments count as non-MNsure funds for purposes of sustainability (i.e., does "funds" mean grant funds)?**

No, navigator per-enrollee payments for Medical Assistance, MinnesotaCare and qualified health plans are considered MNsure funds. Non-MNsure funds would be sources such as other grants, general operating funding, or other revenue generating activities.

**Is a certain percentage of non-MNsure funding required?**

There is no matching required for this grant and there is no specific percentage of non-MNsure funds required. Funding for navigator activities from sources other than navigator per-enrollee payments and MNsure navigator grants demonstrates more sustainability and agency commitment to assisting consumers with accessing affordable health insurance options.

**Is there a limit to the amount of funds that can be requested?**

Yes, MNsure anticipates a maximum award of $550,000 per fiscal year. A proposal’s budget should be reasonable given the current activities of the applicant and the objective and strategies of the proposal. An agency must have adequate financial systems and practices in place to manage grant funds appropriately.

**Is there a limit to the number of full-time navigators that can be funded by a grant?**

No. However, MNsure anticipates a maximum award of $550,000 per fiscal year. An excellent proposal will have a description of how funds will be used that aligns with the proposal’s strategies.
Evaluation Process

Does a 501(c)(3) lead applicant with an annual budget over $750,000 have to have audited financials at the time of proposal submission or by the time of contract signing?

Financial statements are only required for agencies that are notified that they have made it to Stage 4 of the evaluation process. MNsure anticipates that this notification will happen in mid-April. Agencies will have three business days to submit their most recent audit once notified.