

FLORIDA HEALTHY KIDS CORPORATION

CALL FOR GRANT PROPOSALS Kids Oughta Be Covered Projects

June 2, 2015

**Florida Healthy Kids Corporation
661 E. Jefferson Street, 2nd Floor
Tallahassee, Florida 32301
(850) 224-5437- office
(850) 224-0615 - fax
www.healthykids.org**

**Florida Healthy Kids FHKC
Call for Grant Proposals (CGP)**

Table of Contents

SECTION ONE: INTRODUCTION.....	3
A. GENERAL GUIDELINES.....	4
B. QUALIFIED ENTITIES.....	5
C. COMPETITIVE PROCESS.....	5
SECTION TWO: SCOPE OF WORK.....	5
A. Areas of Focus:	6
B. FUNDING	7
SECTION TWO A: SCOPE OF WORK FOR FOCUS AREAS 1-3	7
A. DEFINITIONS.....	7
B. PROJECT NARRATIVE.....	8
C. Outreach Support Team Responsibilities.....	9
SECTION TWO B: SCOPE OF WORK FOR FOCUS AREA 4.....	10
A. DEFINITIONS.....	10
B. PROJECT NARRATIVE.....	10
C. Deceptive Conduct	11
SECTION THREE: BACKGROUND ON THE FLORIDA HEALTHY KIDS CORPORATION	12
SECTION FOUR: PROPOSAL CONTENTS	12
A. COVER PAGE.....	12
B. SUBMISSION CHECKLIST.....	13
C. AFFIRMATION STATEMENT.....	13
D. ORGANIZATIONAL BACKGROUND.....	13
E. PROPOSAL DESCRIPTION	13
F. EVALUATION PLAN	14
G. FINANCIAL STABILITY OF RESPONDENT	14
H. PROPOSED CONTRACT.....	15
SECTION FIVE: REPORTING AND MONITORING REQUIREMENTS	15
SECTION SIX: ADDITIONAL TERMS AND CONDITIONS	16
A. RESTRICTIONS ON LOBBYING.....	16
B. IDENTIFICATION AND ASSOCIATION.....	16
C. IMMIGRATION REFORM AND CONTROL ACT OF 1986.....	16
D. MANDATORY CALLS AND MEETING.....	17
E. PAYMENT FOR ADEQUATE PROGRESS.....	17
SECTION SEVEN: PROPOSAL PROCESS	18
A. SINGLE POINT OF CONTACT	18
B. QUESTION AND ANSWERS	18
C. PROPOSAL CONFERENCE CALL	ERROR! BOOKMARK NOT DEFINED.
D. PROPOSAL FORMAT	18
E. SUBMISSION INSTRUCTIONS	18
SECTION EIGHT: REVIEW PROCESS.....	20
ATTACHMENT I: TENTATIVE CALENDAR OF EVENTS.....	21
ATTACHMENT II: CGP SUBMISSION CHECKLIST	22
ATTACHMENT III: SAMPLE AFFIRMATION STATEMENT	23

Section One: Introduction

The Florida Healthy Kids Corporation (FHKC) releases this Call for Grant Proposals (CGP) in order to solicit eligible organizations to become “Kids Oughta Be Covered” partners (KOBC) and assist and educate eligible families in applying for or retaining Florida KidCare (FKC) coverage. The FHKC Board of Directors has approved marketing and outreach grants with the overall objective of increasing enrollment in FKC’s Title XXI funded programs (MediKids, Healthy Kids, and Children’s Medical Services Network). Florida KidCare is Florida’s Children’s Health Insurance Program (CHIP). KOBC contract amounts will be based upon the total estimated uninsured rate of children within the proposed geographic service area. No more than \$45,000 will be awarded to any one KOBC Grantee.

As a KOBC, if applying for funding to assist families with application assistance, your project will be responsible for reporting on the status of applications and renewals submitted for your service area. In addition, you may be asked to attend or assign local community events to your community partners.

In most cases KOBCs will be tasked with serving as a multi-county FKC liaison, which includes, but is not limited to, being responsible for recruiting and training local organizations to serve as Certified Application Assistance Sites (CAAS), monitor and track progress of recruited application sites, and provide technical assistance as requested. Each KOBC will be responsible for reporting on the status of applications and renewals submitted for its proposed service area.

Respondents should demonstrate the ability to target, enroll, and retain specific populations with high rates of uninsured and/or issues with access to health care.

FHKC is not accepting proposals for coverage in Bradford, Brevard, Broward, Columbia, Hamilton, Holmes, Indian River, Lee, Marion, Martin, Okaloosa, Okeechobee, Putnam, St. Lucie, Santa Rosa, Volusia, Union, Walton, and Washington counties. These counties are already covered by funded Florida KidCare outreach projects.

Multiple agencies can join together and submit one response to cover a specific service area, however, a single agency must be identified as the lead for contractual and monetary distribution purposes.

The KOBC grant proposals will be awarded based on evidence that has emerged about promising opportunities for improving enrollment as well as areas where disparities in coverage are found. Grant funds may be used for a variety of activities aimed at increasing the number of eligible children enrolled in Florida KidCare and improving retention of children already enrolled in these programs. KOBC grants must help support initiatives that reach uninsured but eligible children within a given community, and will be sustainable after the grant ends.

Funding may be used for projects that directly target families and communities with appropriate messaging and application assistance. However, such projects must do

more than develop and initiate new ways of marketing Florida KidCare to particular audiences. Applicants must describe how their efforts will link eligible children to enrollment and how children will be enrolled and/or retained in coverage.

KOBC proposals are also encouraged to take a systemic approach to outreach, enrollment and retention. A systemic approach aims to incorporate and integrate efforts into the regular activities of government agencies and community-based organizations and institutions. In this way, investments are sustainable beyond the life of the grant.

Proposals should identify one of the following Areas of Focus for their project. The proposal may include activities that overlap with another focus area, but applicants must identify the major path upon which the project would proceed, if selected. Proposal should be designed around **one** of the following areas of focus:

1. Engaging schools in outreach, enrollment and renewal activities
2. Engaging health in outreach, enrollment, and renewal activities
3. Reaching underinsured groups of children or groups of children at high risk of being uninsured that are more likely to experience gaps in coverage
4. Establishing and conducting training programs to equip communities to help families understand the new application and enrollment system and to deliver effective assistance

KOBC will be eligible to receive payments equaling \$10.00 **per completed FKC application resulting in enrollment** in the MediKids, Healthy Kids, and Children's Medical Services Network programs; or \$5.00 **per completed FKC application resulting in enrollment** in the Medicaid for Children program. Completed applications with children enrolled in multiple programs such as MediKids, Healthy Kids, Children's Medical Services Network (CMSN), and Medicaid for Children would be eligible for the \$10.00 payment. KOBC cannot artificially divide families for the purpose of submitting more than one completed application.

If there are multiple children on an application and the children become effective at different dates, the CAAS is paid only once when the first child's coverage activates.

KOBC must successfully achieve agreed upon scope of work to continue to be eligible for this Project. Technical assistance will be provided during this grant period to assist with reaching approved goals.

Submission requirements of this CGP follows.

A. General Guidelines

An organization submitting under this CGP ("Respondent") is strongly encouraged to include in their proposals the establishment of CAAS that will increase opportunities to reach eligible families, especially utilizing the FKC online application renewal process.

The funds provided under this grant process are non-recurring and the extent to which future grants may be made available in subsequent fiscal

years is unknown. Funds will not be provided retroactively for costs incurred prior to the Contract commencement date.

B. Qualified Entities

Proposals will only be accepted from: 1) non-profits or organizations designated as 501 (c)(3) by the Internal Revenue Service; 2) governmental entities; or 3) universities. All organizations and entities meeting these qualifications that provide services or interact with families, parents and children are encouraged to apply under this proposal process. Current Matching Grant and School Based Project Grantees, FKC contracted health plans, managed care organizations, or medical providers are prohibited from applying.

C. Competitive Process

This CGP is a competitive process. The number of proposals funded and the amount of funding granted will be determined by FHKC. Individual grants will not exceed \$11,250 per quarter in base stipend under this grant. There is no assurance that all proposals will be funded. A Respondent may withdraw its application by written notice submitted on the Respondent's letterhead, signed by an authorized representative of the Respondent to the FHKC Issuing Officer.

Section Two: Scope of Work

A. Areas of Focus

Proposals for KOBC grant funds should identify one of the following as the main strategy on which the applicant will focus, if a grant is awarded. The proposal may include activities that overlap with another strategy, but one Focus Area must be identified as the major path upon which the work will proceed. For example, a Respondent seeking to engage high school sports coaches, driver education programs and school-based health clinics might choose Focus Area #3 (Engaging Schools in Outreach, Enrollment and Renewal Activities) as the major strategy.

Engaging Schools in Outreach, Enrollment and Renewal Activities. Schools are widely accepted as an important setting for conducting children's health coverage outreach and enrollment activities. Proposals may describe efforts to develop and enhance methods to facilitate identification of potentially eligible children, such as establishing application assistance with a local school district through free and reduced-price school lunch programs or data on emergency contact cards or registrations forms and take affirmative steps to enroll eligible children in Florida KidCare. Proposals also may include efforts to engage principals, school athletic directors and coaches, school nurses, school-based health clinics; school social workers and counselors in outreach and enrollment activities.

Proposals may also include efforts to engage non-traditional schools through outreach project, i.e. charter schools; alternative school settings; higher education; community colleges; and adult learning.

Engaging Health Professionals in Outreach, Enrollment and Renewal Activities. Health care professionals are key partners for conducting children's health coverage outreach and enrollment activities. Proposals may describe efforts to develop and enhance methods to facilitate identification of potentially eligible children through partnering with health care professionals and take affirmative steps to enroll eligible children in Florida KidCare. Proposals also may include efforts to establish application assistance within local hospitals, outpatient clinics, urgent care settings, pediatric offices, health departments, dentist, dental clinics, and community health centers.

Reaching out to groups of children where significant gaps in coverage exist. Factors such as language, literacy and cultural barriers may account for gaps in health coverage enrollment. Respondents should select one population on which to focus activity and explain the unique obstacles children who are members of the population face and how the grant activities will address these obstacles. Proposals may include plans for developing materials that are culturally competent and help alleviate these concerns. They may describe how they will implement specific strategies designed to reach the identified children and their families through trusted sources in the community and help them enroll and renew coverage for their children.

Establishing and conducting training programs to equip communities to help families understand the new application and enrollment system and to deliver effective assistance: There is an important need to ensure that community leaders, organizations and institutions are prepared to help families understand the changes made to the Florida KidCare application process and know how to answer key questions, allay concerns, encourage enrollment and refer families to individualized assistance, if needed. Proposals may focus on creating training programs that take a geographic approach (i.e. a county or city-wide program) and organizational approach (i.e. a program to train staff in all social services agencies or community health centers in the state) or a "targeted professionals" approach (i.e. to tailor training for all school social workers or visiting nurses). Training programs should be set up to provide ongoing assistance to trainees to keep them updated as programs evolve, to answer new questions as they surface, incorporate cultural competency, and to be able to refine training curricula and materials.

B. Funding

Proposal funding will be congruent upon the proposed focus areas, strategies outlined within the scope of work, and the number of uninsured children within the proposed service area.

Number of Uninsured	Potential Amount of Contract
10,500 - 18,000↑	\$25,000 - \$45,000
7,500 – 10,499	\$20,000 - \$30,000
5,000 – 7,500	\$15,000 - \$20,000
4,999↓	\$10,000 - \$15,000

Section Two A: Scope of Work for Focus Areas 1-3

A. Definitions:

1. “Applicant” means a parent or guardian of a child who has applied or may apply to receive medical services through the FKC program.
2. “Application Assistor’s Code” means a Grantee’s unique code provided by FHKC used to track online applications and other outreach activities.
3. “Certified Application Assistance Site” or “CAAS” means an organization that has undergone FKC training and agreed to assist families in completing the FKC application and report on activities.
4. “Enrollee” means an individual who meets FKC standards of eligibility and has been enrolled in the FKC program.
5. “FKC Application Assistor” means designated persons who provide application assistance on behalf of FHKC, all of whom have successfully completed required trainings prior to assisting applicants with applying for FKC. This assistance includes, but is not limited to helping families complete a new FKC application or renewal application, obtaining necessary documentation, answering general questions and ensuring submission of the application to FKC.
6. “Qualified FKC Application” means only applications completed with the assistance of a trained FKC Application Assistor and only includes new FKC applicants, renewing families, applications from families who previously applied for FKC but did not complete the enrollment process, and families who were previous enrolled in FKC but have been inactive for 6 months or more from application date.

B. Project Narrative

1. Statement of Area of Focus (described below)
2. Statement of Project Goal - Specify the goals for your proposed project, including the number of children that will be enrolled and the number that will be retained in Florida KidCare.
3. Description of Need - Describe the target population and provide demographic data on the number and/or rate of uninsured, as well as estimates of the number and/or percent of eligible children who are not enrolled in Florida KidCare and also identify barriers to enrollment and retention of target population or geographic area.
4. Outreach and Enrollment Plan- Describe the strategies that will be used to enroll and retain eligible children in Florida KidCare. All proposals should: Demonstrate the extent of the Respondent's knowledge of Florida KidCare eligibility criteria, clearly delineate goals that are measurable, and the ability to change and refine outreach, enrollment, and renewal strategies based on an ongoing self-assessment of the effectiveness of those strategies.
5. KOBC demonstrate established partnerships and collaborations that can be expanded:
 - Complete KOBC train the trainer to include application and renewal assistance education, HIPAA, as well as all reporting and documentation requirements.
 - Provide oversight and technical assistance to CAAS to help reach quarterly application and renewal assistance goals.
 - Recruit agreed upon local organizations to serve as CAAS each quarter.
 - Train each CAAS on application and renewal assistance education, HIPAA, as well as reporting and documentation requirements.
 - Negotiate the level of partnership with each CAAS in the form of a Memorandum of Agreement (MOA).
 - Monitor the FKC outreach efforts of each CAAS and provide technical assistance as needed.
 - Coordinate and compile monthly application assistance tracking reports from each CAAS.
 - Submit quarterly reports reflective of outreach conducted through KOBC.
 - Provide program updates to CAAS as needed.
 - Host quarterly outreach meetings with CAAS.
 - Provide FKC outreach materials (posters, brochures, applications, etc.) to each CAAS.
 - Participate in all conference calls and meetings as requested by FHKC or its designee.

6. Sample Scope of Work of CAAS-*Actual Scope of each CAAS may vary depending on the KOBC. The list below represents the minimum level of activity required.*
 - Identify potentially eligible applicants that are either a new FKC applicant, or one who has previously applied for FKC but did not complete the enrollment process, or who were previous enrolled in FKC but have been inactive for 6 months or more from application date.
 - Explain the FKC program and its benefits to potentially eligible families.
 - Educate interested families on the FKC application and renewal process, documentation requirements, and ultimately assist them with applying for or renewing FKC coverage.
 - Provide application follow-up such as contacting the family regarding application and renewal results and if needed, assist families with additional application follow-up.
 - Track and monitor electronic and paper application submissions.
 - Submit application tracking form to KOBC on a monthly basis.
 - Assist families with FKC renewal compliance.

C. Outreach Support Team Responsibilities

FHKC or its designee expects to provide KOBC with the following:

1. Training of KOBC staff on FKC eligibility, application assistance process, required documentation, and HIPAA requirements.
2. Identify potentially eligible applicants that are either a new FKC applicant, or one who has previously applied for FKC but did not complete the enrollment process, or who were previous enrolled in FKC but have been inactive for 6 months or more from application date.
3. Explain the FKC program and its benefits to potentially eligible families.
4. Educate interested families on the FKC application and renewal process, documentation requirements, and ultimately assist them with applying for or renewing FKC coverage.
5. Provide application follow-up such as contacting the family regarding application and renewal results and if needed, assist families with additional application follow-up.
6. Track and monitor electronic and paper application submissions.
7. Submit application tracking form to KOBC on a monthly basis.
8. Assist families with FKC renewal compliance.
9. Application assistance tracking reports.
10. Quarterly stipends and incentive payments based on performance.
11. Shipping allowance not to exceed \$250 per KOBC.
12. Mileage reimbursement up to a total of \$400 per KOBC.
13. Account technical assistance as needed.
14. Grantee reports on the following data:
 - The number of online applications received by application assistor code

- The account status if submitted on proper reporting form
- The number of applications received on a county basis
- Title XXI enrollment by county

Section Two B: Scope of Work for Focus Area 4

A. Definitions:

1. “Applicant” means a parent or guardian of a child who has applied or may apply to receive medical services through the FKC program.
2. “Application Assistor’s Code” means a Grantee’s unique code provided by FHKC used to track online applications and other outreach activities.
3. “Certified Application Assistance Site” means an organization that has undergone FKC training and agreed to assist families in completing the FKC application and report on activities.
4. “Enrollee” means an individual who meets FKC standards of eligibility and has been enrolled in the Program.
5. “FKC Application Assistor” means designated persons who provide application assistance on behalf of FHKC, all of whom have successfully completed required trainings prior to assisting applicants with applying for FKC. This assistance includes, but is not limited to helping families complete a new FKC application or renewal application, obtaining necessary documentation, answering general questions and ensuring submission of the application to FKC.
6. “Qualified FKC Application” means only applications completed with the assistance of a trained FKC Application Assistor and only includes new FKC applicants, renewing families, applications from families who previously applied for FKC but did not complete the enrollment process, and families who were previous enrolled in FKC but have been inactive for 6 months or more from application date.

B. Project Narrative

1. Statement of Area of Focus (described below)
2. Statement of Project Goal (5 points) - Specify the goals for your proposed project, including the number of children that will be enrolled and the number that will be retained in the program, if applicable. Specify other appropriate metrics, to include, metrics related to training activities, such as number of organizations and staff that will receive training.
3. Description of Need - Describe the target population and provide demographic data on the number and/or rate of uninsured, as well as estimates of the number and/or percent of eligible children who are not enrolled in Florida KidCare and identify barriers to enrollment and retention of target population or geographic area.

4. Outreach and Enrollment Plan - Describe the strategies that will be used to promote and conduct training programs for the target audience. All proposals should: Demonstrate the extent of the applicant's knowledge of Florida KidCare eligibility criteria, clearly delineate goals that are measurable, and demonstrate the ability to change and refine training strategies based on an ongoing self-assessment of the effectiveness of those strategies.

C. Deceptive Conduct

As an application assistor, deceptive conduct is a direct violation of the FHKC Contract. Examples of deceptive conduct include, but are not limited to:

1. Attempting to determine eligibility of an application or make any assurances regarding the eligibility of any application.
2. Accepting money or premium payment for applicants.
3. Making payments on behalf of a family.
4. Mailing applications or keeping and holding applications or bundling them together for mailing.
5. Coaching an applicant to include fraudulent information on an application to ensure coverage.
6. Offer or provide gifts, favors, or other inducement to potential applicants in exchange for applying.
7. Recommend one plan or provider over another.
8. Identify staff as employees of Florida Healthy Kids Corporation or FKC.
9. Divulge to any unauthorized person, any information obtained while assisting individuals with their applications.
10. Influence an applicant to separate their child from employer-based group health coverage.
11. Artificially dividing families for the purpose of submitting more than one completed application.
12. Provide inaccurate, misleading, or coercive oral or written information or materials.
13. Use any person who has not passed a criminal history check to perform any services under this Contract.

Any of the actions in this section may be grounds for immediate termination of Contract. It is the responsibility of the KOBC to ensure that all individuals performing under their project, even those performing on the Grantee's behalf understand these rules.

Section Three: Background on the Florida Healthy Kids Corporation

FHKC is a not for profit corporation that was created by the State of Florida in 1990 and given the mission of providing comprehensive health insurance coverage to school aged children. Healthy Kids has been facilitating quality health care coverage since 1992.

The FKC program was created by the 1998 Florida Legislature in response to the enactment of the Children's Health Insurance Program under the federal 1997 Balanced Budget Act. Components of the FKC Program include:

- ❖ Children's Medical Services Network
- ❖ Healthy Kids
- ❖ Medicaid for Children
- ❖ MediKids

For more information on the Florida Healthy Kids Corporation or the FKC Program, please visit www.healthykids.org and www.floridakidcare.org.

FHKC has funded statewide marketing efforts in prior years, including community partnerships, application assistance and school based projects in addition to mass media and social media promotion.

FKC marketing materials are available for order or download through FHKC.

Section Four: Proposal Contents

All proposals must be typed using Arial 12 font with 1 (one) inch margins and single spacing. Submissions may not exceed 10 (ten) pages. Proof of an organization's financial stability does not count towards the page limit. Pages should be labeled accordingly and numbered. Electronic submission is required.

Applications must be complete at the time of submission. The Respondent is responsible for ensuring that all elements of the proposal are provided in the format requested and are organized in a concise fashion. FHKC is not obligated to interpret any elements that are not clearly described.

An evaluation team will conduct a review of applications on an ongoing basis. During this process FHKC reserves the right to obtain clarification from Respondents regarding their submission.

At a minimum, the Respondent must provide the following information in this order utilizing the prescribed letter tabs:

A. Cover Page

A cover page on the organization's letterhead should preface the proposal that includes the following information:

- Respondent organization's legal name

- Contact name for Respondent and alternate if the Respondent is unavailable. The contact or alternate must be available to respond to inquiries during the grant review period
- Mailing address
- Street address, if different from mailing address
- County
- Phone for contact persons
- Fax number for contact persons
- E-Mail address for contact persons
- Organization website

B. Submission Checklist

A completed CGP Checklist must be submitted with proposal submission. See *Submission Checklist* in Attachment II.

C. Affirmation Statement

The Respondent must agree to adhere to all terms and conditions proposed under this CGP. This affirmation statement must be signed by an executive officer of the Respondent's organization. See *Sample Affirmation Statement* in Attachment III.

D. Organizational Background

Give a brief description of the organization or organizations submitting the proposal. A signed letter from the organization's Chief Executive or other administrative officer of the organization(s) indicating support for the submission is required.

Under this section, the Respondent must include an organizational chart and evidence that the organization is a qualified entity to participate under this CGP such as a copy of the organization's status as a 501(c)(3) entity.

E. Proposal Description

The Respondent should provide a clear, but concise, description of the proposed outreach efforts. The narrative must clearly show how planned activities, methods, or strategies facilitate the overall objective of enrolling and retaining children in the FKC program. The narrative should include a detailed description of the following elements:

1. Indicate counties to be covered under this CGP and include a description of each county.
2. Describe target population(s) and indicate any barriers to enrollment and retention for families and how your project plans to address those barriers.
3. Proposed staffing or personnel and responsibilities under the project.
4. Demonstrate the depth of knowledge of Medicaid for Children and FKC eligibility criteria.

5. Provide a brief overview of how the quarterly stipend will be used (staff, program promotion, or other).
6. Describe any additional project needs not covered under the project description.
7. Discuss how the project will sustain the proposed efforts beyond the grant funding period.
8. Indicate if your organization receives Medicaid or other grant funds for similar outreach efforts.
9. Challenges or expected barriers and how Respondent intends to overcome any issues. These should be thoroughly addressed for each plan element.
10. Any partners listed within the proposal must provide a letter of support, to be included in the proposal. These letters do not count toward the 10-page maximum
11. Respondent should also submit a detailed work plan. This work plan should incorporate plans for meeting the scope of work for the KOBC and CAAS. The work plan should also include of the following elements:
 - a. Number of one-on-one application to be completed per month.
 - b. Number of renewals to be completed per month.
 - c. Provide a timeline of key events, milestones, and activities with a start date no earlier than July 1, 2015 and end date of not later than June 30, 2016.
 - d. Marketing plans to inform families about your project.
 - e. Strategies and activities to reach targeted population.

Failure to meet the agreed upon objectives and performance measures or failure to show adequate progress towards these measurements may result in the forfeiture or reduction of the grant. The decision to withdraw grant approval, withhold a quarterly advance or to otherwise modify a grant award under this section is at the sole discretion of the FHKC.

F. Evaluation Plan

Applicants are required to report quality and outcome performance measures related to the nature of the specific proposal. The Respondent should indicate how they propose to evaluate the effectiveness of their project and the frequency of evaluation. Respondents should also include how this submission will meet the overall objective of the KOBC Project which is to increase FKC enrollment through growth and retention.

G. Financial Stability of Respondent

The most recently audited financial statements of the Respondent must be included in the response. If audited financial statements are not available, alternative documentation of financial stability, including assets, liabilities, income and expenses, may be submitted with the approval of FHKC.

All Respondents must agree to provide open access to any financial records related to this grant award, as determined by FHKC. Additional on-site reviews throughout the grant period may be conducted by FHKC or an entity under contract with FHKC as allowed for under the contract. A post-grant audit may also be conducted.

Additionally, the Respondent must also reflect any award received under this CGP in their financial statements and agree to provide FHKC with a copy of those statements within 180 days of the end of the Respondent's fiscal year or years, if such award occurs in more than one of the organization's fiscal years.

H. Proposed Contract

Each grantee organization will be required to execute FHKC's standard contract for services as included with the CGP and to conform to all the provisions contained therein. The standard FHKC Business Associate Agreement must also be executed in compliance with HIPAA. The final contract will be based on the sample contract included in this CGP. In addition, any contract executed in the award of grants under this CGP, will be tailored to the specific grant as awarded by FHKC. Any conflicts between the standard contract, this CGP and the Respondent's proposal will be resolved by FHKC and included in the final contract.

No revisions to the contract will be considered unless statutorily required.

Section Five: Reporting and Monitoring Requirements

Quarterly reports will be required. These reports will include details on quarterly progress towards:

1. Implemented activities and resources utilized toward the project's goals;
2. Achieved objectives and performance measures of this project; and,
3. Identified barriers encountered and on how such barriers might be addressed.

FHKC will establish a uniform reporting format for the quarterly reports and KOBCs will be required to utilize this format.

Reports will be due under the following schedule:

<u>Time Period Covered by Report:</u>	<u>Due By:</u>
Period One (July 1, 2015 - September 30, 2015)	October 15 th
Period Two (October 1, 2015 - December 31, 2015)	January 15 th
Period Three (January 1, 2016 - March 31, 2016)	April 15 th
Period Four (April 1, 2016 – June 30, 2016)	July 15 th
Final Report (Award Date – June 30, 2016)	August 15 th

Monthly application assistance reports will also be required to be submitted to FHKC by the 15th of each month.

Grantees will be subject to a site visit during the contract term to monitor project efforts and provide technical support.

Respondents should affirm their understanding of these reporting and monitoring requirements in its response to this CGP.

Section Six: Additional Terms and Conditions

In addition to the provisions already stated above, all Respondents, by submitting under this CGP, also agree to abide by the following terms and conditions:

A. Restrictions on Lobbying

State and federal law and FHKC's contract with the Agency for Health Care Administration prohibit the use of state funds, including funds awarded under this grant process and any accompanying matching funds, for utilization to lobby or advocate any positions or proposed legislation to either the federal, state or local executive or legislative branches during the grant period. KOBCs are responsible for ensuring compliance with these provisions and providing an accurate accounting upon request of FHKC to affirm such compliance.

Failure to adhere to these requirements shall result in the forfeiture of all grant funds awarded under this CGP at FHKC's sole discretion.

B. Identification and Association

Grantees receiving funds under this CGP may not identify themselves to any third party as a representative of the FKC program or the Florida Healthy Kids Corporation. Representatives of a Respondent/Grantee organization shall be identified as representatives only of the Respondent/Grantee.

Grantees must also agree to submit for prior approval any locally developed materials utilized or distributed as a result of activities funded through this grant. The FKC and Healthy Kids names and logos are trademarked identifications. Failure to seek such prior approval may result in the forfeiture of any or all grant funds awarded under this CGP at FHKC's sole discretion.

C. Immigration Reform and Control Act of 1986

The Immigration Reform and Control Act of 1986 prohibits employers from knowingly hiring illegal workers. Respondent/Grantees must employ individuals who may legally work in the United States – either U.S. Citizens or foreign citizens who are authorized to work in the United States. Respondent/Grantees should use the U.S. Department of Homeland Security's E-Verify Employment Eligibility System to verify the employment status of:

- All persons employed by Grantee, during the term of Contract, to perform employment duties within Florida; and,

- All persons (including subcontractors) such as CAAS assigned by Grantee to perform work pursuant to a Contract.

D. Mandatory Calls and Meeting

Grantees will be required to attend a mandatory outreach meeting in a location to be determined. Failure to send at least one representative to this meeting may result in the forfeiture or reduction of any grant award. Bi-monthly conference calls and webinar updates are also anticipated throughout the grant period. Participation is mandatory.

E. Payment for Adequate Progress

It is anticipated that funds shall be paid to each Grantee on a quarterly basis provided that the Grantee has timely filed all required reports and such reports have shown adequate progress towards the agreed upon objectives and expenditures. FHKC will reserve the right to withhold or modify any portion of the grant should the Grantee not meet these conditions. Payments are not made until progress reports have been approved by FHKC and an invoice has been received.

Payment Provisions:

1. FHKC, in its sole discretion, will issue quarterly or monthly payments after confirmation of outreach efforts from the previous reporting period.
2. In addition to the quarterly stipend, KOBC will receive a payment of \$10 for every FKC application that is completed after the contract commencement date and leads to the successful enrollment to an applicant under the age of 19 into either the MediKids, Healthy Kids, or the CMSN program or a payment of \$5 for every FKC application that is completed after the contract commencement date and leads to the successful enrollment to an applicant under the age of 19 into the Medicaid for Children program.

Payment is not made per person enrolled, but per account based on when the first enrollee is approved for coverage. For example, an account may have four children successfully enrolled in the MediKids program, you would receive a payment of \$10, not \$40.

- a) FHKC will only make payments to the Grantee Organization. The Grantee is responsible for negotiating payment and making payment to the CAAS.
- b) Any overpayment made to Grantee by FHKC will be recouped by FHKC, including withholding of future payments authorized under the Contract.

- c) In the event that more than one application is submitted for the same Applicant by different Grantees, the payment will be made to the Grantee organization with the earliest application date.

Section Seven: Proposal Process

A. Single Point of Contact

Respondents and their agents shall only contact the Issuing Officer regarding this CGP and the CGP process up to and including the final execution of the contract between the FHKC and the Grantee. If a Respondent or its agent contacts: 1) another employee of the FHKC, 2) a FHKC Board Member, including any ad hoc Board Member, or 3) a member of the evaluation team regarding this CGP, the Respondent's proposal may be disqualified at the FHKC's sole discretion.

B. Question and Answers

After posting of this CGP on the Healthy Kids' website, interested parties may submit questions regarding the CGP to the Issuing Officer listed below in the same manner as provided for proposal submissions. Only those questions received in writing will be answered.

Any information, explanations, instructions or responses received by interested parties verbally or through other representatives given before the release of this CGP will not be binding on FHKC and prospective grantees should not rely on such information. This CGP contains the entire proposal unless formally amended by FHKC.

Responses will be provided, as reasonably appropriate, to any written questions that had been received in the prior week. New questions and answers will be posted every Friday afternoon on the Florida Healthy Kids Corporation website.

C. Proposal Format

To be considered, all grant proposals must be organized in the manner prescribed under Section Four: Proposal Contents.

D. Submission Instructions

All proposals must be submitted electronically utilizing Word and EXCEL to the Issuing Officer listed below. Documents that require a signature may be scanned and submitted utilizing Adobe Acrobat. Proposals received by **2:00 p.m. (Eastern) on Friday, June 19, 2015** will be accepted for consideration for a contract July 1, 2015.

Issuing Officer:

Amber Floyd
Chief Administrative Officer

E-Mail (WORD/EXCEL formats):

(850) 701-6166
floyda@healthykids.org

Section Eight: Review Process

All proposals will be reviewed to determine if the proposal meets the requirements for further consideration and if it furthers the overall objectives of the CGP. Those requirements include the following components:

- ✓ Completed Cover Page
- ✓ Evidence that Respondent is a qualified entity to participate in CGP
- ✓ Attestations to all terms and conditions of the CGP
- ✓ Adequate response provided to each required element under Section Four
- ✓ Robust and relevant work plan and proposal to achieve objectives

After that review, proposals will be evaluated based on whether or not the proposed activities meet the stated objectives, are within the funding guidelines, and have been sufficiently supported to achieve the desired goal of increased enrollment in the FKC Program. Grants will be awarded at the discretion of FHKC; therefore, approval and funding levels are not guaranteed.

The FHKC reserves the right to ask any Respondent to provide additional information or clarification regarding its proposal. Respondents may also be invited to participate in an oral presentation or personal interview regarding their submission at the sole discretion of FHKC. It is the Respondent's responsibility to reply to such requests on a timely basis in order to continue in the evaluation process. The cost for any such interview or presentation shall be borne by the Respondent.

Proposals will be reviewed by an evaluation team established by the FHKC.

The contents of the proposals received, the evaluation tool and any documents related to this process will be available for review only after the final award of any grants under this CGP.

Special Note

The Florida Healthy Kids Corporation is a private, not-for-profit corporation and not subject to the bid requirements of the State of Florida. FHKC may elect to consider or reject any or all responses. Your submitted proposal in response to this CGP indicates your agreement to this statement.

Attachment I: Tentative Calendar of Events

Kids Oughta Be Covered: Call for Grant Proposals

June 1, 2015:	Announce Updated Kids Oughta Be Covered Projects Call for Grant Proposals - Post CGP on Healthy Kids website: www.healthykids.org
June 19, 2015	Due date for proposals for July 1 st consideration
June 22-24, 2015	Review of proposals
June 26, 2015	Announcement of Grantees
June 29, 2015	Contracts sent for execution
July 1, 2015	Contract start date
July 10, 2015	Executed contracts due

These dates are tentative and are subject to change

Attachment II: CGP Submission Checklist
Tab B

This form should be printed, completed, and included with your proposal submission as Tab B. Check each applicable statement:

- I certify that all elements of this proposal are completed as requested and have been organized and tabbed accordingly:
 - A. Cover Page
 - B. Submission Checklist
 - C. Affirmation Statement
 - D. Organizational Background
 - E. Proposal Description
 - F. Evaluation Plan
 - G. Financial Stability of Respondent
- I have included a copy of my organization's Commercial General Liability insurance certificate.
- I have included a copy of my organization's 501(c) (3) certificate, if applicable.

By my signature, I certify that the checked statements above are included in _____ (Organization's Name) proposal submission.

I also attest the statements contained in this Application are true and complete to the best of my knowledge.

Submitted By:

Date:

(Signature Above)

Name: _____

Title: _____

Attachment III: Sample Affirmation Statement

Affirmation that Respondent agrees to adhere to all terms and conditions proposed under this CGP. This attestation must be signed by an executive officer of the Respondent's organization.

ORGANIZATION LETTERHEAD
ADDRESS
PHONE
FAX
EMAIL:

Date

Florida Healthy Kids Corporation
ATTN: Amber Floyd
661 E. Jefferson Street, 2nd Floor
Tallahassee, Florida 32301

I (Name), Executive Officer (Title) for ORGANIZATION NAME, hereby attest that ORGANIZATION NAME agrees to abide by all of the terms and conditions included in the Call for Grant Proposals document issued by the Florida Healthy Kids Corporation on May 28, 2015.

This attestation includes agreement to the following terms and conditions as stated in the Call for Grant Proposals:

- A. Restrictions on Lobbying
- B. Identification and Association
- C. Immigration Reform and Control Act of 1986
- D. Mandatory Meetings
- E. Payment for Adequate Process

I understand that should ORGANIZATION NAME be awarded a grant under this process that failure of ORGANIZATION to adhere to these terms and conditions may result in forfeiture of the grant or the withholding of funds at FHKC's sole discretion.

Sincerely,

NAME
TITLE