

ADDENDUM #1
April 27, 2026

New York State Department of Health
Office of Health Insurance Programs and NY State of Health

Request for Applications (RFA)

Consumer Assistance for New York State of Health: Navigator Program

The following are official modifications, which are hereby incorporated into **RFA #20706, Consumer Assistance for New York State of Health: Navigator Program.**

Deleted language appears in strikethrough (“xxx”) and added language appears in red text. The information contained in this amendment prevails over the original RFA language. Applicants should review all documents in their entirety to ensure all amended language is incorporated into their applications.

1. The SFS bid event, **NAV2026**, did not include the ability for Governmental Entities to apply. **That has been corrected**, and an application is available in SFS if an organization is registered as a **Governmental Entity**, Not-For-Profit, or Tribal Organization in SFS.

Search Results

Event ID	Funding Agency	Grant Opportunity	Status	Eligibility
NAV2026	DOH01	RFA#20706: Consumer Assistance Navigator Program	Available	Governmental Entity, Not-For-Profit, Tribal Organization

2. **Section IV. E, How to File an Application**, of the RFA has the following change:

Applications will not be accepted via fax, ~~e-mail~~, paper copy or hand delivery.

3. **Section V.A, Application Format/Content**, of the RFA has been edited as follows:

Applicants are instructed to respond to each of the following statements and questions under “Program Specific Questions (PSQ)/Bid Factors” **in their Application Narrative**. Your responses comprise your application. Number/letter your narrative to correspond to each statement and question in the order presented below. When responding to the statements and questions, be mindful that Application reviewers may not be familiar with your agency and its services. Your answers should be specific, succinct, and responsive to the statements and questions as outlined. Please be aware that the value assigned to each section described below indicates the relative weight that will be given to each section of your Application when scoring your Application.

The Application Narrative should not exceed **thirty (30) single spaced pages** ~~twelve (12) double spaced pages~~, using a 11-point Arial font with one-inch margins on all

sides. Pages should be numbered consecutively. All Attachments should be labeled with the Attachment name and corresponding attachment number. The **thirty (30) twelve (12)** page limitation is specific to the Application Narrative and does not include all required Attachments. Please note there is a 2,000-character limit for each response/question unless specified in the question. Please submit only the requested information in the attachments and do not add attachments or information that are not requested. Any additional attachments or narrative exceeding the **thirty (30) single spaced twelve (12) double spaced** page limitation will not be scored or considered by reviewers. Failure to follow these guidelines could result in a deduction of up to ten (10) points. **The email attachment size limitation is 20mb**

4. Section I., Introduction, of the RFA has been edited as follows:

RFA Applicants may apply for more than one county/borough and may apply for any county/borough regardless of the grouping in Table 1. **Applicants may apply for more than one base and/or add-on county/borough. However, each county/borough requires its own application, as further described in Section V.C. Only one base award for each county/borough will be made based on highest score.**

5. Section III., Navigator Program Models, of the RFA has been edited as follows:

Grantees must have one ~~full-time program manager~~ dedicated program manager **equaling at least .50 full-time equivalent (FTE)** to the Navigator Program.

RFA # 20706 / SFS # NAV2026

**New York State Department of Health
Office of Health Insurance Programs and NY State of Health**

Request for Applications (RFA)

Consumer Assistance for New York State of Health: Navigator Program

KEY DATES

RFA Release Date:	March 26, 2026
Letter of Interest Due:	April 13, 2026 by 4:00 PM
Questions Due:	April 13, 2026 by 4:00 PM
Questions & Answers Published (on or about):	April 21, 2026
RFA Applications Due in SFS:	May 14, 2026 by 4:00 PM

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I. Introduction

The New York State Department of Health (herein referred to as the Department), Office of Health Insurance Programs, Division of Eligibility and Marketplace Integration, Bureau of Consumer Assistance and Training, announces the availability of \$32,000,000 annually for the Consumer Assistance for NY State of Health: Navigator Program (Program).

The Program provides in-person and telephone health insurance application and enrollment assistance which is culturally competent, linguistically appropriate and disability accessible. The Program is designed to reduce barriers in accessing insurance by providing in-person assistance in community-based locations frequented by target populations, at times that are convenient to potential health insurance enrollees, including evenings and weekends. Telephone application and enrollment assistance is also available at the convenience of the Applicant or enrollee. Navigators will also assist small businesses in enrolling in the Small Business Health Options Program (SHOP), allowing them to access tax credits.

As a result of this Request for Applications (RFA), approximately \$32,000,000 will be available per year for a period of five (5) years for the delivery of Navigator Program services. The goal is to have at least two Grantees providing Navigator Program services in every county in New York State, as well as funds for Federally Recognized Tribes and Urban Indian Organizations.

- Up to \$675,000 will be available per year, for a period of five (5) years to Federally Recognized Tribes in New York State as recognized by the Bureau of Indian Affairs and published in the federal register, 91 FR 4102. There are currently 575 Tribal Entities approved by the Bureau of Indian Affairs.
- In order to qualify as an Urban Indian Organizations, RFA applicants must attest to their compliance with the Indian Health Care Improvement Act. 25 U.S.C. 1603(29) (Attachment 5). An Urban Indian organization means a nonprofit corporation situated in an urban center governed by a board of directors of whom at least 51 percent are AI/AN, for establishing and administering an urban Indian health program and related activities described in Title V of the Indian Health Care Improvement Act.
- Up to approximately \$31,325,000 will be available per year, for a period of five (5) years, to Not-for-Profit Organizations. Approximately half of the available funds will be distributed in New York City and half available for Upstate and Long Island, based on county, consistent with the distribution of the uninsured population. Additional information regarding the funding methodology can be found in Section V.C.

The county breakout of available funds can be found in Table 1 below. RFA Applicants may apply for more than one county/borough and may apply for any county/borough regardless of the grouping in Table 1. **However, each county/borough requires its own application, as further described in Section V.C.** Note: The maximum base county award amount factors in the administrative functions that the agency must perform under the grant including vouchering, reporting and oversight of staff and/or subcontractors (if available) and their productivity. Award amounts per county/borough include factors such as population density and the number of uninsured individuals in the county/borough.

TABLE 1

** This Table 1 represents the maximum allowed award per base and per county add on for 12 months of program services.*

County/Borough <i>*minimum of 2 awards per County/Borough</i>	Maximum Award Per Base County/Borough Per Year*	Maximum Per County/Borough Add On*
Allegany, Cayuga, Chemung, Chenango, Cortland, Delaware, Genesee, Hamilton, Herkimer, Lewis, Livingston, Madison, Orleans, Otsego, Schoharie, Schuyler, Seneca, Steuben, Sullivan, Tioga, Wayne, Wyoming and Yates	\$233,522	\$93,408
Albany, Broome, Cattaraugus, Chautauqua, Clinton, Columbia, Essex, Franklin, Fulton, Greene, Jefferson, Montgomery, Niagara, Ontario, Oswego, Putnam, Saratoga, Schenectady, St. Lawrence, Tompkins, Warren, and Washington	\$291,902	\$93,408

Dutchess, Erie, Monroe, Oneida, Onondaga, Orange, Rensselaer, Rockland, Ulster and Westchester	\$408,633	\$93,408
Bronx, Kings, Queens, New York, Richmond, Nassau and Suffolk ¹	\$642,184	\$110,250

1 Due to the geographic proximity of Nassau and Suffolk counties, it is the expectation that an RFA applicant proposing to cover either Nassau or Suffolk County will have the capacity to serve consumers that live in the other county.

A. Background

NY State of Health is an integrated marketplace where individuals can shop for health insurance in a way that allows them to easily compare health plan options across benefits, services, price and quality, and receive financial assistance, if eligible. It also allows small businesses to enroll in the Small Business Marketplace, enabling them access to tax credits.

NY State of Health became operational on October 1, 2013, allowing potential health insurance enrollees to explore their health insurance options, find out if they are eligible for tax credits and other financial assistance and enroll in a health plan with coverage effective on January 1, 2014. Today, over seven (7) million individuals are enrolled in coverage through NY State of Health. Throughout this RFA, new and renewing health insurance enrollees are collectively referred to as “potential health insurance enrollees.”

The Affordable Care Act (ACA) requires the NY State of Health to operate a Navigator Program to assist New Yorkers in enrolling in health insurance. In accordance with 45 CFR 155.210(e), Grantees must be able to carry out the following duties:

1. Maintain expertise in eligibility, enrollment, and program specifications and conduct public education activities to raise awareness about NY State of Health.
2. Provide information and services in a fair, accurate and impartial manner. Such information must acknowledge other health programs.
3. Facilitate selection of a Qualified Health Plan (QHP) in NY State of Health or, when appropriate, a public health insurance program including Medicaid, the Essential Plan (EP) or the Child Health Plus (CHPlus) program.
4. Provide appropriate referrals for any health insurance enrollee with a grievance, complaint, or question regarding their health plan, coverage, or an eligibility

determination under such plan or coverage.

5. Provide information in a manner that is culturally and linguistically appropriate to the needs of the population of New York State, including individuals with limited English proficiency, and ensure accessibility and usability of Navigator tools and functions for individuals with disabilities in accordance with the American with Disabilities Act (ADA) and Section 504 of the Rehabilitation Act.

Currently, there are 41 Navigator agencies, employing over 428 navigators who speak 36 languages and American Sign Language (ASL). The list of current languages spoken by Navigator Agencies is found in **Attachment 1**. Languages provided should support the languages appropriate to the community being served. Enrollment services are offered at over 688 sites throughout the state and through 191 options for telephone appointments. Navigators are responsible for completion of nearly seven (7) percent of the applications submitted to NY State of Health. As of January 2025, Navigators are responsible for assisting in the completion of over 260,000 applications resulting in over 421,000 enrollments in NY State of Health.

The New York State Department of Health is committed to building on a foundation of health equity and adopted the following statement on health equity in 2024: Health equity means everyone has a fair and just opportunity to be healthy, where no one is limited in achieving optimal health because of who they are or where they live. For more information on Health Equity, please see **Attachment 2**.

Attachment 3 provides a glossary of terms used throughout this RFA.

Attachment 4, State Health Access Data Assistance Center Uninsurance Rates for New York in 2022 and 2023, includes demographic information on the population that is currently uninsured by county.

II. Who May Apply

A. Minimum Eligibility Criteria

The minimum eligibility requirements for entities responding to this RFA are consistent with federal regulations governing Navigators found at ([45 CFR 155.210](#)).

- RFA Applicants must attest to the governing Navigator federal regulations by completing **Attachment 5** and include this in their pdf application submission.
- RFA Applicants must be prequalified in the Statewide Financial System (SFS), if not exempt, on the date and time Applications in response to this RFA are due as specified in the “Key Dates” set forth on the Cover Page of this RFA.

- RFA Applicants must be a Federally recognized Tribe/Urban Indian organization **or** a not-for-profit organization authorized to do business in New York State. See below for the specific types of aforementioned organizations eligible to apply.
- RFA Applicants must submit an application in SFS **AND** email a single pdf application with all requirements from Section V.A by the date and time Applications in response to this RFA are due as specified in the “Key Dates” set forth on the Cover Page of this RFA.

The pdf application must be sent to OHIPgrants@health.ny.gov. Subject line of the email should be as follows: RFA 20706 application for XXXXX County/Borough (Add the county/borough being applied for). Only one (1) email with the single pdf application is allowed per submission.

Types of Organizations Eligible to Apply as a Lead Agency (Subcontractors included on Grantee contracts are also subject to these types):

The following types of **not-for-profit entities** are eligible to apply for this RFA

- 1) Community and consumer-focused non-profit organizations. In order to qualify as a “community and consumer-focused non-profit” as described in 45 CFR 155.210(c)(2)(i),
- 2) Trade, industry, or professional associations.
- 3) Commercial fishing industry organizations, ranching and farming organizations.
- 4) Chambers of commerce.
- 5) Unions.
- 6) Resource partners of the Small Business Administration.
- 7) Licensed agents and brokers that do not receive direct or indirect consideration from health insurers for enrolling individuals, small businesses, or small business employees in health plans or supplementary plans.
- 8) Other not-for-profit public or private entities that meet the requirements of Section II (A) of this RFA. Other not-for-profit entities may include but are not limited to Indian tribes, tribal organizations, urban Indian organizations, and State or local human service contractors
- 9) Health care providers who meet ALL the following criteria are deemed eligible to apply:
 - The provider must have experience serving the uninsured or underinsured.

- The provider must agree to offer Navigator Program services to individuals, beyond the provider's patient base and must attest to that in Attachment 5; **and**
- The provider must agree to offer Navigator Program services in offsite locations in the community and may not only offer Navigator services at sites where clinical services are offered and must attest to that in Attachment 5.

The following types of **Federally Recognized Tribes/Urban Indian Organizations** are eligible to apply for this RFA:

- In order to qualify as a Federally Recognized Tribe, RFA applicants are instructed to identify their status in Attachment 5 in their proposal response that they are recognized as such by the Bureau of Indian Affairs and published in the Federal Register, 91 FR 4102. There are currently 575 Tribal Entities recognized by the Federal Bureau of Indian Affairs.
- In order to qualify as an Urban Indian Organization, RFA Applicants are instructed to identify their status in Attachment 5 for their compliance with the Indian Health Care Improvement Act. 25 U.S.C. 1603(29). An urban Indian organization means a nonprofit corporate body situated in an urban center governed by a board of directors of whom at least 51 percent are American Indian/Alaskan Natives, for establishing and administering an urban Indian health program and related activities.

A federally recognized tribe or Urban Indian organization are instructed to identify what county/counties or borough(s) they propose to serve.

Local Departments of Social Service (LDSS) are not eligible to apply to be Grantees through this RFA. Instead, LDSSs may provide in-person assistance to the Modified Adjusted Gross Income (MAGI) population as part of the State assumption of Medicaid administrative functions.

III. Project Narrative/Work Plan Outcomes

Organizational Capacity:

Grantees are required to carry out the duties set forth in 45 CFR 155.210(e) and listed in Section III of this RFA.

Grantees are required to help individuals apply for and renew health insurance coverage through NY State of Health. Grantees must also assist small employers in applying under the SHOP Exchange and educate them about the availability of federal tax credits.

Grantees may not opt to only apply to serve individuals in the Individual Exchange or to only serve small businesses in the SHOP Exchange.

- Grantees must be able to provide Navigator Program services in person and by telephone, within New York State, and only to residents of New York State. Call centers and other forms of telephone or web-based assistance will not be funded through this RFA.
- Grantees must have sufficient infrastructure to facilitate online submission of enrollment applications including computers and internet access to facilitate online enrollment; scanners to assist potential health insurance enrollees to scan and upload copies of documents to NY State of Health’s online web portal; and printers. Except in rare instances, all enrollment applications assisted through the Navigator program will be electronically submitted through NY State of Health’s online web portal. This infrastructure can be funded through the approved budget of the grant upon execution.
- Grantees must be able to commence activities funded through this RFA no later than 30 days from the date that contracts resulting from this RFA are approved by the Office of the State Comptroller (OSC).

Navigator Program Models

Navigator grant awards will be made to individual organizations who submit a proposal to serve one or more counties or to organizations that choose to serve as a lead agency (Grantee) with one or more subcontractor organizations.

- Grantees must have one full time program manager dedicated to the Navigator Program.
- Grantees which include subcontractors must have one dedicated staff member for oversight of every six subcontractor agencies.
- All Grantee subcontractors must have navigator staff equaling at least one full time equivalent (FTE) dedicated to direct enrollment services for the navigator program.

The Department encourages RFA Applicants to submit proposals that demonstrate a collaborative approach that leverages community relationships and a strong local presence in the community as this model has shown improvements in both program quality and administrative efficiencies.

An Applicant may subcontract components of the Work Plan to be performed by Applicant pursuant to the terms of its application. If known, the Applicant is expected to state in their application the specific components to be performed through subcontracts as well as the

names of the subcontractors. Grantees will need to name subcontractors prior to reimbursement. Applicants should note that the lead organization (the successful Applicant, as Contractor). will have overall responsibility for all Contract activities, including those performed by subcontractors, and will be the primary contact for the Department. All subcontractors and subcontracts will be required to be approved by the Department.

Grantees awarded as the lead organization may not serve as a subcontractor under a different grantee.

These grant funds are being made available to fund the following Navigator Program services, which are summarized below:

- Provide in-person and telephone health insurance application and enrollment services to potential health insurance enrollees by using the on-line application through NY State of Health, New York's Health Plan Marketplace.
 - Application and enrollment assistance may be provided by phone as allowed by federal and state guidelines, to facilitate enrollment through NY State of Health.
- Educate potential health insurance enrollees about NY State of Health and the types of health insurance programs offered through NY State of Health.
- Provide education on and facilitate enrollment into Qualified Health Plans (QHPs) with or without Advanced Premium Tax Credits (APTC) or Cost Sharing Reductions (CSRs), Public Health Insurance Programs including Medicaid, Essential Plan (EP) and Child Health Plus (CHPlus) and/or any successor programs to those supported by the Patient Protection and Affordability Act (ACA) or other federal legislation that may be created by new federal or state legislation, before or during the length of these contracts.
- Provide enrollment assistance to health insurance enrollees renewing their health insurance coverage. Please note, certain applicants will be required to renew their coverage twice per year based on [H.R.1](#). It is anticipated that an indicator will be included on the assistor dashboard to identify individuals subject to six-month renewal and community engagement requirements.
- Assist health insurance enrollees or potential health insurance enrollees with issues or questions regarding their health coverage or an eligibility determination related to their coverage.
- Provide information in a fair and impartial manner which is culturally and linguistically appropriate and accessible for persons with disabilities, for the populations being served, including individuals with limited English proficiency.

- Provide education and assistance to individuals subject to Community Engagement (CE) Requirements under H.R.1. The community engagement requirements under H.R.1 which are effective January 1, 2027 require that Medicaid applicants and enrollees aged 19-64 engage in work, education or community services activities to maintain their Medicaid eligibility. This includes a combination of 80 hours of work, education or community service activities in the month prior to application for new applicants and 80 hours in one of the previous six months at renewal. Navigators will educate applicants and individuals renewing their coverage about exceptions and exclusions from these requirements, assist with the application/renewal process including how an individual can meet the requirements and uploading documentation to the individual's account to demonstrate compliance, if necessary. Navigator agencies are expected to form relationships with agencies in the community where individuals are able to volunteer or participate in educational programs and helping applicants and enrollees in demonstrating compliance with these requirements. In addition, navigators will direct applicants/enrollees towards potential employment opportunities or other appropriate community engagement activities.

Grantees must provide the Navigator Program services set forth in this Section of the RFA as follows:

A. Provide In-Person Assistance (IPA)

- Provide efficient and cost effective, education and in-person enrollment assistance services to potential health insurance enrollees. Additional information regarding budget constraints is provided in Section V (A) (14) of this RFA.
- Place Navigator staff at enrollment sites that are accessible and convenient to the population being served. Sites should include a range of locations that attract as many potential health insurance enrollees as possible. Navigators should be designated to target vulnerable and hard-to-reach populations. Historically, popular enrollment sites include libraries, clinics, community-based organizations, faith-based organizations and hospitals. Grantees must be available to staff events organized by NY State of Health.
- Provide telephone assistance to potential applicants and renewals or life-status changes for enrollees.
- Ensure the availability of Navigator staff, both in person and by telephone, during non-traditional hours such as early mornings, evenings and weekends. RFA Applicants will be expected to demonstrate knowledge of the patterns in the community to determine the best hours of operation and location of enrollment sites in their application. For example, in some communities, early morning hours may be more appropriate than evening hours or Sunday hours as opposed to

Saturday hours.

- Ensure that Navigator staff are culturally and linguistically representative of the populations being served. Currently, Navigators offer services in 36 languages and American Sign Language (ASL) and provide access to telephone-based translation services, including Telephone Typewriter (TTY) for the hearing impaired.
- Provide program enrollment services to all potential health insurance enrollees in the service area, not only to their current client base. For example, a provider-based applicant must provide application assistance services to the entire community, not just those in their practice.
- Grantees are expected to provide Navigator program services to Native American Tribe(s) or the entire geographic area they are awarded to serve, even if the individual is of a different cultural background than the Grantee generally serves.
- Upon request by a health insurance applicant, Grantees must provide a printed copy of the completed enrollment application and proof of enrollment (enrollment notice). Navigator Agencies are not expected to provide printed copies of these documents to all potential health insurance enrollees.

B. Provide Education to Potential Health Insurance Enrollees about NY State of Health

- Educate potential health insurance enrollees about the types of health insurance programs offered through NY State of Health.
- Educate potential health insurance enrollees about different forms of out-of-pocket expenses including premiums, co-payments, deductibles and other cost sharing.
- Educate small businesses/employers about affordable health insurance coverage available to employees through NY State of Health, including the availability of the Small Business Health Care Tax Credit. NY State of Health is the only place where employers can take advantage of this tax credit.

C. Provide Education to Potential Health Insurance Enrollees on the Health Insurance Programs and Health Plans Available to Them

- Inform potential health insurance enrollees about tools available through NY State of Health's online web portal to aid in selecting a health plan, including:
 - Filters to narrow plan choice;
 - Quality ratings for health plans; and

- Health plan provider networks through the NYS Provider and Health Plan Look Up Tool.
- For individuals applying for financial or non-financial assistance and found eligible for a QHP or a public health insurance program:
 - Inform health insurance applicants eligible for a QHP with financial assistance that they will be required to reconcile the Advanced Premium Tax Credit (APTC) they apply to reduce premium payments throughout the year when they file their annual federal tax return.
 - Inform health insurance applicants that eligibility for all programs must be re-determined annually, or in the case of the ACA Medicaid Expansion group, every six-months.
 - Counsel all health insurance applicants eligible to participate in a managed care plan regarding the selection of a participating health plan, the important role of a primary care provider (PCP) and the benefits of preventive health care.
 - Educate eligible health insurance applicants about managed care and how to access benefits in a managed care environment. This includes the distribution of the Department approved materials describing the opportunities for financial assistance through the public health insurance programs and the direct purchase of QHPs.
- Advise small businesses/employees in becoming certified to purchase SHOP-certified products and educate small businesses about federal tax credits available through NY State of Health.
- Agree to operate as neutral parties in the health plan selection process to assure that each potential health insurance enrollee is allowed to make an informed decision.
- Distribute New York State's health insurance information materials in English and languages appropriate to the consumer. These include brochures and information developed by the Department to explain health insurance coverage options available through Medicaid, CHPlus, EP and QHPs (including APTC and Cost Sharing Reductions (CSRs) and direct purchase) and additional topics related to NY State of Health.

D. Assist with the Appropriate Health Insurance Enrollment Applications

- In the individual market, Navigators will provide individuals with assistance in completing the eligibility application for public health insurance programs and in directly purchasing a QHP (and, if applicable, a supplemental plan) online. In all, except for rare instances which would be handled on a case-by-case basis,

enrollment applications must be completed and submitted through NY State of Health's on-line web portal.

- Navigators will instruct individuals regarding the types of documentation that is needed to fully support the application and determine full eligibility including income and citizenship documentation. Navigators will upload such documentation to the individual's account so a full eligibility determination can be made. In some cases, such as identity proofing documentation or in instances where it is more convenient for the applicant/enrollee to submit documents on their own, documents may be uploaded through a mobile application.
- Navigators will provide APTC eligible individuals with assistance in making decisions about how much of the tax credit to apply to their QHP purchase. Navigator staff will assist individuals in understanding the opportunity for CSR benefits.
- Navigators will assist small business employers in becoming certified to purchase SHOP-certified products. Navigator staff will also educate small businesses about federal tax credits available through NY State of Health.

E. Provide Assistance at Renewal and in Making Mid-Year Life Status Changes

- For individuals enrolled in NY State of Health either in a public health insurance program or a QHP, provide assistance renewing coverage.
- The ACA requires that NY State of Health first conduct an administrative renewal, using federal and state data sources to determine continued eligibility, prior to sending a renewal notice to the health insurance enrollee. If the individual agrees with the administrative renewal determination, no assistance from the Navigator is needed. New York State has taken many steps to increase the numbers of individuals, particularly during the public health emergency unwind, who are able to administratively renew their coverage. The administrative renewal rate fluctuates between 40 and 70%.
- Assist health insurance enrollees in renewing their Medicaid, EP and CHPlus coverage. Renewals for these programs occur throughout the year on a monthly basis, depending on when the individual originally enrolled.
- Assist health insurance enrollees with mid-year life status changes including making changes to their income, adding or removing dependents, changing their address or changing health plans.
- Please note, some individuals will be required to renew their coverage twice a year based on new requirements under H.R. 1. An indicator will be available on the

assistor dashboard to show who is subject to this requirement.

F. Educate and Assist Individuals in Meeting Community Engagement Requirements (CE) under H.R. 1

- Educate Applicants and individuals renewing their coverage if they are subject to CE requirements. The community engagement requirements under H.R.1 which are effective January 1, 2027 require that Medicaid enrollees aged 19-64 must engage in work, education or community services activities to maintain their Medicaid eligibility for a combined 80 hours in the month prior to application for new applicants and 80 hours in one of the previous six months at renewal.
- Educate applicants and enrollees regarding exemptions and exclusions from community engagement requirements. Exclusions include but are not limited to an individual in the former foster care eligibility group, American Indians/Alaskan Natives, a parent, guardian or caretaker of a dependent child under 13 or a disabled individual, a veteran with a total disability, medically frail individuals, individuals participating in a qualifying substance use treatment program or who has a disabling mental disorder.
- Establish relationships with organizations in the community where an individual can engage in volunteer activities or educational programs to help meet the 80 hours of CE for the month prior to application if newly applying or in one month of a six-month period at renewal. This includes producing a monthly directory of volunteer sites specific to the community being served. This directory will be compiled by submissions from navigator agencies across the state and will be posted on the NY State of Health website. Navigators will use these relationships and resources to refer an applicant/enrollee who does not have enough hours to meet the requirement. In addition, Navigators will direct applicants/enrollees towards potential employment opportunities or other appropriate community engagement activities.
- Assist individuals in providing/uploading documentation needed to demonstrate compliance with community engagement requirements.

G. Provide Additional Information as Required by the Department

- Provide information to individuals applying for Medicaid coverage with information regarding how to obtain informational booklets LDSS-4148A, LDSS-4148B, and LDSS-4148C (also referred to as Books 1, 2 and 3) which can be found at <https://otda.ny.gov/programs/applications/>.
- Verbally inform each public program eligible household containing an individual under the age of 21 or a pregnant woman about the availability of services under the Child/Teen Health Program.

- Provide information on other State health insurance programs, for which individuals may be eligible such as the Cancer Services Program or the Family Planning Benefit Program.
- Distribute additional materials as instructed by the Department.
- Provide individuals with general counseling on the potential for Medicaid spenddown, when appropriate. In specific rare circumstances, such as an individual who needs long-term care services, a QHP may not be the best option. Navigators must understand when to counsel an individual about the spenddown program and to refer the individual and their enrollment application materials to the LDSS for a Medicaid eligibility determination.
- Advise adults who are found Medicaid eligible on the need to pursue available support, including an overview of current child support enforcement policies and pursuit of medical support from non-custodial parents, when appropriate. This includes: determining when Title IV of the Social Security Act, Section IV. D. requirements apply, determining the initial willingness of the individual to cooperate and implications regarding cooperation, and determining whether the individual is claiming “good cause” for not pursuing support. The Navigator will determine whether the individual is willing to cooperate in pursuing medical support available from an absent parent or spouse. While eligibility for children is not affected by compliance with Section IV-D requirements, adults who fail to cooperate with child support enforcement requirements, absent good cause, will not be eligible for Medicaid.
- Provide referral to the LDSS or the Medicaid Eligibility Client Management (MECM) System, publicly branded as NY State of Health , for potential health insurance enrollees who are aged, certified blind or certified disabled. The Navigator will provide the potential health insurance enrollee with information about the potential benefit of a full Medicaid assessment by the LDSS or MECM. The Navigator must explain to the individual that they have the right to enroll in a QHP, if he/she chooses, while they pursue a Medicaid eligibility determination on the basis of a disability. Navigators may be crosstrained in the MECM system.
- Provide general guidance on an individual’s need to pursue other sources of income prior to applying for Medicaid. Individuals who appear eligible for certain benefits, such as Medicare, unemployment insurance or worker’s compensation, and have not applied for these potential sources of income, are required to provide evidence that they are pursuing such financial supports or will be found ineligible.
- Grantees must respond timely to correspondence from the Department requests regarding eligibility and enrollment support.

H. Comply with Certification Requirements, Provide Technical Assistance and Ongoing Training

- Assure that all applicable Navigator and subcontractor staff is certified prior to providing Navigator program services.
- Assure that certified Navigators and subcontractor staff establish their assistor accounts on the NY State of Health Marketplace within thirty days of successful training completion.
- Once an individual Navigator becomes certified, they must establish an account through NY State of Health. As part of this process, the Navigator is identity proofed and then be given access to NY State of Health's assistor portal and assistor dashboard. Navigators are given a unique identifier which tracks all applications that are assisted by that specific navigator.
 - Consumers may authorize a Navigator to assist them in completing their application. Once a Navigator is authorized to access a person's account, they can view and manage the account through their dashboard.
 - The dashboard enables Navigators to manage their entire caseload. For example, Navigators can view all their consumers' accounts on the "My Clients" tab, view any accounts that require action on the "Overview" page and can review the individuals who are due to renew their coverage, need to submit documentation or need to select a health plan.
 - Navigator supervisors may also be granted the Assistor Oversight Manager (AOM) role to track applications among the navigators under their supervision. The AOM can produce reports to track such applications across their navigators.
- Assure that all applicable Navigator and subcontractor staff participates in Department sponsored training programs.
- Attend any Department regularly scheduled sessions or meetings providing Program information, updates, ongoing training and technical support.
- Complete initial Department sponsored Assistor Certification Training Program. The online training is intended to provide the program information necessary for an Assistor to help individuals and families applying for New York's health insurance programs through NY State of Health, The Official Health Plan Marketplace. The initial certification training program includes the following topics:
 - I. Introduction to the Affordable Care Act (ACA) and Your Role
 - II. Privacy and Security
 - III. Understanding the NY State of Health
 - IV. Medicaid and Child Health Plus
 - V. Essential Plan

- VI. Qualified Health Plans
- VII. Federal Subsidies
- VIII. Assistor Role and Requirements
- IX. Communication
- X. Cultural Competency
- XI. Identity Proofing
- XII. Household Size
- XIII. Household Income
- XIV. Additional Information and Eligibility Determination
- XV. Documentation Requirements
- XVI. The NY State of Health Individual Application
- XVII. Choosing a Health Plan
- XVIII. Complaints and Appeals
- XIX. Assistor Next Steps
- XX. Key Takeaways

This training will be updated to reflect provisions of H.R.1 including immigration eligibility changes, changes to retroactive Medicaid coverage policies, community engagement requirements and six-month renewals for the ACA expansion population.

- Assure Certified Navigators complete required annual recertification training to maintain their certification in NY State of Health. New York's recertification program consists of a series of webinars focusing on topics to help build on the knowledge and skills of Navigators. Some examples of past topics include Privacy and Security, Immigration, Self-Employment Income, Program Renewals and QHP and EP Options for the new plan year. These webinars are generally conducted between May and October each year and are archived for those who cannot participate the day the webinar is conducted. Webinars conducted in previous years can be found at: <http://info.nystateofhealth.ny.gov/SpringTraining>.
- Each Navigator Agency must designate at least one and up to six agency contacts and keep the program up to date as staff changes occur. These contacts must take the Assistor Agency Supervisor training and agree to the Agency Agreement. This training and agreement outline best practices for navigator agency supervisors. This training was posted to the NY State of Health website at: <https://info.nystateofhealth.ny.gov/news/assistor-agency-supervisor-training>.
- Navigator Agencies must designate at least one primary supervisor to have the added role of Assistor Oversight Manager. This added role allows managers to have oversight of enrollment activities of their assistors on NY State of Health which includes the ability to run reports and have a read-only view of their assistors' dashboards. These supervisors must certify and recertify annually. They must also complete the Assistor Oversight Manager training.

- Assure timely response recertification information requests from the Department. The Agency must confirm each assistor on the Department of Health Recertification Report.
 - Failure to complete the recertification requirements will result in loss of access to the assistor account. The assistor may be required to retake the initial certification training.
- Inform the Department of changes in a Navigator's employment status, either temporary or permanent, within 48 business hours of such change, by reporting changes in staffing to Assistor.Admin@health.ny.gov.
- Maintain accurate contact information with the Department by responding timely to requests from the Department for updated contact information at least annually, or upon request.

I. Comply with Department Monitoring Requirements

- Comply with Department monitoring activities, including unannounced site visits and audits.
- Comply with Department reporting requirements as found in Section IV.H.3 of this RFA.

J. Monitor the Productivity of Navigators

- Grantees shall monitor the productivity of its Navigators, including its subcontractor(s) Navigators as directed by the Department. The Department generates productivity reports using data from NY State of Health. The report also includes measures which compare navigator agencies with each other. A sample of this report is found in **Attachment 6** of this RFA. Grantees are expected to use this information, in addition to any information they collect from their Navigators and subcontractor(s), if any, to take steps to improve productivity of low performing Navigator staff, as well as its subcontractor(s), if any. If, after a few months of technical assistance and training, a Navigator fails to meet satisfactory productivity levels, the Grantee should make appropriate staff and/or subcontractor staff changes.
- If a subcontractor is defunded from the Program due to performance or for any other reason, the Grantee must develop and submit to the Department for prior approval, a plan to cover the service area and intended population in a timely manner. This may include adding a new subcontractor, providing additional funding to a current subcontractor or covering the area with new Grantee staff.

Grantees shall develop subcontracts that include provisions to enforce improved

productivity. The Navigator Agency is responsible for monitoring the performance of their subcontractors similar to how the Department monitors the Navigator Agency's performance. This includes actions such as meetings to discuss performance issues with the subcontractor agency, staff training/re-training, developing performance improvement plans, and termination if those efforts are not successful. The Department will not continue to reimburse Grantees for substandard performance.

K. Information Dissemination

- NY State of Health provides outreach material to Grantees such as brochures, fliers, rack cards, promotional materials and give away items.
- Navigators shall provide information and assist potential health insurance enrollees in locations approved by the Department. Enrollment services are prohibited in an emergency room. Navigators are also prohibited from telephone cold-calling, door-to-door solicitations at the homes of prospective health insurance enrollees and offering incentives of any kind to complete an application or enroll in coverage through NY State of Health.
- NY State of Health conducts broad based outreach activities on an ongoing basis. The Department will widely advertise available programs. NY State of Health anticipates enlisting Navigators to assist in outreach and enrollment campaigns as needed. NY State of Health also posts a calendar of events where Navigators and other assistors may post events they are attending.
- Any material developed by a Grantee must be reviewed and approved by the Department prior to use and must conform to Department and NY State of Health co-branding requirements.
- Prior approval must be obtained for all interactions with the media, including interviews, press releases and press conferences, regardless of who initiates the contact, the press agency, the Grantee or subcontractor.

L. Navigators Follow Department Appeal/Complaint Process

- NY State of Health has policies and procedures in place for potential health insurance enrollees to file appeals or complaints. Navigators are responsible for informing them of their appeal rights.
- Individual Marketplace appeal reasons:
 - Eligibility determinations and redeterminations (e.g., found eligible for QHP with an APTC and CSR, attestation supports Medicaid eligibility);
 - Level of APTC and/or CSR benefit;
 - A determination of affordable employer sponsored health insurance or other minimum essential health coverage;

- Denial of a special enrollment period;
 - Not recognized as member of a Federally Recognized Tribe which results in the denial of a special enrollment period or cost-sharing reduction; or,
 - Failure of the Marketplace to issue a timely notice of an eligibility determination.
 - Failure to demonstrate compliance with community engagement requirements.
- The Navigator will provide information regarding the right to file an appeal with health insurance applicants. Navigators are required to track and report on the number and type of appeals that are referred to the Department through the monthly progress report.

M. Maintain Confidentiality, Privacy, and Security Requirements

- When Navigators create, collect or use personally identifiable information (PII) to perform their obligations under the Program, they may only use or disclose such PII to the extent necessary to carry out such obligations.
- Grantees and their subcontractors and agents must establish and implement privacy and security standards for the creation, collection and use of PII that are the same as or are more stringent than that of the Exchange privacy and security requirements for PII detailed in 45 CFR 155.260. Such privacy and security standards must be consistent with the following principles and approved by the Department:
 - Potential health insurance enrollees should be provided with a simple and timely means to access and obtain their PII in a readable form and format.
 - Potential health insurance enrollees should be provided with a timely means to dispute the accuracy or integrity of their PII and to have erroneous information corrected or have their dispute documented if the request is denied.
 - There should be openness and transparency about policies, procedures, and technologies that directly affect potential health insurance enrollees and/or their PII.
 - Potential health insurance enrollees should be provided a reasonable opportunity and capability to make informed decisions about the collection, use, and disclosure of their PII.
 - PII should be created, collected, used, and/or disclosed only to the extent necessary to accomplish a specified purpose(s) under the Program and never used to discriminate.
 - Reasonable steps should be taken to ensure that PII is complete, accurate, and up to date to the extent necessary for the potential health insurance enrollee's intended purposes and has not been altered or destroyed in an unauthorized manner.

- PII should be protected with reasonable operational, administrative, technical, and physical safeguards to ensure its confidentiality, integrity, and availability and to prevent unauthorized or inappropriate access, use, or disclosure; and,
 - PII is only used by or disclosed to those authorized to receive or view it.
- The above listed principles should be implemented, and adherence assured, through appropriate monitoring and supervision of Grantee Navigator Program staff. Methods should be in place to report and mitigate non-adherence and breaches.
- To protect PII, Grantees must establish and implement operational, technical, administrative and physical safeguards that are consistent with any applicable laws to ensure:
 - The confidentiality, integrity, and availability of PII created, collected, used, and/or disclosed by Navigators.
 - PII is only used by or disclosed to those authorized to receive or view it.
 - Return information as defined by section 6103(b)(2) of the Code is kept confidential under section 6103 of the Code.
 - PII is protected against any reasonably anticipated threats or hazards to the confidentiality, integrity, and availability of such information.
 - PII is protected against any reasonably anticipated uses or disclosures of such information that are not permitted or required by law; and
 - PII is securely destroyed or disposed of in an appropriate and reasonable manner and in accordance with retention schedules.
- Grantees and their subcontractors and agents must monitor, periodically assess, and update the security controls and related system risks to ensure the continued effectiveness of those controls.
- Grantees and their subcontractors and agents must develop and utilize secure electronic interfaces when sharing PII electronically.
- Information obtained by Grantee Navigator Program staff, and subcontractors and agents in providing services under the Program may be shared with NY State of Health for the purpose of facilitating eligibility determinations into public health insurance programs, QHPs or other plans in NY State of Health provided that the potential health insurance enrollee consents, on the NY State of Health enrollment application, to the release of his or her personal, financial and any other information needed for eligibility and enrollment. Navigators shall not use or disclose financial information, social security numbers, other personally identifiable information or health information other than as needed to provide Navigator program services as part of the Navigator program. The Navigator shall use appropriate safeguards to prevent any other use or disclosure of such information

and shall report any other use or disclosure of such information to the Department. Navigators shall not maintain any records of financial information, social security numbers, other personally identifiable or health information of the health insurance enrollees/potential health insurance enrollees to whom they are providing assistance, other than as needed to provide Navigator program services as part of the Navigator program. Grantee Navigator Program Staff and subcontractors shall comply with any applicable laws governing the confidentiality of financial information, social security numbers, personally identifiable information and health information, including Medicaid data.

- To access NY State of Health’s online web portal, Navigator Agencies must have computers, laptops or tablets, which may be funded through the grant, that are connected to the Internet with the latest versions of one of the following browsers:
 - Internet Explorer.
 - Safari.
 - Google Chrome; or
 - Mozilla Firefox.

Browsers must support TLS 1.2 security standards or higher when establishing connections to NY State of Health. Any portable devices, including laptops, tablets and mobile devices that are used to provide NY State of Health enrollment assistance must utilize whole disk encryption and up to date anti-virus software. Whole disk encryption requires the Assistor organization to use software, such as BitLocker, to encrypt the hard drive of the device that it provides to individual Assistors. This converts data into an unreadable format if an encrypted device is lost or stolen, and the data on the hard drive is unreadable. To convert it back to an intelligible format, it needs to be unlocked with the secret key code.

If an RFA Applicant is awarded funding as a Grantee, the Grantee will be required to:

- Submit a completed and signed, “Certification Regarding Privacy and Security Requirements for Assistors” form, found in **Attachment 7** of this RFA.
- Maintain a file of completed, “Certification Regarding Privacy and Security Requirements for Assistors,” signed by each Navigator at the time of hire and submit copies to the Department.
- Ensure, upon termination of the Navigator Program Contract with the Department, that Program data reporting is complete and certify that any electronic or paper copies of confidential data collected in connection with the contract are destroyed.
- Comply with the Business Associate Agreement (BAA) pursuant to the Federal Health Insurance Portability and Accountability Act (HIPAA), which is Attachment H of the State of New York Contract for Grants and **Attachment 8** of this RFA. A

sample State of New York Contract for Grants can be found in the Forms Menu once an application to this funding opportunity is started or at the following link: https://grantsmanagement.ny.gov/system/files/documents/2025/01/mcg_tandc_january_2025.pdf. To the extent Grantees are facilitating enrollment in NY State of Health, Grantees shall comply with HIPAA as Business Associates. Note, Grantees utilizing subcontractors must have Business Associate Agreements in place prior to sharing any PII or Personal Health Information (PHI).

- The selected Grantee shall comply with all privacy and security policies and procedures of the Department (<https://its.ny.gov/policies>) and applicable state and federal law and administrative guidance with respect to the performance of this contract. The Grantee is required to execute a number of security and privacy agreements with the Department including but not limited to a Business Associate Agreement (Attachment H), a Data Use Agreement (DUA), and a Department System Security Plan (SSP) Control Workbooks which will be provided upon contract signing. The SSP is based on NIST 800-53 security and privacy controls and requires the Grantee complete the section for each control indicating how the control is met.
- The SSP Control workbooks are intended to provide Department information regarding the organization's system security plan, describing what controls have been implemented, along with details on how they have been implemented to assure the Department that the security controls are in place and operational.
- The Grantee is expected to provide secure and confidential storage and transmission for hard copy and electronically stored information. Under no circumstances will any records be released to any person, agency, or organization without specific written permission of the Department. The Grantee is obligated to ensure any Subcontractor hired by the Grantee who stores, processes, analyzes or transmits Medicaid Confidential Data (MCD) on behalf of the Grantee has the appropriate Security requirements in place. Grantees are required to include in all contracts and Business Associate Agreements with their Subcontractors language surrounding the security and privacy requirements as well as the language contained in the Confidentiality Language for Third Parties section of the DUA. If any breach or suspected breach of the data or confidentiality occurs, whether the breach occurred with the Grantee or Subcontractor, the Department must be notified immediately.
- Grantees must report any breaches of PII and/or PHI to NYSOHSecurity@health.ny.gov within 24 hours of the breach.

N. Transition

Should the services mentioned in this RFA need to be continued past the term of the contract and the Department procures for the future services, the following transition plan should be implemented:

- The transition represents a period when the Consumer Assistance for NY State of Health: Navigator Program, provided by the Grantee resulting from this RFA, must be turned over to the Department, another Departmental agency, or successor Grantee during or at the end of the contract period.
- The Grantee shall ensure that any transition to another Grantee be done in a way that provides the Department with uninterrupted services. This includes a complete and total transfer of all files, reports, and records necessary to perform such services.
- The Grantee will develop an organized work plan and timeline to ensure all current and future services during the transition period are addressed and completed. All parties involved should be notified of the transition and all changes required to ensure a seamless transition of services between Grantees.

The Grantee shall manage and maintain the appropriate number of staff to meet all requirements listed in the RFA during transition. All reporting and record requirements, security standards, and performance standards are still in effect during the transition period. Three (3) months prior to the end of the contract period, the Grantee will work with the Department and incumbent to ensure a complete, efficient, and successful transition.

IV. Administrative Requirements

A. Issuing Agency

This RFA is issued by the Department, Office of Health Insurance Programs, Division of Eligibility and Marketplace Integration, Bureau of Consumer Assistance and Training, and NY State of Health. The Department is responsible for the requirements specified herein and for the evaluation of all Applications (refer to Section V.C. Review and Award Process).

B. Question and Answer Phase

All substantive questions by Applicants with respect to any aspect of the RFA must be submitted in writing to Brian Loucks, New York State Department of Health, Division of Finance and Rate Setting, at the following email address: OHIPgrants@health.ny.gov. This includes Minority and Woman Owned Business Enterprise (MWBE) Requirements questions and related forms. Refer to Section IV.K. Minority and Woman-Owned Business Enterprise Requirements. Questions of a technical nature related to formatting or other minor details related to preparation of an Application may also be addressed in writing to the email address noted above. Questions are of a technical nature if they are limited to how to prepare your Application (e.g., formatting) rather than relating to the substance of the Application.

To the degree possible, each question submitted by a potential Applicant pursuant to the terms of this RFA should cite the RFA section and paragraph to which it refers. Written questions will be accepted until the date posted on the Cover Page of this RFA.

Some helpful links for questions of a technical nature are below. Questions regarding specific opportunities or Applications should be directed to the Department contact listed on the cover of this RFA.

- On-Demand Statewide Financial System Training Videos: On-demand training focused on using the new grants management features in SFS is available by logging in to the SFS Vendor Portal and clicking the SFS Coach icon available on the homepage. Additional questions? Contact the SFS Help Desk listed below:
- Statewide Financial System Technical Support Help Desk
Phone: 1-877-737-4185 toll-free / 518-457-7737
Hours: Monday thru Friday 8am to 8pm
Email: helpdesk@sfs.ny.gov

Prospective Applicants must submit all requests for clarifications of, or exceptions or changes to, the terms, conditions or provisions of this RFA or the State of New York Contract for Grants during the Question and Answer Phase, which will end on the “Questions Due” date specified on the Cover Page of this RFA. An Applicant must clearly indicate the clarification, exception or change in the RFA or the State of New York Contract for Grants the Applicant is requesting. All questions, answers, and requests for clarification, exception or change will be published by the Department at [SFS Public Portal Homepage](#) to ensure equal access and knowledge by all prospective Applicants, on or about the date specified on the Cover Page of this RFA.

This RFA has been posted on the NYS Statewide Financial System website at: [SFS Public Portal Homepage](#) and additionally, via a link provided on the Department's public website at: <https://www.health.ny.gov/funding/>.

Questions and answers, as well as any updates, addendums to, and/or other modifications of this RFA, will be posted on these websites. All such questions and answers, updates addendums to, and other modifications to this RFA will be posted by the date identified on the Cover Page of this RFA under “Key Dates”.

All Questions must be received by the date and time specified on the Cover Page of this RFA, under “Key Dates”, opposite the heading “Questions Due.”

All questions submitted by email should state the RFA Title and Number set forth on the Cover Page (RFA# 20706, Consumer Assistance for NY State of Health: Navigator Program) in the subject line of the email.

C. Letter of Interest

Prospective Applicants are strongly encouraged to complete and submit a non-binding letter of interest (refer to **Attachment 9**). Prospective Applicants who submit a Letter of Interest by the date specified on the Cover Page of this RFA may receive email notifications when updates to and modifications of this RFA are posted, including responses to written questions. Letters of Interest should be submitted to the contact person of the RFA cover page at **OHIPgrants@health.ny.gov**. Please ensure that the RFA number and title, “RFA 20706, Consumer Assistance for NY State of Health: Navigator Program,” is noted in the subject line and Letters of Interest are submitted by the date posted on the Cover Page of the RFA.

Submission of a Letter of Interest is not a requirement of this RFA, nor does the submission of a Letter of Interest by a prospective Applicant impose any obligation upon the Applicant to submit an Application in response to this RFA. An Application may be submitted without first having submitted a Letter of Interest.

D. Applicant Conference

An Applicant Conference will not be held for this project.

E. How to File an Application

Applications must be submitted online via the Statewide Financial System **AND** a pdf application submitted with all required information to OHIPgrants@health.ny.gov by the date and time posted on the Cover Page of this RFA under “Key Dates”. **Both submissions required to be completed or an application will not be reviewed.**

Reference materials and videos are available for Applicants to funding opportunities on the NYS Statewide Financial System. Please visit the Statewide Financial System website at the following web address: [SFS Public Portal Homepage](#) and click the “Search for Grant Opportunities” tile. There is also a more detailed “Statewide Financial System: Vendor User Guide” available in the documents section under Training & Guidance; For Grant Applicants located in SFS Coach. Training webinars are also provided by the Grants Management Team. Dates and times for webinar instruction can be located at the following web address: [Live Webinars | Grants Management \(ny.gov\)](#)

To submit an Application an Applicant must:

1. Log into the [Statewide Financial System Vendor Portal](#) .
2. Click the Grant Management Tile. Next, Click the Bid Event Search tile.
3. Enter the applicable search criteria in the Search Criteria Fields. Locate an opportunity; search by Funding Agency (DOH01) or enter the Grant Opportunity name into the Search by Grant Opportunity field: **NAV2026**. You can also filter search by Status such as

“available” which filters to include only the bid events that are published and open for potential bid response.

4. Click on “Search” button to initiate the search.
5. Click on Event ID link to initiate a bid response.
6. Please review the Grantee User Manual found in SFS Coach for additional steps on how to respond to various types of Bid Events.

Once the Application is complete, a prospective Applicant is **strongly encouraged** to submit their Application at least **48 hours prior to the** Application’s due date and time specified on the Cover Page of this RFA. This will allow sufficient opportunity for the Applicant to obtain assistance and take corrective action should there be a technical issue with the submission process. **Failure to leave adequate time to address issues identified during this process may jeopardize an Applicant’s ability to submit their Application.** SFS staff are available to answer an Applicant’s technical questions and provide technical assistance prior to the Application due date and time. Contact information for the SFS Help Desk is available under Section IV.B. Question and Answer Phase of this RFA.

PLEASE NOTE: Although the Department and SFS Help desk staff will do their best to address concerns that are identified less than 48 hours prior to the due date and time for the submission of an Application, there is no guarantee that they will be resolved in time for the Application to be submitted on time and, therefore, considered for funding.

During the Application process, please pay particular attention to the following:

- Not-for-profit Applicants must be prequalified, if not exempt, on the date and time Applications in response to this Request for Applications are due as specified in the “Key Dates” set forth on the Cover Page of this RFA. Be sure to maintain prequalification status between funding opportunities. **NOTE:** Three of a not-for-profit’s essential financial documents - the IRS990, its Financial Statement, and its Charities Bureau filing - expire on an annual basis. If these documents are allowed to expire, the not-for-profit’s prequalification status expires as well, and it will not be eligible for State grant funding until its documentation is updated and approved, and prequalified status is reinstated.
- Only individuals with the role of “Bid Response Submitter” can submit an Application on behalf of an Applicant.
- Prior to submission, the Statewide Financial System will automatically initiate a global error checking process to protect against an incomplete Application. An Applicant may need to attend to certain parts of the Application prior to being able to submit the Application successfully. An Applicant must be sure to allow time after pressing the submit button to clean up any global errors that may arise. (Vendor User Guide).
- Applicants should use numbers, letters, and underscores when naming their uploaded files. There cannot be any special characters in the uploaded file name. Also, be aware of the restriction on file size (20 MB) when uploading documents. Applicants should ensure that any attachments uploaded with their application are not “protected” or “pass-worded” documents.

The Applicant's Delegated Administrator is able to assign, modify, remove roles for the Applicant in SFS. Please see SFS Vendor Portal Access Reference Guide, [SFS Vendor Portal Access Reference Guide.pdf \(ny.gov\)](#), for additional information on roles. **Bid Response Initiator** and **Bid Response Submitter** are the **necessary roles for applying to a Bid Event in SFS**. If you are a not-for-profit you will also need Prequalification Processor for Prequalification purposes.

PLEASE NOTE: Waiting until the last several days to complete your Application online can be risky, as you may have technical questions or issues that will take time to resolve. Beginning the process of applying as soon as possible will produce the best results.

Applications will not be accepted via fax, e-mail, paper copy or hand delivery.

LATE APPLICATIONS WILL NOT BE ACCEPTED.

F. Department of Health's Reserved Rights

The Department of Health reserves the right to:

1. Reject any or all Applications received in response to this RFA.
2. Withdraw the RFA at any time, at the Department's sole discretion.
3. Make an award under the RFA in whole or in part.
4. Disqualify any Applicant whose conduct and/or Application fails to conform to the requirements of the RFA.
5. Seek clarifications and revisions of Applications, in the Department's sole discretion.
6. Use Application information obtained through site visits, management interviews, and the State's investigation of an Applicant's qualifications, experience, ability, or financial standing, and any material or information submitted by the Applicant in response to the Department's request for clarifying information in the course of evaluation and/or selection under the RFA.
7. Prior to Application opening, amend the RFA specifications to correct errors or oversights, or to supply additional information, as it becomes available.
8. Prior to Application opening, direct Applicants to submit proposal modifications addressing subsequent RFA amendments.
9. Change any of the scheduled dates.

10. Waive any requirements that are not material.
11. Award more than one contract resulting from this RFA.
12. Negotiate with successful Applicants within the scope of the RFA in the best interests of the State.
13. Conduct contract negotiations with the next responsible Applicant, should the Department be unsuccessful in negotiating with the selected Applicant.
14. Utilize any and all ideas submitted with the Applications received, at the Department's sole discretion.
15. Unless otherwise specified in the RFA, every offer in an Applicant's Application is firm and not revocable for a period of 60 days from the Application opening.
16. Waive or modify minor irregularities in Applications received after prior notification to the Applicant.
17. Require clarification at any time during the procurement process and/or require correction of arithmetic or other apparent errors for the purpose of assuring a full and complete understanding of an Applicant's Application and/or to determine an Applicant's compliance with the requirements of the RFA.
18. Eliminate any term of this RFA that can be complied with by none of the Applicants.
19. Award grants based on geographic or regional considerations to serve the best interests of the State.

G. Term of Contract

Any Contract resulting from this RFA will be effective only upon approval by the New York State Office of the Comptroller.

It is expected that contracts resulting from this RFA will have the following time period: February 1, 2027 through January 31, 2032.

Continued funding throughout this five-year period is contingent upon availability of funding and state budget appropriations and the Grantee's continued satisfactory performance of its obligations under the Contract. The Department also reserves the right to revise the award amount as necessary due to changes in the availability of funding.

A sample State of New York Contract for Grants can be found at:

https://grantsmanagement.ny.gov/system/files/documents/2025/01/mcg_tandc_january_2025.pdf

To view the following Department of Health specific State of New York Contract for Grants documents, follow the instructions in Section VI. Attachments.

- Attachment A-1, Agency Specific Terms and Conditions;
- Attachment A-2, Program Specific Terms and Conditions (if applicable);
- Attachment A-3, Federally Funded Terms and Conditions (if applicable);
- Business Associate Agreement (if applicable);
- Attachment M, Participation by Minority Group Members and Women with Respect to State Contracts: Requirements and Procedures

H. Payment and Reporting Requirements of Grant Awardee(s)

1. No advances will be allowed for contracts resulting from this procurement.
2. The Grantee will be required to submit invoices and required reports of expenditures based upon the terms for payment set forth in Attachment A-1 to its Grant Contract to the State's designated payment office (below) or, if requested by the Department, through the Statewide Financial System:

Consumer Assistance for NY State of Health: Navigator Program
New York State Department of Health
99 Washington Avenue, Room 1200
Albany, NY 12237
Navigator.admin@health.ny.gov

A Grantee must provide complete and accurate billing invoices in order to receive payment of the grant funding provided for under the terms of its Grant Contract. Invoices submitted to the Department must contain all information and supporting documentation required by the Contract, the Department, and the Office of the State Comptroller (OSC). Payment for invoices submitted by the Grantee shall only be rendered electronically unless payment by paper check is expressly authorized by the Commissioner of Health, in the Commissioner's sole discretion, due to extenuating circumstances. Such electronic payment shall be made in accordance with OSC's procedures and practices to authorize electronic payments. Authorization forms are available at OSC's website at: <http://www.osc.state.ny.us/epay/index.htm>, by email at: epayments@osc.state.ny.us or by telephone at 855-233-8363. Each Grantee acknowledges that it will not receive payment on any claims for reimbursement submitted under its Grant Contract if it does not comply with OSC's electronic payment procedures, except where the Commissioner has expressly authorized payment by paper check as set forth above.

Payment of claims for reimbursement by the State (Department) shall be made in accordance with Article XI-A of the New York State Finance Law. Payment terms will be:

Grantee will be reimbursed for actual expenses incurred as allowed in the Contract Budget and Workplan.

3. The Grantee will be required to submit the following reports to the Department at the address above or, if requested by the Department, through the Statewide Financial System:

Report	Frequency
Vouchers and related forms <ul style="list-style-type: none"> • Expenditure Report • Vendor Expense Report(s) • Subcontractor(s) 	Monthly, 30 days after end of reporting period
Progress Report	Monthly, 30 days after end of reporting period A voucher for respective month will not be processed without submission of a progress report for that period
Enrollment Site Schedule Report	Monthly, 15th day of the month for publishing the following month
Directory of Local Volunteer Opportunities	Monthly, 15th day of the month for publishing the following month
Budget Modification Request	30 days prior to the effective date of the proposed modifications
Equipment Inventory Report	Annually and when there is a change in status for any equipment purchased with grant funds
Navigator Status Change	Within 48 business hours of a staff change at the agency to assistor.admin@health.ny.gov
Contact Information Report	Annually and within 48 business hours of a change in status for any program contacts at the agency
Media and Marketing Request	With as much advance notice as possible to ensure adequate review and approval
Promotional Materials	Prior to purchasing and publishing items for approval of cobranding items

All payment and reporting requirements will be detailed in “Attachment D: Payment and Reporting Schedule”, of the final State of New York Contract for Grants.

I. Procurement Requirements

1. General Requirements

The Grantee may procure various goods and services in connection with the grant-funded project ranging from routinely purchased goods or services to those that involve substantive programmatic work. The procurement of such goods or services, however, must be conducted in an equitable and competitive manner to promote equal treatment, efficiency, and economy in grant-funded activities.

Any Grantee that is a state entity (i.e., a State agency or political subdivision of the State) must follow the same policies and procedures it uses for procurements from its general funds. All other Grantees (private companies, not-for-profit-organizations, etc.) must have a sufficient and documented procurement process that maintains records to detail the history of procurements associated with any awarded grant project. These records shall include, but are not limited to, rationale for the method of procurement (e.g., micro-purchase, small purchases, sealed bids, request for proposals, noncompetitive/sole source), the selection of a contract type, contractor selection and/or rejection, and the basis of a contract price.

The Grantee's documented procurement process must conform with any applicable federal, State and local laws and regulations. As part of the required procurement procedures, a Grantee must maintain written standards of conduct covering conflict of interest and governing the actions of its employees engaged in the selection, award, and administration of contracts. The standards of conduct must provide for disciplinary actions to be applied for violations by officers, employees or agents of the Grantee. Such standards shall provide, at a minimum, that no employee, officer, or agent of the Grantee will participate in the selection, award, or administration of a contract supported by grant funds if a conflict of interest, real or actual, is involved. Such conflicts may arise when:

- The employee, officer, or agent, or
- Any member of such individual's immediate family, or
- Such individual's partner, or
- Any organization which employs, or is about to employ the selected contractor, has a financial or other interest in or receives or stands to receive a tangible personal benefit from a firm being considered for a contract.

The standards of conduct shall also cover organizational conflicts of interest. Organizational conflicts of interest arise where an entity is or appears to be unable to conduct an impartial procurement action due to relationships with a parent company, affiliate, or subsidiary organization.

2. Bid Protest Procedures

Any contractor, subcontractor, or aggrieved party has the right to protest actions before or after the award of a contract utilizing grant funds. The Grantee alone will be responsible, in accordance with good administrative practice and sound business judgement, for the settlement of all contractual and administrative issues arising out of procurement contract solicitations and awards.

Grantees shall have written protest procedures, which may be analogous to those set forth in Part 24 of Title 2 of the New York Codes, Rules and Regulations, in order for effective due process to be achieved. A Grantee's specific protest procedures shall be outlined in all bid requests, request for proposals, request for applications, etc. issued by or on behalf of the Grantee concerning any grant-funded projects. In summary, Grantees are responsible for handling all contract activity protests. Except in matters of direct State or possibly Federal

concern (in cases involving federally funded grants), the Department will not substitute its judgement for that of the Grantee.

3. Procurement Contract Language

Any contract concerning a grant-funded project must be a written agreement between the Grantee and the third party providing specific goods and/or services. Whether with a contractor, subcontractor, consultant or vendor, the contract must as appropriate state the activities to be performed; the time schedule; the policies and requirements that apply to the contractor, subcontractor consultant or vendor, including the above procurement requirements; and any other terms and conditions of the grant and the New York State Contract for Grants.

J. Assurances of No Conflicts of Interest and/or Other Detrimental Effects

The Grantee as well as any subgrantees, contractors, subcontractors or consultants engaged by the Grantee to provide goods or services in connection with the grant-funded project shall attest that their performance of any contracted services does not and will not create a conflict of interest with nor position the Grantee to breach any other contract it currently has in force with the State of New York.

The Grantee as well as any subgrantees, contractors, subcontractors or consultants engaged by the Grantee to provide goods or services in connection with the grant-funded project shall disclose any existing or contemplated relationship with any other person or entity, including relationships with any member, shareholder of 5% or more, parent, subsidiary, or affiliate organization, which would constitute an actual or potential conflict of interest or appearance of impropriety, relating to other clients/customers/agents of the Grantee, subgrantees, contractors, subcontractors, consultants or former officers and employees of the State and its affiliates, in connection with the providing of goods or rendering of services related to the grant-funded project. The Grantee shall have procedures in place for alerting the State of any such actual or potential conflicts as well as procedures to resolve the same.

K. Minority and Woman-Owned Business Enterprise Requirements

Pursuant to New York State Executive Law Article 15-A, the Department recognizes its obligation to promote opportunities for maximum feasible participation of New York State-certified Minority and Women-owned Business Enterprises (MWBEs) and the employment of minority group members and women in the performance of Department contracts.

In 2006, the State of New York commissioned a disparity study to evaluate whether Minority and Women-owned Business Enterprises had a full and fair opportunity to participate in state contracting. The findings of the study were published on April 29, 2010, under the title "The State of Minority and Women-Owned Business Enterprises: Evidence from New York" ("Disparity Study"). The report found evidence of statistically significant disparities between the level of participation of Minority and Women-owned Business Enterprises in state

procurement contracting versus the number of Minority and Women-owned Business Enterprises that were ready, willing and able to participate in state procurements. As a result of these findings, the Disparity Study made recommendations concerning the implementation and operation of the statewide certified Minority and Women-owned Business Enterprises program. The recommendations from the Disparity Study culminated in the enactment and the implementation of New York State Executive Law Article 15-A, which requires, among other things, that the Department establish goals for maximum feasible participation of New York State Certified Minority and Women-owned Business Enterprises (“MWBE”) and the employment of minority groups members and women in the performance of New York State contracts.

Business Participation Opportunities for MWBEs

For purposes of this solicitation, the Department hereby establishes a goal of 30% as follows:

- 1) For Not-for-Profit Applicants: Eligible Expenditures include any subcontracted labor or services, equipment, materials, or any combined purchase of the foregoing under a contract awarded from this solicitation.
- 2) For-Profit and Municipality Applicants: Eligible Expenditures include the value of the total amount of the Budget provided for the Work Plan in the Grant Contract entered into pursuant to this RFA.

The goal on the Eligible Expenditures portion of a Grant Contract awarded pursuant to this RFA will be 15% for Minority-Owned Business Enterprises (“MBE”) participation and 15% for Women-Owned Business Enterprises (“WBE”) participation (based on the current availability of qualified MBEs and WBEs and outreach efforts to certified MWBE firms). A Grantee awarded a Grant Contract pursuant to this RFA must document good faith efforts to provide meaningful participation by MWBEs as subcontractors or suppliers in the performance of the Grant Contract and Grantee will agree under the terms of its Grant Contract that the Department may withhold payment pending receipt of the required MWBE documentation required by the Department or the OSC. For guidance on how the Department will determine “good faith efforts,” refer to 5 NYCRR §142.8.

The directory of New York State Certified MWBEs can be viewed at:

<https://ny.newnycontracts.com>. The directory is found on this page under “NYS Directory of Certified Firms” and accessed by clicking on the link entitled “Search the Directory”.

Engaging with firms found in the directory with like product(s) and/or service(s) is strongly encouraged and all communication efforts and responses should be well documented by a Grantee to evidence its good faith efforts to encourage MWBE participation in the performance of its obligations under its Grant Contract.

By submitting an Application, each Applicant and potential Grantee agrees to complete an MWBE Utilization plan as directed in **Attachment 10** of this RFA. The Department will review the MWBE Utilization Plan submitted by each Grantee. If a Grantee’s MWBE Utilization Plan is not accepted, the Department may issue a Notice of Deficiency. If a Notice of Deficiency is issued, Grantee agrees that it shall respond to the Notice of Deficiency within seven (7)

business days of receipt. The Department may disqualify a Grantee as being **non-responsive** under the following circumstances:

- a) If a Grantee fails to submit a completed MWBE Utilization Plan;
- b) If a Grantee fails to submit a written remedy to a Notice of Deficiency;
- c) If a Grantee fails to submit a request for waiver (if applicable); or
- d) If the Department determines that the Grantee has failed to document good-faith efforts to meet the established MWBE participation goals for the procurement.

In addition, Grantees will be required to certify they have an acceptable Equal Employment Opportunity policy statement.

L. Vendor Identification Number

Effective January 1, 2012, in order to do business with New York State, you must have a vendor identification number. As part of the Statewide Financial System (SFS), the Office of the State Comptroller's Bureau of State Expenditures has created a centralized vendor repository called the New York State Vendor File. In the event of an award of a grant to a successful Applicant pursuant to the terms of this RFA and in order to initiate a Grant Contract with the Department, a Grantee must be registered in the New York State Vendor File and have a valid New York State Vendor ID.

If already enrolled in the Vendor File, the Applicant should include the Vendor Identification number in your organization information. If not enrolled, to request assignment of a Vendor Identification number, an Applicant should please submit a New York State Office of the State Comptroller Substitute Form W-9, which can be found on-line at:

<https://www.osc.state.ny.us/files/vendors/2017-11/vendor-form-ac3237s-fe.pdf>

Additional information concerning the New York State Vendor File can be obtained on-line at: http://www.osc.state.ny.us/vendor_management/index.htm, by contacting the SFS Help Desk at 855-233-8363 or by emailing at helpdesk@sfs.ny.gov.

M. Vendor Responsibility Questionnaire

The Department strongly encourages each Applicant to file the required Vendor Responsibility Questionnaire online via the New York State VendRep System. The Vendor Responsibility Questionnaire must be updated and certified every six (6) months. To enroll in and use the New York State VendRep System, see the VendRep System Instructions available at <https://www.osc.state.ny.us/state-vendors/vendrep/file-your-vendor-responsibility-questionnaire> or go directly to the VendRep system online at <https://www.osc.state.ny.us/state-vendors/vendrep/vendrep-system>.

An Applicant must provide their New York State Vendor Identification Number when enrolling. To request assignment of a Vendor ID or for VendRep System assistance, contact the Office of the State Comptroller's Help Desk at 866-370-4672 or 518-408-4672 or by email at itservicedesk@osc.ny.gov.

Applicants opting to complete online should complete and include the Vendor Responsibility Attestation, **Attachment 11** of the RFA, in their application submission. The Attestation is located under the SFS Attachments Section.

Applicants opting to complete and submit a paper questionnaire can obtain the appropriate questionnaire from the VendRep website, www.osc.state.ny.us/vendrep, and include it with their Application.

N. Vendor Prequalification for Not-for-Profits

Each not-for-profit Applicant subject to prequalification is required to prequalify prior to having the ability to submit an Application in the NYS Statewide Financial System.

Pursuant to the New York State Division of Budget Bulletin H-1032, dated July 16, 2014, and revised on December 9, 2023, the new Prequalification Policy became effective as of January 16, 2024. The updated policy requires that not-for-profit organizations register and prequalify in the SFS using the updated Prequalification Application. The updated Prequalification Application and New York State Prequalification Manual for Grantees can be found on the Grants Management website at: <https://grantsmanagement.ny.gov/get-prequalified>.

An Application cannot be submitted/received from a not-for-profit Applicant that (a) has not Registered in the NYS Statewide Financial System and (b) has not Prequalified in the Statewide Financial System by the Application’s due date specified on the Cover Page of this RFA.

Below is a summary of the steps that must be completed to meet registration and prequalification requirements. The Vendor User Manual within the Statewide Financial System Website details the requirements and job aids walk users through the process.

1) Register for the Statewide Financial System

- Applicants will first need to create an account in SFS. Applicants that need to create an account should do so at the following link: <https://www.osc.ny.gov/state-vendors/portal/enroll-vendor-self-service-portal>. Any questions related to SFS accounts should be sent to the SFS Help Desk (HelpDesk@sfs.ny.gov).

If you have previously registered and do not know your Username, please email helpdesk@sfs.ny.gov. If you do not know your Password, please click the “I Forgot My Password” link from the main log-in page and follow the prompts.

2) Complete your Prequalification Application

- Log in to the Statewide Financial System.
- Applicants will first need to create an account in SFS. Applicants that need to create an

account should do so at the following link: <https://www.osc.ny.gov/state-vendors/portal/enroll-vendor-self-service-portal>. Any questions related to SFS accounts should be sent to the SFS Help Desk (HelpDesk@sfs.ny.gov).

- Instructions for SFS Prequalification can be found on Page 20 of the SFS Grantee User Manual entitled, “! Grantee Processing in SFS”. This user manual is accessible to organizations with an SFS account under the SFS Coach Tile/Button in the SFS Vendor Portal. Select “Handbook: User Manual with Screenshots” from the Training Type drop down to locate the manual. If you have any problems accessing the manual please contact HelpDesk@sfs.ny.gov. Please see the section entitled, “Enter and Submit a Prequalification Application”, located on page 20 of the SFS Grantee User Manual, for complete instructions on how to complete and submit an SFS Prequalification in the NYS Statewide Financial System.
- Specific questions about the prequalification process should be referred to your primary New York State agency representative. The representative specific to the NYS Department of Health can be reached at: vendorresponsibility@health.ny.gov.

3) Add SFS Roles to Submit a Bid and to Add a signatory or “Grant Contract Approver” to your account

- **To start, review, and submit an Application to this Bid Event in SFS, Applicants will need to acquire the following SFS Security Roles:**

SFS Security Role Name	Description	Access Provided
NY_GM_VENDOR_EVENT_INITIATE	Bid Response Initiator	Allows the vendor user to initiate a bid response to a bid event but not submit the bid response to the agency.
NY_GM_VENDOR_EVENT_INQUIRY	Bid Event Inquiry	Allows a vendor user the ability to review bid events. This is a view-only role.
NY_GM_VENDOR_EVENT_SUBMIT	Bid Response Submitter	Allows a vendor user to both initiate a bid response and submit a bid response to the agency.

- In order to have your designated signatory (known in SFS as Grant Contract Approver) sign a contract and have their name appear on the contract agreement you have to add the Grant Contract Approver’s name to your SFS Vendor Profile. The Delegated Administrator for your organization can add the Signatory’s Name by following the instructions found on page 17-20 of the SFS Grantee User Manual entitled, “! Grantee Processing in SFS”. This user manual is accessible to organizations with an SFS account

under the SFS Coach Tile/Button in the SFS Vendor Portal. Select "Handbook: User Manual with Screenshots" from the Training Type drop down to locate the manual. If you have any problems accessing the manual, please contact HelpDesk@sfs.ny.gov.

All potential Applicants are strongly encouraged to begin Statewide Financial System Registration and Prequalification process as soon as possible in order to participate in this opportunity.

O. General Specifications

1. By submitting the "Application Form" each Applicant attests to its express authority to sign on behalf of the Applicant.
2. Grantees will possess, at no cost to the State, all qualifications, licenses and permits to engage in the required business as may be required within the jurisdiction where the work specified is to be performed. Workers to be employed in the performance of any Contract awarded pursuant to this RFA will possess the qualifications, training, licenses, and permits as may be required within such jurisdiction.
3. Submission of an Application indicates the Applicant's acceptance of all terms and conditions contained in this RFA, including the terms and conditions of the State of New York Contract for Grants. Any exceptions the Applicant would like considered by the Department relating to the terms and conditions of this RFA and/or State of New York Contract for Grants must have been raised during the Question and Answer Phase of this RFA (See, Section IV.B.).
4. An Applicant may be disqualified from receiving an award if such Applicant or any subsidiary, affiliate, partner, officer, agent, or principal thereof, or anyone in its employ, has previously failed to perform satisfactorily in connection with public bidding or contracts, in the State of New York or otherwise.
5. Provisions Upon Default
 - a. The services to be performed by a successful Applicant pursuant to the terms of the Grant Contract entered into with the Department shall at all times be subject to the direction and control of the Department.
 - b. In the event that the Grantee, through any cause, fails to perform any of the terms, covenants, or promises of any Contract resulting from this RFA, the Department acting for and on behalf of the State, shall thereupon have the right to terminate the Contract by giving notice in writing of the fact and date of such termination to the Grantee.
 - c. If, in the judgment of the Department, the Grantee acts in any way which is detrimental to or does or is in any way likely to impair or prejudice, the interests of the State, the Department may terminate the Grant Contract awarded pursuant to this RFA. In such case, the Grantee may receive equitable compensation for all services as shall, in the

judgment of the State Comptroller, have been satisfactorily performed by the Grantee up to the date of the termination of the Contract.

6. Gender-Based Violence and the Workplace Certification

New York State Finance Law [§139-M](#) requires Applicants on competitive state procurements to certify that they have a written policy addressing gender-based violence and the workplace and that such policy meets the minimum requirements outlined on **Attachment 12**. Applicants should review, sign, date and include as part of their submission **Attachment 12**.

V. Completing the Application

A. Application Format/Content

Please refer to the Statewide Financial System: Vendor User Guide for assistance in applying for this procurement through the NYS Statewide Financial System. This guide is available by logging into the Statewide Financial System and searching under SFS Coach.

Please respond to each of the sections required in SFS when completing the Statewide Financial System online Application.

Applicants are instructed to respond to each of the following statements and questions under “Program Specific Questions (PSQ)/Bid Factors.” Your responses comprise your application. Number/letter your narrative to correspond to each statement and question in the order presented below. When responding to the statements and questions, be mindful that Application reviewers may not be familiar with your agency and its services. Your answers should be specific, succinct, and responsive to the statements and questions as outlined. Please be aware that the value assigned to each section described below indicates the relative weight that will be given to each section of your Application when scoring your Application.

The Application Narrative should not exceed twelve (12) double-spaced pages, using a 11-point Arial font with one-inch margins on all sides. Pages should be numbered consecutively. All Attachments should be labeled with the Attachment name and corresponding attachment number. The twelve (12) page limitation is specific to the Application Narrative and does not include all required Attachments. **Please note there is a 2,000-character limit for each response unless specified in the question.** Please submit only the requested information in the attachments and do not add attachments or information that are not requested. Any additional attachments or narrative exceeding the twelve (12) double-spaced page limitation will not be scored or considered by reviewers. Failure to follow these guidelines could result in a deduction of up to ten (10) points.

It is each Applicant’s responsibility to ensure that all materials included in its Application have been properly prepared and submitted.

IMPORTANT:

Applications must be submitted via the Statewide Financial System **AND** emailed as a single pdf application with all requirements from Section V.A by the date and time Applications in response to this RFA are due as specified in the “Key Dates” set forth on the Cover Page of this RFA.

The pdf application must be sent to OHIPgrants@health.ny.gov. Subject line of the email should be as follows: RFA 20706 application for XXXXX County/Borough (Add the county/borough being applied for). Only one (1) email with the single pdf application is allowed per submission.

See the Event Comments and Attachments link at the bottom of the Bid Event page in SFS for required attachments to be completed in response to corresponding bid factor questions, as well as informational only attachments.

Program Specific Questions (PSQ)/Bid Factors

1. Program Summary (NOT SCORED)

- a. RFA Applicants are instructed to complete and submit **Attachment 5** Grant Cover Sheet with the pdf application.. See Section VI. Attachments of the RFA for instructions and listing of all RFA attachments.
- b. RFA Applicants are instructed to complete and submit **Attachment 11** Vendor Responsibility Attestation form with the pdf application.
- c. RFA Applicants are instructed to complete and submit **Attachment 10** MWBE forms with the pdf application.
- d. RFA Applicants are instructed to complete and submit **Attachment 12** Gender-Based Violence and the Workplace Certification form with the pdf application

2. Statement of Need (Maximum Score: 5 points)

- a. RFA applicants are instructed to include the following information in the application narrative
 - i. Identify the target area(s) you propose to serve, including the counties to be served and which county will be the RFA Applicant’s Base county, if applicable. Describe the geographic area to be served, a description of the size and demographics of the target population and the number of potential health insurance enrollees that the RFA applicant expects to successfully enroll or renew in a health plan given the Maximum Award per Federally Recognized Tribe/Urban Indian Organization or County/Borough per Year and Per County Add-On limits set forth in Table 1 under Section V.C. of this RFA.

- ii. RFA Applicants that plan on using subcontractors should provide this information for each subcontractor (NOT SCORED)
- b. RFA Applicants should have a known presence in the community. Please include the following information in response to this question in no more than 4,000 characters:
 - i. Describe how the Applicant is a known and trusted resource to their community.
 - ii. Describe the community characteristics and populations that will be targeted, including the geographical, cultural and language characteristics of the area.
 - iii. Explain how the RFA Applicant's participation in the Navigator Program will address an unmet community need and why the RFA applicant is qualified to provide Navigator services.

3. Health Equity (Maximum Score: 4 points)

Further information regarding Health Equity can be found in **Attachment 2** of this RFA.

- a. What is your organization's understanding of the health equity needs and disparities of the priority population served by this funding?
- b. How do you integrate a health equity framework into your Navigator program design?

4. Applicant Organization (Maximum Score: 18 points)

- a. Explain the number of years in prior experience the RFA Applicant has in providing services under the NY State of Health's Navigator Program or other similar health insurance application and enrollment assistance programs providing in-person and telephone assistance which is culturally competent, linguistically appropriate and disability accessible.
- b. Describe the organization's mission, organizational structure, the services the organization provides and the role it will play in the Program.
- c. Provide a statement of the organization's commitment to the community and the target population.
- d. Any RFA Applicant using a subcontractor(s), are requested to include letters of commitment from each subcontractor. Such letters should describe the history of the RFA Applicant's working relationship with the subcontractor(s). Letters need to be for included with the full pdf application and labeled as **Attachment 13**. If no subcontractor(s) are being used, enter N/A for your response to this question. (NOT SCORED)

- e. If an RFA Applicant does not have a history of working with the proposed subcontractor(s) and did not complete Bid factor 4d., the RFA Applicant should describe the steps that will be taken to quickly establish such relationships. (NOT SCORED)
- f. Describe the Applicants ability to resolve temporary operational problems (such as an unexpected support staff shortage or a physical site problem) through overall support and collaboration.

Provide an example, based on prior experience, that demonstrates an atmosphere of such internal collaboration and support.

- g. RFA Applicants indicating that they are “community and consumer-focused non-profits” are requested to describe in no more than 4,000 characters:
 - i. their commitment to a particular community or communities; and
 - ii. their experience assisting consumers in a community
- h. Health care providers are requested to describe their compliance with each of the provider specific eligibility requirements described in Section II. A. 1., in no more than 4,000 characters. DOH will disqualify health care providers who have applied that do not meet the health care provider-specific eligibility requirements. (NOT SCORED)

5. Enrollment Strategy and Experience (Maximum Score: 20 points)

- a. Describe existing relationships with consumers enrolled in NY State of Health or potentially eligible to enroll in NY State of Health and the number of years providing successful health insurance applications and enrollment assistance into NY State of Health programs. This can include application assistance for other public programs outside of NY State of Health.
- b. Describe the approaches that will be taken to reach potential health insurance enrollees and experience implementing them. Describe how the Applicant will maximize enrollment opportunities and success in the proposed service area and identify strategies that will be implemented to reach vulnerable and hard-to-reach populations. If different strategies to reach each segment of potential health insurance enrollees (individuals or small businesses) are being used, please highlight the differences between its enrollment strategies.
- c. List the number of individuals that the Applicant proposes will be employed by their organization and by its subcontractor(s), if applicable, to function as Navigators, and justification for that number and how it will be sustained over the course of the grant period. Provide the number of Navigators, administrative and management support and other staff that the Applicant proposes to employ including their functions. Discuss all employees' qualifications for staff that have been identified,

including number of years of experience providing this type of assistance working with target population and language capabilities.

- d. Describe the Applicant's experience working with each proposed subcontractor, if applicable, and why, based on this experience, they believe the subcontractor will successfully carry out the requirements of the Program. If no subcontractor(s) are being used, enter N/A for your response to this question. (NOT SCORED)
- e. List the estimated number of health insurance enrollee applications, in total per county, that the Applicant proposes will be submitted per month to NY State of Health. Explain how the estimate was derived and how it will be sustained over the course of the grant period, if awarded. Where possible, base projections on prior experience assisting the target population in applying for benefits including health insurance and any other means tested program.
- f. Describe current or planned internal program procedures and timeframes for handling enrollment applications including wait times for appointments, strategies to minimize "no shows" (such as reminder postcards or phone calls the day in advance), completion of enrollment applications, and submission of enrollment applications to NY State of Health.
- g. RFA Applicants with current or recent enrollment assistance contracts should provide details on their current or recent enrollment assistance programs. (NOT SCORED)

6. Identification of Proposed Locations and Site Schedules (Maximum Score: 10 points)

- a. Describe prior experience providing enrollment assistance or other services at site locations in proposed service area and how that knowledge was utilized to determine proposed locations under this proposal and how these locations will be successful in enhancing accessibility for enrollment assistance in the proposed target area.
- b. Describe the potential locations where Navigator program services will be provided across the proposed service area, including the days, hours and language capabilities during which Navigators will be available at each site included in site schedule.
Describe the languages that will be spoken at each location and how those locations will reach the intended target populations
- c. Describe how productivity of enrollment sites will be monitored. Description should include number of health insurance applications anticipated to be reached at each site, each month per full-time equivalent, and how success of the proposed health insurance enrollment site will be determined.

- d. Provide a schedule of expected days and hours of operation including weekend and evening hours for each location and how this schedule supports the Applicant's proposed number of health insurance enrollment applications to be submitted per month.
- e. A completed "Proposed Locations and Site Schedule" form (**Attachment 14**) must be included with the pdf application submission.

7. Technology Infrastructure (NOT SCORED)

- a. In compliance with the specifications in Section III. M., provide a description of the technology infrastructure available such as computer terminals, portable devices (laptops or iPads) to be used by Navigators particular sites, the type of internet connection (dial up, high speed, or other), type(s) of web browser used to connect to NY State of Health's online web portal, and scanning and printing capability.

8. Directory of Volunteer Activities (Maximum Score: 4 points)

- a. Provide a description of how the agency will form and maintain relationships with local community organizations where individuals can volunteer to help applicants and enrollees meet community engagement requirements. Volunteer opportunities for county in which you are applying need to include the name and public contact information of the organization, the types of volunteer opportunities and hours volunteer opportunities are available.
- b. Provide a schedule of expected organizations in accordance with the form, "Proposed Volunteer Activities by County," found in **Attachment 15** and include in the pdf application submission.

9. Conflicts of Interest (NOT SCORED)

- a. RFA Applicants and their subcontractors, if applicable, are instructed to complete and include **Attachment 16** in the pdf application submission

10. Quality Assurance (Maximum Score: 6 points)

- a. Provide a proposed schedule of frequent and regular communication between the RFA applicant and its subcontractor(s), if applicable, and with staff providing Navigator services to support process improvement and sharing of best practices among Navigator staff.
- b. Provide a plan for monitoring the number of enrollment applications facilitated by Navigator staff and, if applicable, its subcontractor(s) staff. This should include a plan for utilizing quality assurance methods such as the Assistor Oversight Manager functionality. This should include a plan for correcting non- and under-performance of navigator and subcontractor staff.

- c. Provide a process description for ensuring the RFA applicant will not fund underperforming subcontractors (if applicable) at the original agreed upon amount. Also, include a description of how subcontracting arrangements would be adjusted if necessary. If no subcontractor(s) are being used, enter N/A for your response to this question. (NOT SCORED)

11. Training (Maximum Score: 4 points)

- a. Describe the Applicant's proposed process for ensuring Navigator staff will participate in all required training including the initial certification, annual renewal program, other ongoing trainings offered as new topics arise and adhere to the official Department Navigator program training curriculum.
- b. Describe the plan to provide ongoing training and technical assistance to all Navigator staff, including regularly scheduled meetings and in-service topics.

12. Privacy and Security (Maximum Score: 2 points)

- a. Describe how the Applicant will comply with the privacy and security standards described in Section III.

13. Budget and Budget Justification (Maximum Score: 20 Points)

RFA Applicants are directed to utilize **Attachment 17** for instructions on how to complete the proposal for Year 1 of this Program in the excel attachment.

- a. Applicants are instructed to complete a Year 1 budget using **Attachment 18**, the Contractor Budget Template, and include in the pdf application submission.
- b. The RFA Applicant is requested to describe, in the application narrative, any organizational governance which dictates personal expenditures (e.g. governmental wage rates, union contracts, salary is determined or limited by an organization wide rate). RFA Applicants should discuss how it will address future Cost of Living Adjustments (COLAs) and fringe benefit rate increases in an environment of level funding and how the proposed level of staff will be maintained over the course of the grant period.
- c. An indirect cost rate (ICR) of up to 15% of modified total direct costs can be requested. If your organization has a federally approved rate, contractors may request the federally approved rate, not to exceed 20%. If your organization has a federally approved rate of less than 20%, the maximum indirect rate that can be requested is the approved federally approved rate. The RFA Applicant should include a copy of their current federal ICR agreement in the pdf application submission, if applicable. (NOT SCORED)

- d. If an RFA Applicant proposes subcontractor(s), it should include a total proposed budget amount for each subcontractor on the contractual section of the budget in Attachment 18. For each proposed subcontractor, a detailed proposed budget, Attachment 19 Subcontractor Budget template, should be completed following the budget guidelines described above within this section and is included in the pdf application submission. (NOT SCORED)

14. Readiness/Work Plan (Maximum Score: 7 points)

- a. The Department intends to fund Applicants that can begin providing Navigator Program Services no later than February 1, 2027. RFA Applicants should describe how they will be ready to implement their Work Plan by this date. The RFA applicant should include timeframes and responsible parties. Timeframes should be provided in weeks and months, rather than list specific dates and months.
- b. RFA Applicants are instructed to complete the highlighted portions of **Attachment 20: Work Plan Summary** and include in the pdf application submission.
- c. Describe the organization's compliance with contractual requirements in past awards including timely vouchering, reporting and responsiveness to the entity providing the funding.
- d. RFA Applicants with current and past experience as a Department Grantee should also describe their process for responding to inquiries or requests for information from the Department. (NOT SCORED)

B. Freedom of Information Law

All Applications may be disclosed or used by the Department to the extent permitted by law. The Department may disclose an Application to any person for the purpose of assisting in evaluating the Application or for any other lawful purpose. All Applications will become State agency records, and will be available to the public in accordance with the New York State Freedom of Information Law (FOIL). **Any portion of an Application that an Applicant believes constitutes proprietary information entitled to confidential handling, as an exception to the general rule regarding the availability to the public of State agency records under the provisions of the Freedom of Information Law, must be clearly and specifically designated in the Application.** Applicants are instructed to clearly and specifically identify all proprietary/confidential information from the application on a separate MS Word document and include the document to the full PDF of the Application. Label the attachment as "Proprietary/Confidential Information" and include the following sentence in the document, "Subject to Public Officers Law the following materials are considered trade secrets, proprietary, and/or confidential commercial information." If the Department agrees with the Applicant's claim regarding the proprietary nature of any portion of an Application, the designated portion of the Application will be withheld from public disclosure. Blanket assertions of proprietary material will not be accepted, and failure to specifically designate

proprietary material may be deemed a waiver of any right to confidential handling of such material.

C. Review & Award Process

An application which meets the Minimum Eligibility Requirements will be reviewed and evaluated competitively by the Department, Division of Eligibility and Marketplace Integration/Bureau of Consumer Assistance and Training/Navigator Program. An application that does not meet the minimum criteria (PASS/FAIL) will not be evaluated. An Application that does not provide all required information may be omitted from consideration.

Applications will be evaluated on a 100-point scale as follows:

#	Section	Maximum Score (Points)
1	Program Summary	NOT SCORED
2	Statement of Need	5
3	Health Equity	4
4	Applicant Organization	18
5	Enrollment Strategy and Experience	20
6	Identification of Proposed Locations and Site Schedules	10
7	Technology Infrastructure	NOT SCORED
8	Directory of Volunteer Opportunities	4
9	Conflict of Interest	NOT SCORED
10	Quality Assurance	6
11	Training	4
12	Privacy and Security	2
13	Budget and Budget Justification	20
14	Readiness and Workplan	7
	Total	100

In the event of a tie score, the RFA Applicant who scored highest on their Enrollment Strategy and Experience will receive the award. In the event the applicants have a tie score on the Enrollment Strategy and Experience section, the applicant with the highest score in Applicant Organization will receive the award. Applications with a score of 70 or higher may be awarded.

Applications with minor issues (for example, an application missing information that is not essential to timely review and would not impact review scores) **may** be processed and evaluated, at the discretion of the State, but any issues with an application which are identified by the Department **must** be resolved prior to time of award. An Application with unresolved issues at the time award recommendations are made will be determined to be non-responsive and will be disqualified.

Award Process for Federally Recognized Tribes and Urban Indian Organizations

Up to \$675,000 is available per year to be awarded to Federally Recognized Tribes and Urban Indian Organizations. Each Federally Recognized Tribes and each Urban Indian Organization in New York State that submits a complete Application with a passing score of 70 or higher, will be awarded up to \$75,000 annually for each county applied for.

In the event that there are funds remaining from the funding pool allotted for Federally Recognized Tribes and Urban Indian Organizations, the Department reserves the right to distribute the remaining funds proportionally to all other types of entities awarded contracts under the RFA.

Award Process for All Other Types of Entities - Rest of State and New York City

Approximately \$31,325,000 is available per year to be awarded to Not-for-Profit Organizations on a per county/borough basis. New York City boroughs will receive approximately \$15,662,500 per year and Rest of State counties will receive approximately \$15,662,500 per year. Applicants who submit a complete application per county/borough may be awarded.

The Department will organize all applications received by the county/borough, regardless of whether the proposed county is identified as a base or add-on. Each application by county/borough will be reviewed, scored and ranked by final application score from highest to lowest.

The two applications with the highest score by county/borough will be offered an award, regardless of whether it is a base or add-on county. If additional funds are available, the Department will rank the counties/boroughs based on uninsured population, highest to lowest. Additional awards will be made to the next highest scoring application by county/borough of those highest ranked counties/boroughs until funds are exhausted

If the Department does not receive an application or an application does not score at least a 70 to provide services for a particular county, The Department may request that the RFA Applicant with the highest score in a contiguous county expand its coverage to this additional area. Additional funding will be provided in accordance with the Per County Add On amount as found in the Table 1. If an RFA applicant does not agree to add to its service area, the next highest scoring RFA Applicant in another contiguous county will be awarded. If there is no applicant willing to provide coverage for the additional county, the Department reserves the right to resolicit coverage for that county.

In the event that any funds remain unspent in Rest of State due to the fact that all acceptable applications have been funded, the Department reserves the right to distribute those remaining funds to the New York City region.

If any funds remain in New York City once all acceptable applications have been funded, the Department reserves the right to distribute those remaining funds to the Rest of State.

If changes in funding amounts are necessary for this initiative or if additional funding becomes available, funding will be modified and awarded in the same manner as outlined in the award process described above.

Applicants will be deemed to fall into one of three categories: 1) not approved, 2) not funded due to limited resources, and 3) approved and funded. Not funded Applications may be awarded should additional funds become available.

Once awards have been made pursuant to the terms of this RFA, an Applicant may request a debriefing of their own Application (whether their application was funded or not). The debriefing will be limited only to the strengths and weaknesses of the Application submitted by the Applicant requesting a debriefing and will not include any discussion of ANY OTHER Applications. Requests for a debriefing must be received by the Department, Consumer Assistance for New York State of Health: Navigator Program no later than fifteen (15) Calendar Days from date of the award or non-award announcement to the Applicant requesting a debriefing.

To request a debriefing, please send an email to Brian Loucks at OHIPgrants@health.ny.gov. In the subject line, please write: Debriefing Request, Consumer Assistance for NY State of Health: Navigator Program.

Unsuccessful Applicants who wish to protest the award(s) resulting from this RFA on legal and/or factual grounds, should follow the protest procedures established by the Office of the State Comptroller (OSC). These procedures can be found on the OSC website at <https://www.osc.state.ny.us/state-agencies/gfo/chapter-xi/xi17-protest-procedures> (Section XI. 17.)

VI. Attachments

1. Please note that Attachments to this RFA can be accessed under the “**Attachments Section**” of the Statewide Financial System online Application/Bid Event and are not included in the RFA document. In order to access the online Application/Bid Event and other required documents such as the Attachments, a prospective Applicant must be registered and logged into the NYS Statewide Financial System. Attachments that are requested to be completed as part of an Application/Bid Event response will be requested in individual corresponding Bid Factors. Refer to Section V.A., Application Format/Content, Program Specific Questions (PSQ)/Bid Factors.
2. **ALL Applicants are instructed to verify each required attachment that has been completed and included in the application.**

Attachment 1 : Languages spoken by Navigators
Attachment 2 : Health Equity Information
Attachment 3 : Glossary of Terms

Attachment 4 : State Health Access Data Assistance Center Uninsurance Rates for New York in 2022 and 2023
Attachment 5 : Grant Application Cover Sheet
Attachment 6 : Sample Productivity Report
Attachment 7 : Certification Regarding Privacy and Security Requirements for Assistors
Attachment 8 : Federal Health Insurance Portability and Accountability Act Business Associate Agreement
Attachment 9 : Sample Letter of Interest Form
Attachment 10 : Minority and Women Owned Business Enterprise Requirement Forms
Attachment 11 : Vendor Responsibility Attestation
Attachment 12 : Gender-Based Violence and the Workplace Certification
Attachment 13 : Subcontractor Letters of Commitment (sample given)
Attachment 14 : Proposed Locations and Site Schedule
Attachment 15 : Proposed Volunteer Activities by County
Attachment 16 : Conflicts of Interest Attestation
Attachment 17 : RFA Applicant Budget Instructions
Attachment 18 : Contractor Budget Template
Attachment 19 : Subcontractor Budget Template
Attachment 20 : Work Plan Summary
Attachment A-1: Agency Specific Terms and Conditions
Attachment A-2: Program Specific Terms and Conditions
Attachment A-3: Federally Funded Terms and Conditions
Attachment M: Participation by Minority Group Members and Women with Respect to State Contracts: Requirements and Procedures