



Colorado Health Benefit Exchange

Connect for Health Assistance Network Funding Opportunity Announcement and Application Guidelines

February 22, 2013

Application deadline: April 8, 2013

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Connect for Health Assistance Network Application for Funding:

<http://www.getcoveredco.org/About-Us/Assistance-Network/Funding-Opportunity>

Connect for Health Assistance Network Budget Worksheet:

<http://www.getcoveredco.org/About-Us/Assistance-Network/Funding-Opportunity>

1.0 Purpose of Announcement

The Colorado Health Benefit Exchange (COHBE or the Exchange) will soon be named Connect for Health Colorado and is establishing the Connect for Health Colorado Assistance Network (Assistance Network) as a network of community-based organizations that will provide impartial assistance to consumers seeking health coverage through our new health insurance marketplace that will open in October 2013. The purpose of this Funding Opportunity Announcement is to invite applications from qualified organizations who are interested in participating as Assistance Sites for either the individual market, the small group market (SHOP) or both, or as Regional Hubs in the Connect for Health Assistance Network. Assistance Sites and Regional Hubs will employ and/or supervise Health Coverage Guides who will provide public education, outreach, and application support to people seeking health coverage through COHBE. Regional Hubs will provide additional support for helping facilitate and support training, outreach, information sharing, mentoring, collaboration and referral on a regional level. Applications to become Assistance Sites without COHBE funding will also be accepted. COHBE intends to identify and/or make awards to a variety of entities throughout the state of Colorado that help COHBE achieve broad geographic reach, serve Colorado's diverse populations, and assist Colorado's small businesses and small business employees.

Deadline for Submission: April 8, 2013 at 5PM MST.

Submit applications including all attachments in one PDF document by e-mail to:
grants@COHBE.org

Timeline

Funding Opportunity Announcement and Request for Applications	Friday, February 22, 2013
First Question and Answer Meeting and Webinar	Tuesday, February 26, 2013, 10 AM, Holiday Inn Cherry Creek, 455 S Colorado Blvd
Second Question and Answer Teleconference and Webinar	Tuesday, March 12, 2013, 10:30 AM
Last Day to Submit Written Questions	Monday, March 25, 2013
Applications Due	Monday, April 8, 2013, 5:00 PM MST
Application Review and Selection	April 8 – May 2, 2013
Grant Award Announcements	Friday, May 3, 2013

2.0 Exchange Background and Connect for Health Assistance Network Description

2.1 Exchange Background

COHBE is a public, non-profit entity established by Senate Bill 11-200, a state law passed by the Colorado General Assembly in May 2011. COHBE will be changing its name to Connect for Health Colorado and will launch the new name this spring. The Exchange is governed by a Board of Directors with additional direction from a panel of state legislators called the Legislative Health Benefit Exchange Implementation Review Committee. The mission of the Exchange is to increase access, affordability, and choice for individuals and small employers purchasing health insurance in Colorado.

The Exchange is building a new health insurance marketplace, scheduled to open for business in October 2013, where individuals, families and small employers can shop for and buy health insurance based on quality and price. Customers using the Exchange website will be able to find information about health coverage options and the qualified health plans that will be sold in the Exchange, including information about tax credits and cost sharing subsidies that will help reduce the cost of purchasing a qualified health plan. The Exchange will be the sole access point for eligible Coloradans to apply for and receive tax credits to reduce the cost of premiums and subsidies to reduce cost sharing. Customers will shop primarily through a website and will be able to access assistance by phone and in person through a customer support network that includes a call center, Health Coverage Guides and licensed brokers. Premium tax credits will be available for individuals with incomes up to \$45,960 and families of four with incomes up to \$94,200 per year (400 percent of federal poverty level). Subsidies to reduce cost sharing are available for individuals with incomes up to \$28,725 per year and families of four with incomes up to \$58,875 (250 percent of the federal poverty level).

Customers with incomes above the threshold for tax credits or cost sharing subsidies can also utilize the Exchange to shop for and enroll in health plans at the full commercial cost. All customers will be able to bypass the eligibility assessment and go straight to account creation and plan shopping, if desired.

Customers will be able to begin purchasing health plans through the Exchange in October 2013 for enrollment effective beginning January 1, 2014. The development and planning activities of the Exchange are funded by federal grants. The Exchange must be self-financing in 2015. More information about the Exchange is available at www.getcoveredco.org.

2.1.1 How the Exchange Individual Market Will Work

A customer using the Exchange website for the first time will have a variety of options for how to proceed:

- 1) Accessing information or support by using online learning tools, the chat feature, connecting with a Customer Service Representative, or finding a certified Health Coverage Guide or licensed Health Insurance Broker.

- 2) Browsing for health plan options and prices.
- 3) Using a pre-screener to estimate customer's ability to get help with paying for health coverage.
- 4) Creating an account and submitting the application for health coverage and assistance paying for health coverage (qualified health plans, Medicaid and CHP+).

A person choosing to create an account and begin an application will use the same application for health coverage and insurance affordability programs as the Colorado Department of Health Care Policy and Financing (HCPF). The online application will be designed to ask questions relevant to the customer's circumstances and provide prompts and opportunities for information and assistance along the way. The COHBE system will use the information provided by the customer to check for information like identity, citizenship and income. A customer who appears to be eligible for Medicaid or CHP+- will have his/her data and verification information transferred into the state's eligibility system for final determination and enrollment. This transfer is designed to minimize duplication or redundant data entry. Other individuals, whether or not they are eligible for tax credits, will be directed to a COHBE shopping page where they will shop for and compare available health plans. Families with some members who appear eligible for state programs, such as Medicaid and CHP+, and some members who are eligible for private coverage, will be able to shop for a health plan through the Exchange and have eligibility information for other family members transferred to the state's eligibility system.

2.1.2 How the Exchange SHOP Market will work

SHOP is the division of the Colorado Health Benefit Exchange that will provide small group plan options to Colorado employers with 2-50 employees.

Employers can set their "benefit budget" by selecting how much they wish to pay toward the cost on benefits. Employees can use this employer allowance to pay for their coverage or can "buy-up" to higher plan levels if they wish. This process will bring more certainty to employers and more options and flexibility to employees and their families.

The Small Business Health Care Tax Credit is only available to employers who purchase through the SHOP Exchange.

2.1.3 Target Populations

COHBE will be open to the following Coloradans when the marketplace opens in October:

- Individuals and families who currently purchase insurance on their own in the individual insurance market, including self-employed individuals
- Uninsured individuals and families

- Small business employers and employees through a small group market (2-50 employees) that allows small businesses significant flexibility in providing health insurance to their employees.

The following are some statistics that are helpful for understanding potential COHBE customers:

- About 400,000 Coloradans currently purchase health insurance in the individual market.
- Of the Coloradans who purchase insurance in the individual market, more than 193,000 of them have incomes between 133-400 percent of poverty, making them eligible for premium tax credits in the Exchange.
- 779,000 Coloradans are currently uninsured (approximately one in six Coloradans).
- 434,000 households in Colorado have at least one uninsured member.
- 229,000 uninsured Coloradans have incomes between 133 and 400 percent of poverty, making them eligible for premium tax credits in the Exchange.
- 33 percent of uninsured Coloradans are Hispanic.
- 28 percent of Coloradans ages 19 to 34 (317,981 people) are uninsured, which is the highest rate of uninsured among all age groups.
- Young men ages 19 to 34 are the single largest group of uninsured (193,943).
- The small group market currently includes about 33,734 groups with 267,411 covered lives based on 2010 data from the Colorado Division of Insurance.

State of Colorado maps showing the number and percent of uninsured can be found on the COHBE website at <http://www.getcoveredco.org/About-Us/Assistance-Network/Funding-Opportunity>

For additional information about the uninsured and underinsured in Colorado, including regional analysis, see CHAS Issue Brief: Overview of Coloradans' Health Care Coverage, Access and Utilization <http://www.cohealthaccesssurvey.org/reports/>

3.0 Connect for Health Assistance Network Description

COHBE is establishing the Assistance Network to serve Coloradans by providing accurate, impartial information about the range of insurance affordability program options, assisting with applications for new premium tax credits and cost sharing subsidies, and understanding health plan options. The Assistance Network also fulfills COHBE's federal obligation to establish a navigator program and support its customers with in-person assistance.

Colorado's Assistance Network will be designed to meet the needs of Coloradans and Colorado communities and will facilitate access to the range of health coverage options. It is one component of COHBE's overall customer service strategy for both the individual and small group (SHOP) markets that includes:

- Self-help (online decision support tools)
- Customer Service Representatives (chat and call-in support)
- Assistance Network Certified Health Coverage Guides

- Licensed and Certified Brokers

COHBE will manage the selection, funding, certification, monitoring and evaluation of Assistance Sites and Regional Hubs. COHBE will provide a comprehensive training program for Health Coverage Guides and will certify Health Coverage Guides and Assistance Sites to begin providing services. Assistance Sites will be located throughout the state and employ and supervise their Health Coverage Guides.

COHBE Support for the Assistance Network and Health Coverage Guides

COHBE is developing a robust online system to support customers in learning about and applying for health insurance and associated tax credits and subsidies. Small employers will also have online tools to help them choose plan(s) to offer to their employees and determine their contribution levels. The Exchange will provide the following services to support the efforts of Exchange customers, which can be leveraged by Health Coverage Guides, Assistance Sites and Regional Hubs:

- **Website** capable of providing general education about health insurance terms, eligibility for premium tax credits and cost sharing subsidies, and comparison of available qualified health plans. The website will be a secure place to apply for premium tax credits and cost sharing subsidies, and to access an eligibility determination for Medicaid and CHP+. The system will also collect and submit enrollment applications into qualified health plans and transfer data to HCPF for Medicaid and CHP+ enrollment.
- **Customer Service Center** to provide support by phone to customers and Coverage Guides. The Customer Service Center will have representatives available to Health Coverage Guides who will assist with system use, trace transactions, and escalate application and grievance issues. Health Coverage Guides will be able to connect customers to a representative at the Customer Service Center for additional assistance. The Customer Service Center will also support Spanish language interpretation services for customers.
- **Outreach and Education Materials** in hard copy and online.
- **Tools and services** that support the blind and visually-impaired, non-English speaking customers, and TTY/TDD for the hearing impaired.
- **Comprehensive Training** deployed by COHBE in summer 2013. The curriculum will include training about interview techniques, communicating difficult concepts, making appropriate referrals (e.g., to the service center or a broker), and working with challenging customers. It will also include technical training on how to use the COHBE website, broad knowledge of private health insurance, eligibility, verification and enrollment, and privacy and security issues.
- **Health Coverage Guide tools** including a portal for Health Coverage Guides and Assistance Sites. Each Assistance Site and Health Coverage Guide will have an account and will be able to access the portal for application status information for customers the Guide has assisted.

3.1 Assistance Network Roles, Responsibilities, Expectations and Requirements

The initial open enrollment for coverage through the Exchange begins in **October 2013** and will continue through March 31, 2014. This will be the period of highest activity, although Assistance Sites and Regional Hubs should expect to serve customers with pre-application assistance like outreach, education, information, and responding to inquiries as soon as August 2013. Assistance Sites should also expect to provide post-enrollment assistance throughout the year, including questions, account changes and new applications generated from life change events. Prior to October, COHBE expects Assistance Sites to be making staffing arrangements, designating staff who will be trained as certified Health Coverage Guides, ensuring designated staff are trained and certified, preparing work plans for delivering services, and conducting outreach and education. Assistance Sites, Regional Hubs and Health Coverage Guides must be prepared to deliver assistance and services to Coloradans seeking health coverage **no later than October 1, 2013**.

The Assistance Network will align with federal requirements (45 CFR 155.210 (e)) which require the Assistance Site and the Health Coverage Guides to:

1. Maintain expertise in eligibility, enrollment and program specifications and conduct public education activities to raise awareness about the Exchange;
2. Provide information and services in a fair, accurate and impartial manner. Such information must acknowledge other health programs;
3. Facilitate selection of a QHP [qualified health plan];
4. Provide referrals to any applicable office of health insurance consumer assistance...for any enrollee with a grievance, complaint, or question regarding their health plan, coverage, or a determination under such plan or coverage;
5. Provide information in a manner that is culturally and linguistically appropriate to the needs of the population being served by the Exchange, including individuals with limited English proficiency, and ensure accessibility and usability of Navigator [Health Coverage Guides] roles and functions for individuals with disabilities in accordance with the Americans with Disabilities Act and section 504 of the Rehabilitation Act.

3.1.1 Health Coverage Guides: Roles, Responsibilities and Duties

The **role of the Health Coverage Guide** will be to provide COHBE customers with fair and impartial information and services that help guide them through the application process. Health Coverage Guides will provide education about all the health coverage options available to customers and the qualified health plans available on the Exchange, as well as information about tax credits and cost sharing subsidies. They will assist customers in completing the application for health coverage and some will assist employers set up plan options for their employees. Health Coverage Guides will provide guidance to customers about their health plan options, and to help them prioritize, filter and sort these options. Health Coverage Guides will also assist customers with making changes to their account in the event of income fluctuations

or changes in household, and renewing coverage during the appropriate renewal periods. In the event a customer has a grievance, complaint, or question, Health Coverage Guides will provide referrals to appropriate consumer assistance offices at the State or health insurance carrier. Health Coverage Guides will connect customers to the Customer Service Center, COHBE website, or certified and licensed brokers if additional support or support beyond the scope of the Health Coverage Guide's role is needed.

Health Coverage Guides are distinct from brokers because Health Coverage Guides are not licensed by the Division of Insurance to sell insurance. Health Coverage Guides will not provide advice on plan selection and will not perform functions on behalf of their customers. The COHBE training program will cover the distinction between facilitating plan selection and advising on plan selection. Brokers receive commission for the sale of a health plan, whereas Health Coverage Guides are grant-funded (or unfunded in the case of volunteers).

3.1.2 Assistance Site Expectations

Assistance Sites are entities that meet COHBE selection and certification criteria. Most Assistance Sites will also receive funding from COHBE. However, some entities may elect to become certified Assistance Sites without COHBE funding. COHBE seeks as Assistance Sites a range of organizations, distributed throughout the State, that serve low-income and vulnerable populations, the LGBT community, and specific ethnic, cultural, language, diagnosis and disability communities. Assistance Sites must be a trusted entity in their communities and should be located in a place that is accessible for their customers. Assistance Sites may elect to serve either the individual market or both the individual and Small Business Health Options Program (SHOP) market. Assistance Sites will be selected based on their geographic location, capacity for delivering the services described herein, ability to provide appropriate infrastructure, management and support of Health Coverage Guides, and ability to reach customers and ensure appropriate access.

Assistance Site Responsibilities:

- Commitment to supporting COHBE's mission increase access, affordability, and choice for individuals and small employers purchasing health insurance in Colorado.
- Conduct outreach and public education that helps inform Colorado communities about new opportunities for accessing health care coverage, and assistance paying for health coverage.
- Provide in-person assistance to customers (by appointment, walk-in or otherwise as defined by the applicant entity). In-person assistance includes but is not limited to:
 - Providing education about insurance terms and the full range of health coverage options
 - help completing the application for health coverage
- Provide appropriate referrals and facilitate appropriate connections with other members of COHBE's customer service system.

- Provide phone assistance to customers and phone access for setting appointments, answering questions, resolving problems with a maximum call response time of 1 business day.
- Respond to internet or email inquiries within 1 business day.
- Recruit, employ, manage, and monitor individual Health Coverage Guides.
- Ensure all requirements for Assistance Site Certification are met and maintained. Assistance Site Certification Criteria are attached as Appendix 1.
- Ensure Health Coverage Guides complete COHBE training and certification. Training will occur over the summer and early fall 2013. Certification criteria for Health Coverage Guides are attached as Appendix 2.
- Ensure staff interacting with Health Coverage Guide clients or accessing the personal information of clients have completed a criminal background check and are free of conviction of financial crimes, crimes against children or vulnerable adults, and violent offenses.
- Sign Privacy and Security Statement and Conflict of Interest Statement (forthcoming) and obtaining the same from any organization providing support for Health Coverage Guide services and from all Health Coverage Guides under their supervision.
- Provide the infrastructure that allows Health Coverage Guides to conduct their business. Infrastructure requirements include ADA accessible space, telephone and fax, high speed internet access, computer, scanner, and printer.
- Provide monthly, quarterly, and annual reporting in the format requested by COHBE. Reporting will include information about outreach activities, number of people served, amount of time spent, type of contact made, etc.
- Submit to third-party evaluation.
- Provide administrative support services related to Assistance Site and Health Coverage Guide duties such as scheduling, supervision, and budget management.
- Be prepared to assist with pre-enrollment activities, such as information, education, responding to questions by August 2013.
- Be prepared to deliver services when open enrollment begins in October, 2013.

Assistance Site Responsibilities specific to Sites serving SHOP include all responsibilities for Assistance Sites listed above AND:

- Support small employers and their employees with education and information about the SHOP, the division of the Exchange that serves employers.
- Help employers understand contribution strategies and how they affect the employer based on their company tax status.
- Facilitate employer plan selection.
- Assist employers with uploading employee rosters to the SHOP website that include information about which employees will be receiving benefits, the benefit amount and type.
- Assist small business employees in accessing their SHOP accounts, selecting plans, and enrolling into coverage.

- Explain to employees the waiver process, its importance and how it relates to “Life Change Events.”
- Coordinate the use of HSA, HRA and/or FSA accounts with employers and employees - Assistance in enrollment in these accounts.
- Provide ongoing account service for employers and employee support.

3.1.3 Regional Assistance Hub Expectations

COHBE will make enhanced awards to five or six organizations that agree to accept additional responsibilities for supporting training, outreach, information sharing, mentoring, collaboration and referral on a regional basis. COHBE has identified that it will be desirable for Assistance Sites and Health Coverage Guides to have opportunities for information sharing and collaborative learning especially in the early months of implementation. This could most easily be accommodated on a regional level with Regional Assistance Hubs distributed throughout the State. The initial implementation period will also require a significant amount of outreach and education throughout the State that is often best delivered by trusted local sources. Regional Assistance Hubs will be selected based on their geographic location, capacity for enhanced delivery of services, ability to reach organizations throughout the defined region, and connectedness with organizations throughout the region that will ensure that the organization will be well-positioned to serve as a facilitator and convener.

****It is COHBE’s preference that Regional Hubs are also Assistance Sites. However, if applicants demonstrate a well-articulated plan for collaborating closely with Assistance Sites to ensure customer access to services, COHBE will consider applications for Regional Hubs that do not provide Health Coverage Guide services on site.**

Regional Assistance Hub Responsibilities:

- Identifying services among Assistance Sites and Health Coverage Guides in their regions to ensure a coordinated system of referral exists to help support customers with specific needs.
- Acting as hubs for outreach, including, for example:
 - coordinating outreach and enrollment events
 - delivering public presentations
 - identifying regional and local opportunities for COHBE outreach (such as county fairs, school events, etc.).
- Supporting training, which may include:
 - staffing a trainer who can help COHBE with training in the region
 - staffing a mentor who has exhibited a high level of proficiency with training and is willing and able to support peers in the region
 - identifying training needs and coordinating regional trainings.
- Convening (either physically or virtually) Health Coverage Guides Assistance Sites in the region for information sharing, networking, mentoring and collaborative learning.

3.1.4 General Requirements for Assistance Sites and Regional Hubs

Conflict of Interest

COHBE has developed a conflict of interest policy, attached as Appendix 3 that is designed to assure the impartiality and integrity of the Assistance Network services and actors. Applicants will be screened for conflict of interest during the application process and grantees will be expected to make disclosures, sign a conflict of interest policy, and submit to ongoing monitoring and evaluation. Certain organizations and individuals are prohibited by federal regulation and the COHBE conflict of interest policy from serving as Assistance Sites or Health Coverage Guides. Those prohibitions are as follows:

- 1.1. As required by 45 CFR 155.210 (d) a **Navigator [Health Coverage Guide] or Navigator entity [Assistance Site]** must not:
 - 1.1.1. Be a health insurance issuer
 - 1.1.2. Be a subsidiary of a health insurance issuer
 - 1.1.3. Be an association that includes members of, or lobbies on behalf of, the insurance industry; or
 - 1.1.4. Receive any consideration directly or indirectly from any health insurance issuer in connection with the enrollment of any individuals or employees in a QHP [qualified health plan] or non-QHP [qualified health plan].¹
- 1.2. A Health Coverage Guide or Assistance Site must not:
 - 1.2.1. Be a provider entity (including, but not limited to, hospitals, clinics, and physician practices) that is directly owned by, a subsidiary of, or exclusively contracts with, a single insurer or its subsidiaries., except in cases where the provider can demonstrate that due to geography or other factors, there are significant limitations on available insurers with whom to contract.

Technological Requirements

The COHBE website will provide for interactions (completing the online application, shopping for health plans, accessing information and help) via a web browser (Internet Explorer, Chrome, Safari and Firefox, then current and at least 1 prior major versions of each) with support for Web 2.0 technologies. The solution will leverage a web browser design that minimizes network bandwidth requirements, promoting a responsive experience that is only limited by the User's network connection and device type. COHBE will not have a mobile app, however, the website will be accessible by popular desktops, laptops, tablets and mobile devices such as smartphones that support browsers with full rendering.

¹ The comments in the final federal regulations state, ““consideration,” as used in § 155.210(d)(4) of the final rule, should be interpreted to both mean financial compensation—including monetary or in-kind of any type, including grants—as well as any other type of influence a health insurance issuer could use, including but not limited to things such as gifts and free travel, which may result in steering individuals to particular QHPs offered in the Exchange or plans outside of the Exchange.”” Patient Protection and Affordable Care Act; Establishment of Exchanges and Qualified Health Plans; Exchange Standards for Employers; Final Rule and Interim Final Rule,” Federal Register 77:59 (March 27, 2012) 18333. COHBE thus interprets the words “indirect consideration” to mean in-kind compensation and other types of influence as stated above. COHBE further interprets this provision to say that Health Coverage Guides and Assistance Sites cannot receive compensation (cash or in-kind) for enrollment.

The table below shows the operating systems and web browsers that can support the COHBE website.

	IE 8	IE 9	Firefox 18+	Chrome 20+	Safari 5+
Windows Vista, XP	✓				
Windows 7	✓	✓	✓	✓	✓
Windows 8		✓	✓	✓	
Mac OS X 10.6, 10.8				✓	✓

Privacy and Security Requirements

COHBE receives, processes, stores, and handles sensitive data on behalf of applicants, carriers, small-business owners, and others. Unauthorized modification, deletion, or disclosure of information can compromise COHBE business operations, violate individual privacy rights, and possibly constitute a criminal act.

Assistance Sites and Regional Hubs will need to put forth efforts to ensure:

- Confidentiality of personally identifiable information and other sensitive data.
- Integrity of data stored on or processed on behalf of COHBE.
- Availability of information stored on or processed on behalf of COHBE.
- Compliance with applicable laws, regulations, and COHBE policies governing information security and privacy protection.

As part of the proposal, Sites should describe how they plan to address security and privacy with particular emphasis on proper data identification, access controls, data storage, destruction of materials, monitoring, and breach/incident response.

If selected, the grantee will be expected to annually attest that their security and privacy practices are compliant with applicable federal and state laws and supportive of COHBE security and privacy practices. COHBE reserves the right to inspect, assess, and audit the Site's security and privacy practices. Inadequate security and privacy practices may result in termination of certification.

The preferred wording of the attestation is still being developed, but will look include wording similar to the following:

Site A hereby attests that they have developed, implemented, and maintain appropriate security and privacy controls for all information and data provided to Site A by the Colorado Health Benefit Exchange. Our practices are consistent with and compliant with

the applicable federal and state laws as identified by the Colorado Health Benefit Exchange.

COHBE's own Security and Privacy Program is based on requirements from Centers for Medicare and Medicaid Services (CMS) Minimum Acceptable Risk Standards for Exchanges (MARS-E) requirements. The MARS-E baseline was established in a collaboration between CMS, the Internal Review Service (IRS), and other key stakeholders and is based on the National Institute of Standards and Technology Special Publication 800-53 (NIST SP 800-53) and IRS Publication 1075.

Site specific practices are expected to address a much smaller subset of those requirements; the details of which will depend on the Site's operational model.

Liability

Assistance Sites and Regional Hubs will be liable for the conduct of the Health Coverage Guides under their supervision, including (but not limited to) compliance with the roles and responsibilities set out in this Funding Opportunity Announcement and the COHBE-Grantee Agreement. Assistance Sites will be required to hold COHBE harmless for any legal claims or damages resulting from the Sites Health Coverage Guides' actions. Grantees will be required to show proof of insurance prior to disbursement of grant funding. Assistance Sites and Regional Hubs should consult an insurance professional for advice on appropriate liability insurance.

Evaluation and Monitoring

It is COHBE's intent that the Assistance Network facilitate access to health coverage for Coloradans seeking assistance with their application. To ensure that Sites are providing quality services in accordance with the expectations articulated above and to ensure program integrity and success, COHBE will be conducting ongoing monitoring and evaluation. Grantees will be evaluated on metrics including, but not limited to: achievement toward the expected outreach, service and enrollment outcomes described in the application; achieving and maintaining certification (Sites and Guides); and customer satisfaction.

Federal Flow-through Provisions and Sub-recipient monitoring

COHBE is a recipient of Federal grant funding and as such has a fiduciary responsibility to ensure that any sub-recipient grant funds are managed according to all Federal regulations. Because grants under this Funding Opportunity Announcement will be funded all or in part through federal funds, this will require accountability to the Department of Health and Human Services (HHS) for all activities and spending by both COHBE, as the prime-recipient under any Federal grants, and all sub-recipients receiving Federal grant funding.

COHBE will be conducting monitoring under the federal policies and guidelines listed below. As a condition of award COHBE will require production of grantee employment policies and procedures, and financial policies and procedures.

Requirements related to sub-recipient monitoring include:

- Reporting of activities performed under the grant at scheduled intervals designated in the grant agreement.
- Documentation and receipts for all funds requested under the grant. This may include payroll registers, copies of invoices and vouchers, copies of credit card statements, travel reimbursement requests, etc.
- Documented sub-recipient operational policies & procedures related to Personnel, Reimbursements, and Financial activities.
- Timesheets detailing time spent working on Assistance Network activities as well as all other time worked.
- Supporting documentation for fringe rates.
- Copies of all contractual agreements in excess of \$25,000.
- Acceptance of COHBE ethical standards that would apply to sub-recipients.

Insurance Regulations and Flow-through Guidance:

1. Patient Protection & Affordable Care Act
2. CMS Regulations regarding State Exchanges, 45 CFR 155, 156, and 157
3. Colorado Statutes and Regulations regarding Health Insurance Exchanges
4. Colorado Insurance Statutes and Regulations
5. CMS Regulations regarding HIPAA and Information Technology
6. IRS Safeguards Program – Publication 1075 and FIPS 140-2
7. OMB Circular A-110
8. Federal Grant requirements
 - a. Requirements as set forth in the Cooperative Agreement for Grant No 1HBEIE120111-01-00
 - b. HHS Grants Policy Statement found at <http://www.hhs.gov/grantsnet/adminis/gpd/index.htm>
 - c. 45 CFR 74.4-74.48
 - d. 45 CFR 92.36
 - e. Federal Funding Accountability and Transparency Act of 2006

4.0 Who may apply

Entities, organizations, associations or government agencies may apply. Applicants should specify whether they are applying for consideration as Regional Assistance Hubs, or Assistance Sites for the individual market, SHOP market or both. COHBE encourages collaboration and welcomes organizations to apply as partnerships or coalitions. Organizations that wish to collaborate on an application should designate one organization as the lead. The lead organization must assume responsibility for overall plan implementation, fiscal oversight and reporting. Project partnership and work responsibilities must be clearly identified in a

memorandum of understanding (MOU) that is signed by all participating organizations, and submitted with the application.

Membership associations may apply on behalf of their members and serve as a pass through for grant funding. Association applicants must specify which of their members will be receiving grant funds and for what purpose. Duplicate grant funding will not be awarded. Association members will not receive funding both as individual organizations and through their association. If duplications are not resolved before applications are received, they will be resolved during the evaluation process.

Organizations **not** seeking funding, but wish to become certified Assistance Sites, are requested to submit an application. A budget worksheet is not required for entities not applying for grant funds.

5.0 Application Preparation, Budget and Selection Process

5.1 Application Preparation

COHBE requests qualified applicants submit completed applications using the Connect for Health Assistance Network Application for Funding: <http://www.getcoveredco.org/About-Us/Assistance-Network/Funding-Opportunity>. The application should outline the capabilities and vision of the organization to meet the responsibilities and obligations as described in Section 2.0 of this announcement. Applications may not exceed a total of 25 pages (not including attachments.) Responses and attachments should be included in **one PDF document**.

Applicant responses must be received by email on or before **5:00 pm MT on April 8, 2013**. Late applications will not be accepted or considered. Applicants shall email their application and attachments to grants@cohbe.org. A confirmation email will be returned to verify receipt. It is the responsibility of the Applicant to ensure that the application is received by COHBE on or before the proposal closing date and time. Applicants must use the attached application and follow instructions for responding to this Funding Opportunity Announcement.

Applicants requiring technical assistance with their application responses can find public resources such as sample MOUs and budgets at the Project Teach website: [Http://publichealthpractice.org/community-project-development/project-teach](http://publichealthpractice.org/community-project-development/project-teach)

The content of the responses will include:

Section Heading	Content
<i>Background and General Qualifications of Applicant</i>	<i>Information on the history of the organization, mission, types of work currently performed, clients served, organizational structure leadership, management, collaborative relationships</i>
<i>Description of Work</i>	<i>Organization's vision and approach to providing health coverage guide services and support for those services;</i>

Section Heading	Content
	<i>clients who would be served (i.e. geographic and demographic) and the number of clients expected to be served, staffing and supervision plans facilities, technology assessment, privacy practices, operating hour</i>
<i>Attachment: References</i>	<i>Two letters of reference from clients or partner organizations</i>
<i>Attachment: Budget</i>	<i>Budget Worksheet, completed per the instructions provided</i>
<i>Attachments: Financial documents</i>	<i>Most recent annual audited financial statement, most recent prepared interim financial statement, organizational operational budget for upcoming year excluding Assistance Network activity or funding, Organizational Chart showing existing organization and structure if funded</i>
<i>Attachment: Memorandum of Understanding</i>	<i>Organizations applying as coalitions or partnerships should include an MOU.</i>
<i>Optional Attachments: other supporting documents</i>	<i>As applicable to application, memoranda of understanding, nondiscrimination policy, etc.</i>

5.2 Funding Information and Budget instructions

The Connect for Health Assistance Network and grants made through the Assistance Network will be funded in 2013 and 2014 with federal and private foundation grants. COHBE is currently funded through federal grants under a reimbursement structure. In 2015 and beyond, COHBE anticipates the Assistance Network will be funded through private grants and COHBE operational revenue. COHBE expects to re-evaluate the level of ongoing need, the scope and design of the Assistance Network, and the overall funding strategy in early 2014.

Disbursements

Funding under this Funding Opportunity Announcement will be disbursed beginning July 1, 2013 and will continue through June 30, 2014. Early funding for readiness and preparation will be available to a smaller subset of grantees who demonstrate a need for advance funding and submit an early disbursement request that will be provided to all awardees. Initial disbursements will be made upon submission of the Funding Agreement and demonstration that efforts are being made toward certification, staffing, training and infrastructure needs that will ensure readiness for October 1, 2013. Subsequent disbursements will be made monthly, provided there is demonstrable progress towards grantee goals and objectives as outlined in

the grant application, that grantees adhere to reporting requirements, and that no significant problems arise during monitoring and evaluation.

Applicants must prepare a budget worksheet with justifications for the grant period of July 1, 2013 to June 30, 2014. The budget must cover all allowable expenses for the duration of the grant. Applicants must use the Connect for Health Assistance Network Budget Worksheet: <http://www.getcoveredco.org/About-Us/Assistance-Network/Funding-Opportunity>. Instructions for the budget are included in the worksheet.

Upon award, grantees will be expected to track their actual expenditures against their budget request on a quarterly basis beginning July 31, 2013 for the duration of the grant.

To the extent program resources are shared across other programs, costs must be allocated proportionately to each program. The written justification must show how expenses will support accomplishment of program objectives. Additionally, applicants wishing to bid across different regions should note any efficiencies gained across regions, as applicable.

Grant funding is available for the following costs:

Personnel Costs

- *Health Coverage Guides:* For each requested Health Coverage Guide position, provide the number of full-time equivalents (FTEs) and annual salary (including benefits). Benefits include health and/or dental insurance coverage, pension or retirement plan contribution, paid time off, etc. Applicants should provide a brief written justification, including the responsibilities of each position.
- *Non-Health Coverage Guides:* For each requested non-guide position (e.g., administrative support, supervisor), provide the number of FTEs and annual salary, including benefits. Benefits include health and/or dental insurance coverage, pension or retirement plan contribution, paid time off, etc. Applicants should provide a written justification and describe the scope of responsibility for each position and how the position supports Assistance Network activities.

Non-personnel Costs

- *Supplies and Equipment:* Equipment necessary to perform the functions of the grant. This includes all stationary (e.g., desks, chairs, etc.) and mobile office equipment (e.g., laptops) and includes equipment necessary to complete applications in a community setting (i.e., not in the office).
- *Travel:* Costs for Health Coverage Guide personnel to conduct off-site activities related to outreach and application assistance only. No out-of-state travel is allowed and overnight travel is not anticipated. Applicants should provide information about the organization's travel reimbursement policy as part of the justification. Applicants should describe the number of trips and the per trip average costs (e.g., parking, per diem).

Applicants should not include training related travel in the budget. COHBE will directly reimburse grantees for training related travel.

- *Contractual:* Contracted services that would be procured to support Assistance Network activities. If contracted services are used, a copy of the organizations Procurement Policy will be requested.
- *Other:* Total cost associated with all other items not included in the line items specified above. This could include marketing materials, meeting expenses, proportionate overhead costs, etc. An explanation of the items or service must be provided in the written justification. If overhead costs are claimed, the method of allocation will be required for reimbursement and may not exceed 10% of the total amount requested under this Funding Opportunity.

COHBE will assume costs related to training. COHBE will make all reasonable attempts to provide training in numerous regions of the state to minimize the need for travel. If travel is required for training, COHBE will reimburse costs on a case by case basis for mileage, per diem and hotel costs.

5.3 Timeline and Selection Process

Funding Opportunity Announcement and Request for Applications	Friday, February 22, 2013
First Question and Answer Meeting and Webinar	Tuesday, February 26, 2013, 10 AM, Holiday Inn Cherry Creek, 455 S Colorado Blvd
Second Question and Answer Teleconference and Webinar	Tuesday, March 12, 2013, 10:30 AM
Last Day to Submit Written Questions	Monday, March 25, 2013
Applications Due	Monday, April 8, 2013, 5:00 PM MST
Application Review and Selection	April 8 – May 2, 2013
Grant Award Announcements	Friday, May 3, 2013

Questions and Requests for Clarification: COHBE will provide two question and answer sessions (see timeline table above). Prospective Applicants may make e-mail inquiries to obtain clarification of requirements. Email inquiries should be directed to: grants@cohbe.org with “Assistance Network Question” in the subject line. Phone inquiries will not be accepted. No inquiries will be accepted after **Monday, March 25, 2013**. All questions and answers will be posted to the COHBE website, www.getcoveredco.org. Applicants and interested parties should check the website regularly for updates. Final answers to submitted inquiries will be posted on or about **Friday, March 29, 2013**.

Application Modification: Applications may be modified or withdrawn by Applicants prior to the established due date and time, **April 8, 2013 at 5PM MST**. Modified applications must be a *complete* application and must be clearly identified as a modified application on a cover page.

COHBE Questions, Requests for Clarification or Modification and Site Visits: During the application review and selection process, COHBE may contact Applicants for clarification of their application or to conduct a site visit. COHBE may request that applicants modify applications based on factors such as the total number or size of requests relative to the need in a particular community.

Notification: Grant awards will be announced by May 3, 2013.

Confidentiality: COHBE will not make the contents of applications available to the public.

5.4 Selection Criteria

Applications will be evaluated based on the relative geographic and community need, the applicant's ability to demonstrate that the work they will perform under the grant meets the expectations as described in section 3.0 and that the applicant meets evaluation criteria defined below.

The selection criteria are informed by federal regulation (45 CFR 155.210) and stakeholder feedback.

Assistance Site Criteria	Assistance Site Requirement	Regional Assistance Hub Requirement	Assistance Site SHOP specialty Requirement
1. Demonstrate existing relationships or ability to readily establish relationships with small employers and employees, consumers (especially uninsured and underinsured consumers), or self-employed individuals likely to be eligible for enrollment in a qualified health plan	X	X	X
2. Demonstrate ability to meet COHBE certification requirements and ensure that employed or volunteer Health Coverage Guides meet COHBE certification requirements. Certification requirements will include training, passing a training assessment, signed conflict of interest policy, signed privacy and security policy, background checks, among other things.	X	X	X
3. Demonstrate organizational commitment to provide information and services in a fair, accurate and impartial manner. Such information must acknowledge other health programs and other paths for assistance	X	X	X
4. Demonstrate the ability to hire, manage and monitor individual Health Coverage Guides and direct them to meet COHBE training and certification standards and timelines. It is the expectation that Certified Health Coverage Guides must maintain expertise in eligibility, enrollment, and program specifications through participation in continuing education as long as they serve in this role.	X	X	X
5. Demonstrate ability to provide referrals to the appropriate resource for any enrollee with a grievance, complaint, or question regarding their health plan, coverage, or a determination under such plan or coverage	X	X	X

Assistance Site Criteria	Assistance Site Requirement	Regional Assistance Hub Requirement	Assistance Site SHOP specialty Requirement
6. Demonstrate organizational commitment to provide services in a manner that is culturally and linguistically appropriate to the needs of the population being served by the Exchange, including individuals with limited English proficiency, and to ensure accessibility and usability of COHBE tools and functions for individuals with disabilities in accordance with the ADA and section 504 of the Rehabilitation Act. The organization must be able to demonstrate its commitment to providing a process for requesting reasonable accommodations for public education and in person assistance	X	X	X
7. Agree to adhere to the COHBE Conflict of Interest policy	X	X	X
8. Agree to adhere to the COHBE Privacy and Security Standards policy	X	X	X
9. Provision of Health Coverage Guide service fits within the mission of the organization	X	X	X
10. Demonstrate organizational alignment and capacity or defined plan to increase capacity in order to serve target populations within self-defined geographic area	X	X	X
11. Demonstrate organizational proficiency and capacity to provide in person assistance to employers with fewer than 50 employees and their employees			X
12. Demonstrate organizational proficiency and capacity to provide Health Coverage Guide service to self-defined target population(s) (including but not limited to low-income and vulnerable populations, the LGBT community, individuals with limited literacy or English proficiency, people with disabilities, disease specific groups, industry specific groups, faith communities, veterans and their families, rural communities)	X	X	X
13. Clearly description of how the organization can meet COHBE's quality assurance, stakeholder feedback, and reporting standards	X	X	X
14. Clearly description of how the organization envisions it can support comprehensive, seamless, and unbiased experiences for its target populations	X	X	X

Assistance Site Criteria	Assistance Site Requirement	Regional Assistance Hub Requirement	Assistance Site SHOP specialty Requirement
15. Organization can demonstrate it has the physical and technological capacity to provide private and ADA accessible appointment area where navigators and assistors can access high speed internet, scanning, phone service, and printing technologies	X	X	X
16. Organization can demonstrate the ability to receive email and phone referrals and set up appointments within 1 business day	X	X	X
17. The organization has ADA accessible location(s) for Health Coverage Guide service that is in a logical location for the self-defined target population(s)	X	X	X
18. Organization can demonstrate it is a trusted community resource with collaborative community partnerships	X	X	X
19. Organization can demonstrate it has the ability to convene Health Coverage Guides in a region for training coordination, networking, public education coordination, resource sharing, outreach coordination, information sharing, and support		X	
20. Provide Certified Health Coverage Guide staff free of conflicts of interest to deliver: <ul style="list-style-type: none"> • COHBE public education to raise awareness of the Exchange • In person assistance (application assistance, plan comparison, plan selection, plan enrollment, and appropriate referrals) to employers with fewer than 50 employees, and their employees 			X
21. Provide Certified Health Coverage Guide staff free of conflicts of interest to deliver: <ul style="list-style-type: none"> • COHBE public education to raise awareness of the Exchange • In person assistance (application assistance, plan comparison, plan selection, plan enrollment, and appropriate referrals) to self-defined target populations 	X		
22. Provide Additional Services to complement the delivery of services to customers including but not limited to:	*Optional	*Optional	*Optional
<ul style="list-style-type: none"> • Patient navigation 			

Assistance Site Criteria	Assistance Site Requirement	Regional Assistance Hub Requirement	Assistance Site SHOP specialty Requirement
• Assistance with applying for copayment and premium assistance programs			
• Post enrollment health advocacy			
• Assistance with Explanations of Benefits			
• Help using benefits			
• Education or health care literacy services			
• Bilingual staff			
• Mobile Navigator service			
• Nontraditional, extended or weekend hours			
• Assistance with basic needs programs ie: food, housing, employment, transportation, education			
• Business development assistance			
• Other			

6.0 Proposed Connect for Health Assistance Network Grant Agreement

A sample Agreement is included in Appendix 5 for reference. Contents of the Agreement are subject to change without prior notification.

Appendix 1: Connect for Health Colorado Assistance Site Certification

For Connect for Health Colorado certification as an Assistance Site, the Site must meet the following requirements:

- Appropriate Assistance Site application. Application must indicate whether or not the Site will specialize with SHOP services
- Assignment of administrator/supervisor to receive Connect for Health Colorado outreach training
- Submission of W9 for named site
- Must not be on the OIG List of Excluded Individuals/Entities
- Signed Connect for Health Colorado Privacy and Security statement
- Signed Connect for Health Colorado Conflict of Interest statement and any disclosures

TERMS AND CONDITIONS OF ASSISTANCE SITE CERTIFICATION

Once an Assistance Site has been certified, certification shall remain in effect with the following conditions:

- Changes to the Site's W9 must be reported to Connect for Health Colorado on a new W9
- Legal actions against the Site or individuals supported by Connect for Health Colorado that could result in inclusion on the OIG List of Excluded Individuals/Entities must be reported to Connect for Health Colorado and may result in termination of certification
- Annually, the Site must attest to compliance with Privacy and Security standards
- Breaches in security or instances of compromise of privacy must be reported to Connect for Health Colorado and may result in termination of certification
- Connect for Health Colorado reserves the right to inspect, assess, and audit the Site's security and privacy practices. Inadequate security and privacy practices may result in termination of certification
- New disclosures of Conflicts of Interest must be reported to Connect for Health Colorado and may result in termination of certification
- Changes in demographics or personnel, when such changes result in Assistance Site application form must be reported to Connect for Health Colorado
- Administrator/supervisor assigned by the Site must complete Connect for Health Colorado outreach training within 120 days
- If a site does not meet performance goals, or quality audits show trends of concern about a Site's ability to remain impartial or otherwise fulfill duties, Connect for Health Colorado may ask for a plan of action to improve performance, ask for an amended application, or terminate certification

Appendix 2: Connect for Health Colorado Health Coverage Guide Certification

For Connect for Health Colorado certification as Health Coverage Guide, an individual must meet the following requirements:

- Assignment by a Certified Assistance Site. Assignment from a Site includes:
 - Attestation that individual is not on the OIG List of Excluded Individuals/Entities
 - Attestation that Privacy and Security statement has been signed
 - Attestation that background check was completed with satisfactory results
 - Attestation that Conflict of Interest statement has been signed and Connect for Health Colorado has been given any disclosures
 - Completion of Health Coverage Guide user account set up by Site; account set up must specify whether or not the Guide will specialize with SHOP service
- Completion of Connect for Health Colorado Health Coverage Guide training program
- If account includes specialty of SHOP service, completion of Connect for Health Colorado Health Coverage Guide SHOP training modules

TERMS AND CONDITIONS OF HEALTH COVERAGE GUIDE CERTIFICATION

Once a Health Coverage Guide is certified, certification shall remain in effect with the following conditions:

- Loss of assignment by Certified Assistance Site will result in termination of certification
- Changes to the Health Coverage Guide user account information must be submitted to Connect for Health Colorado
- Legal actions against a Health Coverage Guide that could result in inclusion on the OIG List of Excluded Individuals/Entities or would result in an unsatisfactory background check must be reported to Connect for Health Colorado and may result in termination of certification
- Changes in relationships that constitute a Conflict of Interest disclosure must be reported to Connect for Health Colorado and may result in termination of certification
- Breaches in security or instances of compromise of privacy must be reported to Connect for Health Colorado and may result in termination of certification
- Connect for Health Colorado reserves the right to inspect, assess, and audit a Health Coverage Guide's security and privacy practices. Inadequate security and privacy practices may result in termination of certification
- Health Coverage Guide must complete update trainings to maintain expertise
- If quality audits show trends of concern about a Health Coverage Guide's ability to remain impartial or otherwise fulfill Health Coverage Guide duties, Connect for Health Colorado may ask for a plan of action for improvement or may terminate certification

Appendix 3: Connect for Health Assistance Network: Conflict of Interest Framework for Assistance Sites and Health Coverage Guides

It is COHBE's intent that the Connect for Health Assistance Network Program provides Exchange customers with impartial, high quality, community based education and information, and in-person assistance. In order to assure the delivery of high quality services, to minimize or eliminate the existence of conflicts of interest and ensure the integrity of the program COHBE will:

1. Monitor for potential conflicts of interest during the Assistance Site selection process and throughout the term of engagement with the Assistance Site.
2. Provide robust initial and ongoing training that includes instruction on providing impartial education and in person assistance with customer selection of a qualified health plan.
3. Require from Assistance Sites and Health Coverage Guides disclosures of affiliations that may present a direct or indirect conflict of interest.
4. Monitor Health Coverage Guide enrollment practices through use of reporting in COHBE's system.
5. Monitor Health Coverage Guide conduct through feedback tools on COHBE's website and through use of qualitative and quantitative evaluation tools like secret shopping.
6. Actively solicit customer satisfaction feedback on their experience working with Health Coverage Guides.
7. As circumstances command where a conflict of interest arises, require mitigation, revocation of certification, or termination of the grant.

2. Prohibition on conduct

- 2.1. As required by 45 CFR 155.210 (d) a **Navigator [Health Coverage Guide]** or **Navigator entity [Assistance Site]** must not:
 - 2.1.1. Be a health insurance issuer
 - 2.1.2. Be a subsidiary of a health insurance issuer
 - 2.1.3. Be an association that includes members of, or lobbies on behalf of, the insurance industry; or
 - 2.1.4. Receive any consideration directly or indirectly from any health insurance issuer in connection with the enrollment of any individuals or employees in a QHP [qualified health plan] or non-QHP [qualified health plan].²
- 2.2. A Health Coverage Guide or Assistance Site must not:

² The comments in the final federal regulations state, ““consideration,” as used in § 155.210(d)(4) of the final rule, should be interpreted to both mean financial compensation—including monetary or in-kind of any type, including grants—as well as any other type of influence a health insurance issuer could use, including but not limited to things such as gifts and free travel, which may result in steering individuals to particular QHPs offered in the Exchange or plans outside of the Exchange.”” Patient Protection and Affordable Care Act; Establishment of Exchanges and Qualified Health Plans; Exchange Standards for Employers; Final Rule and Interim Final Rule,” Federal Register 77:59 (March 27, 2012) 18333. COHBE thus interprets the words “indirect consideration” to mean in-kind compensation and other types of influence as stated above. COHBE further interprets this provision to say that Health Coverage Guides and Assistance Sites cannot receive compensation (cash or in-kind) for enrollment.

- 2.2.1. Be a provider entity (including, but not limited to, hospitals, clinics, and physician practices) that is directly owned by, a subsidiary of, or exclusively contracts with, a single insurer or its subsidiaries., except in cases where the provider can demonstrate that due to geography or other factors, there are significant limitations on available insurers with whom to contract.

3. Health Coverage Guide conflict of interest

- 3.1. A Health Coverage Guide shall not allow any philosophical, professional or personal financial or non-financial interests to influence or appear to influence the ability of the Health Coverage Guide to perform his/her duties impartially.
- 3.2. Health Coverage Guides shall attest that they are not a prohibited entity or employed by a prohibited entity as described in Paragraph 1.
- 3.3. Health Coverage Guides shall disclose to COHBE and to customers personal and professional financial and non-financial interests that may present a conflict of interest.
- 3.4. Health Coverage Guides shall not receive direct or indirect consideration from any health insurance issuer in connection with enrollment of individuals or employees.
- 3.5. Health Coverage Guides shall not charge for their services.
- 3.6. Health Coverage Guides shall provide to customers impartial information about all plans for which customers are eligible and shall not allow personal or professional interests to influence the customers' decisions. In an effort to maintain impartiality in providing assistance:
 - 3.6.1. Health Coverage Guides must not in any way solicit or persuade customers to enroll in any specific health insurance plan.
 - 3.6.2. Health Coverage Guides must not in any way solicit or persuade customers to switch from one health insurance issuer to another.
 - 3.6.3. Health Coverage Guides must not in any way persuade or compel customers to select a particular provider, but may assist a customer in locating or selecting a provider.
 - 3.6.4. Health Coverage Guides must not in any way solicit or persuade customers to engage a particular agent or broker, but may assist a customer in locating or selecting a broker.
- 3.7. Health Coverage Guides shall not use their role as a Health Coverage Guide for lead generation or profit.
- 3.8. Health Coverage Guides shall adhere to COHBE monitoring and evaluation requirements.

3. Assistance Network Site conflict of interest

- 3.1. An Assistance Site shall not allow any philosophical, financial or non-financial interests or affiliations to influence or appear to influence the ability of the Assistance Site to impartially deliver Health Coverage Guide services or assure that the Health Coverage Guides employed, contracted or otherwise supervised by the Assistance Site are able to impartially perform their duties as Health Coverage Guides.

- 3.2. Assistance Sites shall disclose to COHBE and to COHBE customers all philosophical, financial and non-financial interests or affiliations that may present a conflict of interest, including professional relationships between the entity and any health insurance issuer.
- 3.3. Assistance Sites shall not be any of the prohibited entities described in Paragraph 1.
 - 3.3.1. Assistance Sites shall disclose all relationships with prohibited entities as described in paragraph 1.
 - 3.3.2. Assistance Sites receiving any cash or in-kind compensation from health insurance issuers shall disclose the nature of the compensation, what the compensation is intended to support, and from whom it is received.
- 3.4. Assistance Sites shall not direct or permit Health Coverage Guides to solicit or persuade customers to enroll in any specific health insurance plan, switch from one carrier to another, or select a particular provider.
- 3.5. Assistance Sites shall not charge for Health Coverage Guide services or otherwise utilize the Assistance Program, or their association with the Assistance Program for lead generation or profit.
- 3.6. Assistance Sites shall not utilize interests or affiliations for purposes of soliciting or persuading customers to enroll in a specific health insurance plan, switch from one plan to another, or to select a particular provider.
- 3.7. Assistance Sites shall monitor Health Coverage Guides they employ, contract with or otherwise supervise for fair and impartial performance of Health Coverage Guide duties.
- 3.8. Assistance Sites shall adhere to COHBE monitoring and reporting requirements.

Appendix 4: SAMPLE Connect for Health Assistance Network Grant Agreement

The contents of this agreement are provided as an example. The terms of this agreement are subject to change without notice prior to execution by the parties.

This Agreement, entered into between the Colorado Health Benefit Exchange (COHBE) and _____ (Grantee), is part of COHBE's "Connect for Health Assistance Network" to fund and certify Assistance Sites to supervise Health Coverage Guides as part of COHBE's efforts to serve Coloradans by providing impartial information and assistance with the application and enrollment experience.

1. Scope of Work: The grant shall be used exclusively for the purposes described below and as submitted in the Grantee's project proposal dated _____, 2013, and appended hereto as Attachment X.

2. Use of Grant Funds:

A. Approved Budget: Grant funds shall be expended in accordance with the budget and timeline submitted by the Grantee.

B. Budget Revisions: Transfers among line items of the approved budget of \$_____ or more must receive prior written approval from COHBE, as must any transfer of funds to a new line item.

C. Unexpended Funds: Within 60 days after the close of the grant period or the termination of the grant, the Grantee shall return to COHBE any funds not expended or committed for the purposes of this grant within the grant period (or any authorized extension of the grant period). COHBE, at its sole discretion, may extend the original time limit for expenditure of grant award funds following approval of an extended project timeline. This will be an extension with no additional funds.

3. Duration: This Agreement is effective upon its execution by the parties and remains in force for one year or until such time as the obligations and conditions imposed by or otherwise associated with the Grant expire. COHBE may terminate this Agreement should it at any time determine that such termination is in the COHBE's best interest, provided that such termination shall be in writing and be provided to Grantee at least thirty (30) days in advance of the effective date of termination. In the event of such termination, COHBE will pay Grantee for all services rendered, up to the effective date of termination, it being acknowledged that during the notice period, Grantee will wind-down its

responsibilities under the Grantee's project proposal, and in consultation with COHBE, determine which specific activities should be terminated as soon as possible and which should be continued until the effective date of termination.

4. Unapproved Expenditures. Any expenditure of grant funds not in accordance with the approved budget submitted or not consistent with the purposes stated in the Grantee proposal are subject to prior approval by the COHBE, in its sole discretion. Should any expenditure be disallowed or should the Grantee violate any of the terms of this Agreement, COHBE may require repayment, an offset from this Grant to the Grantee in the current or succeeding fiscal year, or other appropriate action.

5. Use of Real or Personal Property/ Equipment: The Grantee shall ensure that real or personal property or equipment purchased under this Grant is used solely for the purposes of the Grant. The Grantee shall keep an inventory of all such purchases. The schedule in Attachment X to this Agreement lists due dates for project reports, expenditure reports, and grant payments. The Grantee shall submit required reports on or before the date due, preferably by electronic mail, following COHBE's guidelines and formats. Upon receipt, review, and approval of Grantee reports, COHBE shall issue grant payments.

6. Insurance: Assistance Sites and Regional Hubs will be liable for the conduct of the Health Coverage Guides under their supervision, including (but not limited to) compliance with the roles and responsibilities set out in this Funding Opportunity Announcement and the COHBE-Grantee Agreement. Assistance Sites will be required to hold COHBE harmless for any legal claims or damages resulting from the Sites Health Coverage Guides' actions. Grantees will be required to show proof of insurance prior to disbursement of grant funding.

7. Payment Schedule: <reserved>

8. Project Administration:

A. The Grantee will directly administer the project supported by the Grant and agrees that no Grant funds shall be disbursed to any organization or entity, whether or not formed by the Grantee, other than as specifically set forth in the project proposal cited above.

B. Subcontracts: The Grantee must ensure that all subcontracts and consulting or partnership agreements are in compliance with the terms of COHBE's award.

C. Project Revisions: Any material changes in the project goals, objectives, timetable, deliverables, budget, or evaluation plan must receive prior written approval from COHBE.

9. Grant Monitoring and Evaluation:

A. The Grantee agrees to attend meetings, participate in site visits, and give reports on progress and accomplishments to the Board of Directors of COHBE, COHBE staff and advisors, and other grantees as requested by COHBE.

B. Evaluation: The Grantee agrees to participate in any third-party evaluation of COHBE's grants program, including assisting with any data collection and information gathering, such as participation in surveys, site visits, meetings, and interviews with evaluators.

C. The Grantee agrees to provide monthly, quarterly and annual reports with quantitative data on characteristics of the target population and work performed.

D. The Grantee agrees to produce all documents and reporting required for monitoring of federal grant sub-recipients.

10. Reversion of Grant: COHBE may postpone or cancel unpaid installments of the Grant if, in COHBE's sole judgment, based on demonstrable facts and after providing Grantee with at least thirty (30) days' written notice and opportunity to cure, Grantee becomes unable to carry out the purposes of the Grant or ceases to be an appropriate means for accomplishing the purposes of the Grant. In any such case, the Grantee shall, at a minimum, within thirty days after written request by COHBE, repay the portions of the Grant received but not disbursed, and all portions of the Grant, which although disbursed, are within the Grantee control.

11. Non-Discrimination: The Grantee may not discriminate against any employee or applicant for employment because of race, color, religion, sex, national origin, sexual orientation, or any other characteristic forbidden as a basis for discrimination by applicable laws, and certifies that its Constitution or by-laws contains a non-discrimination clause consistent with all applicable law.

12. Collusion or Other Offenses:

A. Neither the Grantee, nor any of its officers or directors, has engaged in collusion with respect to the grantee's application for the Grant or this Agreement or has been convicted of bribery, attempted bribery, or conspiracy to bribe under the laws of any state or of the United States;

B. The Grantee has not employed or retained any person, partnership, corporation, or other entity, other than a bona fide employee or agent working for the Grantee, to solicit or secure the Grant or this Agreement, and the Grantee has not paid or agreed to pay any such entity any fee or other consideration contingent on the making of the Grant or this Agreement:

C. The Grantee, if incorporated, is registered or qualified in accordance with the Colorado Secretary of State's Office, and is in good standing, has filed all required annual reports and filing fees with all applicable State, County, and/or other local governmental jurisdictional bodies;

D. No money has been paid to or promised to be paid to any legislative agent, attorney, or lobbyist for any services rendered in securing the passage of legislation establishing or appropriating funds for the Grant; and

E. Neither the Grantee, nor any of its officers or directors, nor any person substantially involved in the contracting or fund-raising activities of the Grantee, is currently suspended or debarred from contracting with the State of any other public entity.

13. Financial Reporting Requirements:

A. On a quarterly basis, beginning on July 31, 2013, the Grantee shall provide to COHBE an itemized statement of expenditures, showing how the funds were expended for the preceding quarter. Additionally, within 60 calendar days after the close of the term of the grant, the Grantee shall provide to COHBE an itemized statement of expenditures, showing how the funds were expended for that fiscal year and shall mail a copy of the statement to COHBE. The Grantee must provide COHBE with any audited financial statements including qualified/unqualified opinion with comments for any year in which COHBE Grant funds are received.

B. When Grantee identifies a problem or barrier to meeting project timelines or deliverables, Grantee shall notify COHBE immediately. Notification shall include specific strategies to deal with or overcome the problem or barrier and shall include any required revisions to the timeline, budget or deliverables. Upon approval by COHBE, the proposed revisions shall be incorporated as an update to Grantee's work

plan for its project. Until approval by COHBE of any proposed revisions to the grant agreement or timeline currently in operation, the Grantee shall be responsible for completing all timeline requirements and objectives, as provided in that agreement, in a timely fashion.

C. Continued funding for an awarded project is contingent on the Grantee meeting the goals and objectives stated in the approved original or revised timeline and budget.

14. General Requirements:

A. The laws of Colorado shall govern the interpretation and enforcement of this Agreement.

B. The Grantee shall comply with the Standard Terms and Conditions of the Connect for Health Assistance Network Grant.

C. This Agreement shall bind the respective successors and assigns of the parties.

D. The Grantee may not sell, transfer, or otherwise assign any of its obligations under this Agreement, or its rights, title, or interest in this Agreement, without the prior written consent of COHBE.

E. No amendment to this Agreement is binding unless it is in writing and signed by both parties.

F. The following items are incorporated by reference and made a part of this Agreement.

Attachment 1: Connect for Health Assistance Network Funding Opportunity Announcement

Attachment 2: Grantee's Application submitted in response to Funding Opportunity Announcement

Attachment 3: Business Associate Agreement (HIPAA Agreement)

Attachment 4: Privacy and Security Agreement

Attachment 5: Conflict of Interest Disclosure and Statement

15. Non-availability of Funds: If third parties fail to make expected funds available (including funds which may be received from the federal government) for the continued performance for any fiscal

period of COHBE operations, this Agreement shall be canceled automatically as of the beginning of the fiscal year for which funds were not appropriated or otherwise made available; provided, however, that this will not affect either COHBE's rights or the Grantee's rights under any termination clause in this Agreement. The effect of termination of the Agreement hereunder will be to discharge both the Grantee and the COHBE from future performance of the Agreement, but not from their rights and obligations existing at the time of termination. COHBE shall notify the Grantee as soon as it has knowledge that funds may not be available for the continuation of this Agreement for each succeeding fiscal period beyond the first. Acceptance of Terms and Conditions: This document shall be signed by the Project Director and the individual legally authorized to execute contracts on behalf of the Grantee, signifying agreement to comply with all the terms and conditions specified above.

The above terms and conditions of the grant are hereby accepted and agreed to as of the date specified:

For: Colorado Health Benefit Exchange

By: _____

Date: _____

For: [Grantee]

By: _____

Date: _____