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Applicant: Epilepsy Foundation of Florida
Application Number: NAV2013000242
Project Title: Cooperative Agreement to Support Navigators in Federally-facilitated and State Partnership Exchanges
Status: Awarded

Grant Announcement

1. Cooperative Agreement to Support Navigators in Federally Facilitated and State Partnership Exchanges

Online Forms

1. SF-424 Application for Federal Assistance Version 2
 - (Upload #1): BudgetNarrativeAttachments-Attachments-1234-Nav Grant Budget Narrative1.pdf
 - (Upload #2): OtherNarrativeAttachments-Attachments-1238-Nav Grant Work Flow Diagram.pdf
 - (Upload #3): OtherNarrativeAttachments-Attachments-1237-Nav Grant Field Op diagram.pdf
 - (Upload #4): ProjectNarrativeAttachments-Attachments-1242-Nav Grant References.pdf
 - (Upload #5): ProjectNarrativeAttachments-Attachments-1241-Nav Grant.pdf
 - (Upload #6): OtherNarrativeAttachments-Attachments-1236-Nav Grant Work Plan1.pdf
 - (Upload #7): OtherNarrativeAttachments-Attachments-1239-Nav Grant Resumes.pdf
 - (Upload #8): OtherNarrativeAttachments-Attachments-1235-Nav Grant Cover Ltr.pdf
 - (Upload #9): OtherNarrativeAttachments-Attachments-1240-Nav Grant Ltr of Rec.pdf
 - (Upload #10): Form PerformanceSite_1_4-V1.4.pdf
2. SF-424A Budget Information - Non-Construction
3. SF-424B Assurances - Non-Construction
4. SF-LLL Disclosure of Lobbying Activities
5. Project Abstract Summary
6. Key Personnel

Program Narrative

1. CCIIO - Budget Narrative (Upload File)
2. CCIIO - Project Narrative (Upload File)

Additional Information to be Submitted

1. CCIIO - Miscellaneous Information

Note: Upload document(s) printed in order after online forms.

Application for Federal Assistance SF-424

Version 02

*** 1. Type of Submission:**

- Preapplication
- Application
- Changed/Corrected Application

*** 2. Type of Application:**

- New
- Continuation
- Revision

* If Revision, select appropriate letter(s):

* Other (Specify)

*** 3. Date Received:**

06/06/2013

4. Applicant Identifier:

5a. Federal Entity Identifier:

*** 5b. Federal Award Identifier:**

State Use Only:

6. Date Received by State:

7. State Application Identifier:

8. APPLICANT INFORMATION:

*** a. Legal Name:**

Epilepsy Foundation of Florida

*** b. Employer/Taxpayer Identification Number (EIN/TIN):**

*** c. Organizational DUNS:**

d. Address:

*** Street1:**

Street2:

*** City:**

County:

*** State:**

Province:

*** Country:**

*** Zip / Postal Code:**

e. Organizational Unit:

Department Name:

Division Name:

f. Name and contact information of person to be contacted on matters involving this application:

Prefix:

*** First Name:**

Middle Name:

*** Last Name:**

Suffix:

Title:

Chief Executive Officer

Organizational Affiliation:

*** Telephone Number:**

Fax Number:

*** Email:**

Application for Federal Assistance SF-424

Version 02

9. Type of Applicant 1: Select Applicant Type:

Nonprofit with 501C3 IRS Status (Other than Institution of Higher Education)

Type of Applicant 2: Select Applicant Type:

Type of Applicant 3: Select Applicant Type:

* Other (specify):

*** 10. Name of Federal Agency:**

CMS-Consumer Information & Insurance Oversight

11. Catalog of Federal Domestic Assistance Number:

93.750

CFDA Title:

PPHF – 2013 - Cooperative Agreement to Support Navigators in Federally-facilitated and State Partnership Ex

*** 12. Funding Opportunity Number:**

CA-NAV-13-001

* Title:

PPHF 2013 Cooperative Agreement to Support Navigators in Federally-facilitated and State Partnership Exchanges

13. Competition Identification Number:

Title:

PPHF – 2013 – Cooperative Agreement to Support Navigators in Federally-facilitated and State Partnership Exchanges

14. Areas Affected by Project (Cities, Counties, States, etc.):

*** 15. Descriptive Title of Applicant's Project:**

Cooperative Agreement to Support Navigators in Federally-facilitated and State Partnership Exchanges

Attach supporting documents as specified in agency instructions.

Application for Federal Assistance SF-424 Version 02

16. Congressional Districts Of:
* a. Applicant [REDACTED] * b. Program/Project [REDACTED]

Attach an additional list of Program/Project Congressional Districts if needed.
[REDACTED]

17. Proposed Project:
* a. Start Date: 08/15/2013 * b. End Date: 08/14/2014

18. Estimated Funding (\$):

* a. Federal	<u>637686.52</u>
* b. Applicant	<u>40683.12</u>
* c. State	<u>233406.81</u>
* d. Local	<u>0</u>
* e. Other	<u>0</u>
* f. Program Income	<u>0</u>
* g. TOTAL	<u>911776.45</u>

*** 19. Is Application Subject to Review By State Under Executive Order 12372 Process?**
 a. This application was made available to the State under the Executive Order 12372 Process for review on [REDACTED]
 b. Program is subject to E.O. 12372 but has not been selected by the State for review.
 c. Program is not covered by E.O. 12372.

*** 20. Is the Applicant Delinquent On Any Federal Debt? (If "Yes", provide explanation.)**
 Yes No

21. *By signing this application, I certify (1) to the statements contained in the list of certifications and (2) that the statements herein are true, complete and accurate to the best of my knowledge. I also provide the required assurances** and agree to comply with any resulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties. (U.S. Code, Title 218, Section 1001)**
 ** I AGREE
** The list of certifications and assurances, or an internet site where you may obtain this list, is contained in the announcement or agency specific instructions.

Authorized Representative:
Prefix: [REDACTED] * First Name: [REDACTED]
Middle Name: [REDACTED]
* Last Name: [REDACTED]
Suffix: [REDACTED]
* Title: Chief Executive Officer
* Telephone Number: [REDACTED] Fax Number: [REDACTED]
* Email: [REDACTED]
* Signature of Authorized Representative [REDACTED] * Date Signed: 06/06/2013

Application for Federal Assistance SF-424

Version 02

*** Applicant Federal Debt Delinquency Explanation**

The following field should contain an explanation if the Applicant organization is delinquent on any Federal Debt. Maximum number of characters that can be entered is 4,000. Try and avoid extra spaces and carriage returns to maximize the availability of space.

BUDGET INFORMATION - Non-Construction Programs

SECTION A - BUDGET SUMMARY

Grant Program Function or Activity (a)	Catalog of Federal Domestic Assistance Number (b)	Estimated Unobligated Funds		New or Revised Budget		
		Federal (c)	Non-Federal (d)	Federal (e)	Non-Federal (f)	Total (g)
1. Cooperative Agreement to	93.750			\$637,686.52	\$274,089.93	\$911,776.45
2.						
3.						
4.						
5. Totals				\$637,686.52	\$274,089.93	\$911,776.45

SECTION B - BUDGET CATEGORIES

6. Object Class Categories	GRANT PROGRAM, FUNCTION OR ACTIVITY				Total (5)
	(1) Cooperative Agreement to § (2)	(3)	(4)		
a. Personnel	\$101,920.00				\$101,920.00
b. Fringe Benefits	\$21,646.52				\$21,646.52
c. Travel	\$11,200.00				\$11,200.00
d. Equipment	\$22,120.00				\$22,120.00
e. Supplies	\$5,000.00				\$5,000.00
f. Contractual	\$411,920.00				\$411,920.00
g. Construction					
h. Other	\$63,880.00				\$63,880.00
i. Total Direct Charges (sum of 6a-6h)	\$637,686.52				\$637,686.52
j. Indirect Charges					
k. TOTALS (sum of 6i and 6j)	\$637,686.52				\$637,686.52
7. Program Income					

Authorized for Local Reproduction

SECTION C - NON-FEDERAL RESOURCES					
(a) Grant Program	(b) Applicant	(c) State	(d) Other Sources	(e) TOTALS	
8 Cooperative Agreement to Support Navigators in Federally-fac	\$40,683.12	\$233,406.81		\$274,089.93	
9.					
10.					
11.					
12. TOTAL (sum of lines 8-11)	\$40,683.12	\$233,406.81		\$274,089.93	
SECTION D - FORECASTED CASH NEEDS					
	Total for 1st Year	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter
13. Federal	\$637,686.52	\$159,421.63	\$159,421.63	\$159,421.63	\$159,421.63
14. Non-Federal	\$274,089.93	\$68,522.49	\$68,522.48	\$68,522.48	\$68,522.48
15. TOTAL (sum of lines 13 and 14)	\$911,776.45	\$227,944.12	\$227,944.11	\$227,944.11	\$227,944.11
SECTION E - BUDGET ESTIMATES OF FEDERAL FUNDS NEEDED FOR BALANCE OF THE PROJECT					
(a) Grant Program	FUTURE FUNDING PERIODS (Years)				
	(b) First	(c) Second	(d) Third	(e) Fourth	
16. Cooperative Agreement to Support Navigators in Federally-fac	\$637,686.52				
17.					
18.					
19.					
20. TOTAL (sum of lines 16-19)	\$637,686.52				
SECTION F - OTHER BUDGET INFORMATION					
21. Direct Charges:		22. Indirect Charges:			
23. Remarks:					

ASSURANCES - NON-CONSTRUCTION PROGRAMS

Public reporting burden for this collection of information is estimated to average 15 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0040), Washington, DC 20503.

PLEASE DO NOT RETURN YOUR COMPLETED FORM TO THE OFFICE OF MANAGEMENT AND BUDGET. SEND IT TO THE ADDRESS PROVIDED BY THE SPONSORING AGENCY.

NOTE: Certain of these assurances may not be applicable to your project or program. If you have questions, please contact the awarding agency. Further, certain Federal awarding agencies may require applicants to certify to additional assurances. If such is the case, you will be notified.

As the duly authorized representative of the applicant, I certify that the applicant:

1. Has the legal authority to apply for Federal assistance and the institutional, managerial and financial capability (including funds sufficient to pay the non-Federal share of project cost) to ensure proper planning, management and completion of the project described in this application.
2. Will give the awarding agency, the Comptroller General of the United States and, if appropriate, the State, through any authorized representative, access to and the right to examine all records, books, papers, or documents related to the award; and will establish a proper accounting system in accordance with generally accepted accounting standards or agency directives.
3. Will establish safeguards to prohibit employees from using their positions for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain.
4. Will initiate and complete the work within the applicable time frame after receipt of approval of the awarding agency.
5. Will comply with the Intergovernmental Personnel Act of 1970 (42 U.S.C. §§4728-4763) relating to prescribed standards for merit systems for programs funded under one of the 19 statutes or regulations specified in Appendix A of OPM's Standards for a Merit System of Personnel Administration (5 C.F.R. 900, Subpart F).
6. Will comply with all Federal statutes relating to nondiscrimination. These include but are not limited to: (a) Title VI of the Civil Rights Act of 1964 (P.L. 88-352) which prohibits discrimination on the basis of race, color or national origin; (b) Title IX of the Education Amendments of 1972, as amended (20 U.S.C. §§1681-1683, and 1685-1686), which prohibits discrimination on the basis of sex; (c) Section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C. §794), which prohibits discrimination on the basis of handicaps; (d) the Age Discrimination Act of 1975, as amended (42 U.S.C. §§6101-6107), which prohibits discrimination on the basis of age; (e) the Drug Abuse Office and Treatment Act of 1972 (P.L. 92-255), as amended, relating to nondiscrimination on the basis of drug abuse; (f) the Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation Act of 1970 (P.L. 91-616), as amended, relating to nondiscrimination on the basis of alcohol abuse or alcoholism; (g) §§523 and 527 of the Public Health Service Act of 1912 (42 U.S.C. §§290 dd-3 and 290 ee- 3), as amended, relating to confidentiality of alcohol and drug abuse patient records; (h) Title VIII of the Civil Rights Act of 1968 (42 U.S.C. §§3601 et seq.), as amended, relating to nondiscrimination in the sale, rental or financing of housing; (i) any other nondiscrimination provisions in the specific statute(s) under which application for Federal assistance is being made; and, (j) the requirements of any other nondiscrimination statute(s) which may apply to the application.
7. Will comply, or has already complied, with the requirements of Titles II and III of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 (P.L. 91-646) which provide for fair and equitable treatment of persons displaced or whose property is acquired as a result of Federal or federally-assisted programs. These requirements apply to all interests in real property acquired for project purposes regardless of Federal participation in purchases.
8. Will comply, as applicable, with provisions of the Hatch Act (5 U.S.C. §§1501-1508 and 7324-7328) which limit the political activities of employees whose principal employment activities are funded in whole or in part with Federal funds.

- Will comply, as applicable, with the provisions of the Davis-Bacon Act (40 U.S.C. §§276a to 276a-7), the Copeland Act (40 U.S.C. §276c and 18 U.S.C. §874), and the Contract Work Hours and Safety Standards Act (40 U.S.C. §§327- 333), regarding labor standards for federally-assisted construction subagreements.
10. Will comply, if applicable, with flood insurance purchase requirements of Section 102(a) of the Flood Disaster Protection Act of 1973 (P.L. 93-234) which requires recipients in a special flood hazard area to participate in the program and to purchase flood insurance if the total cost of insurable construction and acquisition is \$10,000 or more.
 11. Will comply with environmental standards which may be prescribed pursuant to the following: (a) institution of environmental quality control measures under the National Environmental Policy Act of 1969 (P.L. 91-190) and Executive Order (EO) 11514; (b) notification of violating facilities pursuant to EO 11738; (c) protection of wetlands pursuant to EO 11990; (d) evaluation of flood hazards in floodplains in accordance with EO 11988; (e) assurance of project consistency with the approved State management program developed under the Coastal Zone Management Act of 1972 (16 U.S.C. §§1451 et seq.); (f) conformity of Federal actions to State (Clean Air) Implementation Plans under Section 176(c) of the Clean Air Act of 1955, as amended (42 U.S.C. §§7401 et seq.); (g) protection of underground sources of drinking water under the Safe Drinking Water Act of 1974, as amended (P.L. 93-523); and, (h) protection of endangered species under the Endangered Species Act of 1973, as amended (P.L. 93- 205).
 12. Will comply with the Wild and Scenic Rivers Act of 1968 (16 U.S.C. §§1271 et seq.) related to protecting components or potential components of the national wild and scenic rivers system.
 13. Will assist the awarding agency in assuring compliance with Section 106 of the National Historic Preservation Act of 1966, as amended (16 U.S.C. §470), EO 11593 (identification and protection of historic properties), and the Archaeological and Historic Preservation Act of 1974 (16 U.S.C. §§469a-1 et seq.).
 14. Will comply with P.L. 93-348 regarding the protection of human subjects involved in research, development, and related activities supported by this award of assistance.
 15. Will comply with the Laboratory Animal Welfare Act of 1966 (P.L. 89-544, as amended, 7 U.S.C. §§2131 et seq.) pertaining to the care, handling, and treatment of warm blooded animals held for research, teaching, or other activities supported by this award of assistance.
 16. Will comply with the Lead-Based Paint Poisoning Prevention Act (42 U.S.C. §§4801 et seq.) which prohibits the use of lead-based paint in construction or rehabilitation of residence structures.
 17. Will cause to be performed the required financial and compliance audits in accordance with the Single Audit Act Amendments of 1996 and OMB Circular No. A-133, "Audits of States, Local Governments, and Non-Profit Organizations."
 18. Will comply with all applicable requirements of all other Federal laws, executive orders, regulations, and policies governing this program.
 19. Will comply with the requirements of Section 106(g) of the Trafficking Victims Protection Act (TVPA) of 2000, as amended (22 U.S.C. 7104) which prohibits grant award recipients or a sub-recipient from (1) Engaging in severe forms of trafficking in persons during the period of time that the award is in effect (2) Procuring a commercial sex act during the period of time that the award is in effect or (3) Using forced labor in the performance of the award or subawards under the award.

<p>* SIGNATURE OF AUTHORIZED CERTIFYING OFFICIAL</p> 	<p>* TITLE</p> <p>Chief Executive Officer</p>
<p>* APPLICATION ORGANIZATION</p> <p>Epilepsy Foundation of Florida</p>	<p>* DATE SUBMITTED</p> <p>06/06/2013</p>

Standard Form 424B (Rev. 7-97) Back

DISCLOSURE OF LOBBYING ACTIVITIES

Approved by OMB
0348-0046

Complete this form to disclose lobbying activities pursuant to 31 U.S.C.1352
(See reverse for public burden disclosure.)

1. Type of Federal Action: <input type="checkbox"/> a. contract <input checked="" type="checkbox"/> b. grant c. cooperative agreement d. loan e. loan guarantee f. loan insurance	2. Status of Federal Action: <input type="checkbox"/> a. bid/offer/application <input checked="" type="checkbox"/> b. initial award c. post-award	3. Report Type: <input type="checkbox"/> a. initial filing <input checked="" type="checkbox"/> b. material change
4. Name and Address of Reporting Entity: <input checked="" type="checkbox"/> Prime <input type="checkbox"/> Subawardee Tier _____, if known: Epilepsy Foundation of Florida <div style="background-color: black; width: 150px; height: 20px; margin: 5px 0;"></div> Congressional District, if known:	5. If Reporting Entity in No. 4 is a Subawardee, Enter Name and Address of Prime:	
6. Federal Department/Agency: Department of Health and Human Services	7. Federal Program Name/Description: PPHF 2013 - Cooperative Agreement to Support Navigators in Federally-facilitated and State Partnership Exchanges CFDA Number, if applicable: 93.750	
8. Federal Action Number, if known:	9. Award Amount, if known: \$	
10. a. Name and Address of Lobbying Registrant <i>(if individual, last name, first name, MI):</i> N/A, N/A	b. Individuals Performing Services <i>(including address if different from No. 10a)</i> <i>(if individual, last name, first name, MI):</i> N/A, N/A	
11. Information requested through this form is authorized by title 31 U.S.C. section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when the transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be reported to the Congress semi-annually and will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.	Signature: <div style="background-color: black; width: 150px; height: 20px; display: inline-block;"></div> Print Name: <div style="background-color: black; width: 150px; height: 20px; display: inline-block;"></div> Title: Chief Executive Officer Telephone No: <div style="background-color: black; width: 100px; height: 20px; display: inline-block;"></div> Date: 06/06/2013	

Project Abstract Summary

Program Announcement (CFDA)
 93.750

*** Program Announcement (Funding Opportunity Number)**
 CA-NAV-13-001

*** Closing Date**
 06/07/2013

*** Applicant Name**
 Epilepsy Foundation of Florida

*** Length of Proposed Project: 1**

Application Control No.

Federal Share Requested (for each year)

* Federal Share 1st Year	* Federal Share 2nd Year	* Federal Share 3rd Year
\$ 637,686.00	\$ 0.00	\$ 0.00
* Federal Share 4th Year	* Federal Share 5th Year	
\$ 0.00	\$ 0.00	

Non-Federal Share Requested (for each year)

* Non-Federal Share 1st Year	* Non-Federal Share 2nd Year	* Non-Federal Share 3rd Year
\$ 274,089.00	\$ 0.00	\$ 0.00
* Non-Federal Share 4th Year	* Non-Federal Share 5th Year	
\$ 0.00	\$ 0.00	

*** Project Title**
 Cooperative Agreement to Support Navigators in Federally-facilitated and State Partnership Exchanges

Project Abstract Summary

* Project Summary

The Epilepsy Foundation of Florida (EFOF) is a community and consumer-focused not-for-profit organization. It was established in 1971 and is the sole licensee of the National Epilepsy Foundation in the state of Florida. Our clients include those who are diagnosed with epilepsy and their families and caretakers. There are approximately 375,000 Floridians who are diagnosed with epilepsy and 24% of Floridians are uninsured. This estimates uninsured people with epilepsy at 90,000. Including their families and caretakers, this number approximates 322,200 people who we are uniquely tailored to serve. We would also utilize our existing partnerships with school and universities, government agencies, hospitals, and faith-based entities to further spread the word on our Navigator services.

People with epilepsy are a vulnerable and isolated population given that their condition renders many of them unable to drive and their unemployment rate is over three times greater than that in the state of Florida. The EFOF prides itself in its ability to reach people with epilepsy and provide culturally appropriate services in four languages, English, Spanish, Portuguese, and Creole, as our clients are mostly Hispanic, African-American, and Haitian in origin. We are exquisitely sensitive to the needs of people with disabilities as we already represent clients who are disabled. The EFOF is in a unique position to provide Navigator services to a group of people that is isolated and difficult to reach.

In addition, our goal as Navigators will be to extrapolate our unique ability to reach the isolated and under-served in order to reach all uninsured Floridians. We envision accomplishing this by educating our intake, social services, and community outreach personnel as Navigators. We will add a program director, assistant, intake personnel, and field operatives in order to further reach the uninsured community in Florida. This will total 40 FTE trained Navigators. The community outreach specialists will conduct public education activities in the language of choice in order to raise awareness about the Exchange and the EFOF Navigator services. The role of the field operatives will be two-fold: first to form partnerships within the community at universities, schools, faith-based centers, hospitals, and other places of business with whom the EFOF already has connections and second to attract volunteers to inform communities about the Exchange and EFOF Navigator services. We will advertise our services on our multilingual web site, social media, via mailings, and radio. Our multilingual and multicultural patient Navigators will maintain expertise in the eligibility, enrollment, and program specifications of the health insurance plans available through the Exchange in order to facilitate selection of a QHP. As a not-for-profit, the EFOF Navigators will be fair, impartial, and unbiased providers of information and support regarding the different insurance opportunities and determine eligibility for other programs such as Medicaid or CHIP. The Navigators will also be providers of information and referral to any applicable office of health insurance consumer assistance or health insurance ombudsman or any other appropriate state agency or agencies should any grievance arise. We will thus have a three prong approach which utilizes first our existing connection with the multicultural epilepsy community in Florida, second our established connection with government agencies, hospitals, universities, faith-based entities, and businesses, and third new-formed connections through the field operatives in order to get the word out and provide an efficient one-stop health care Navigation center. We budget the cost as \$637,686.52 in order to serve a minimum of 15% of the uninsured community in Florida.

* Estimated number of people to be served as a result of the award of this grant.: 562200

Upload #1

Applicant: Epilepsy Foundation of Florida
Application Number: NAV2013000242
Project Title Cooperative Agreement to Support Navigators in Federally-facilitated and State Partnership Exchanges
Status: Awarded
Document Title: BudgetNarrativeAttachments-Attachments-1234-Nav Grant Budget Narrative1.pdf

Budget Narrative

Personnel	Description	Budget Amount
Project Director	TBD, 1 FTE@\$29.00/hour x 40 hours x 52 weeks/year Responsible for the management of the Navigation program and all its employees	\$60,320.00
Assistant Project Director	TBD, 1 FTE@\$20.00/hour x 40 hours x 52 weeks/year Assist project director and take care of any human resources issues that may arise for the Navigation team	\$41,600.00
Total		\$101,920.00

Fringe Benefits	Description	Budget Amount
FICA	6.2% of salary per FTE	\$6,319.04
Medicare	1.45% of salary per FTE	\$1,477.84
SUTA	5.4% of salary per FTE	\$756.00
Health	\$5,741.56/FTE x 12 months x 80% paid by employer	\$9,186.50
Life	\$32.00/month/FTE x 12 months	\$768.00
Workers Compensation	1.08% of salary per FTE	\$1,100.74
403B Retirement	2% of salary per FTE	\$2,038.40
Total		\$21,646.52

Travel	Description	Budget Amount
Local Travel for Program Staff	300 miles/month x \$0.445/mile x 12 months x 2.5 FTE Cover costs of community resource team and Project Director travel mileage	\$4,000.00
Travel Stipend	6 contractual FTE field operatives x \$100.00/month x 12 months Cover travel costs of field operatives	\$7,200.00
Total		\$11,200.00

Equipment	Description	Budget Amount
Laptops/Tablets	at \$750.00 each x 14 program staff For program staff in order to enable Navigation services as they work in the field	\$10,500.00
Wireless Cards	\$50.00/month x 12 months x 14 program staff For program staff in order to enable Navigation services as they work in the field	\$8,400.00
Scanners	at \$230.00 each x 14 program staff For program staff in order to enable Navigation services as they work in the field	\$3,220.00
Total		\$22,120.00

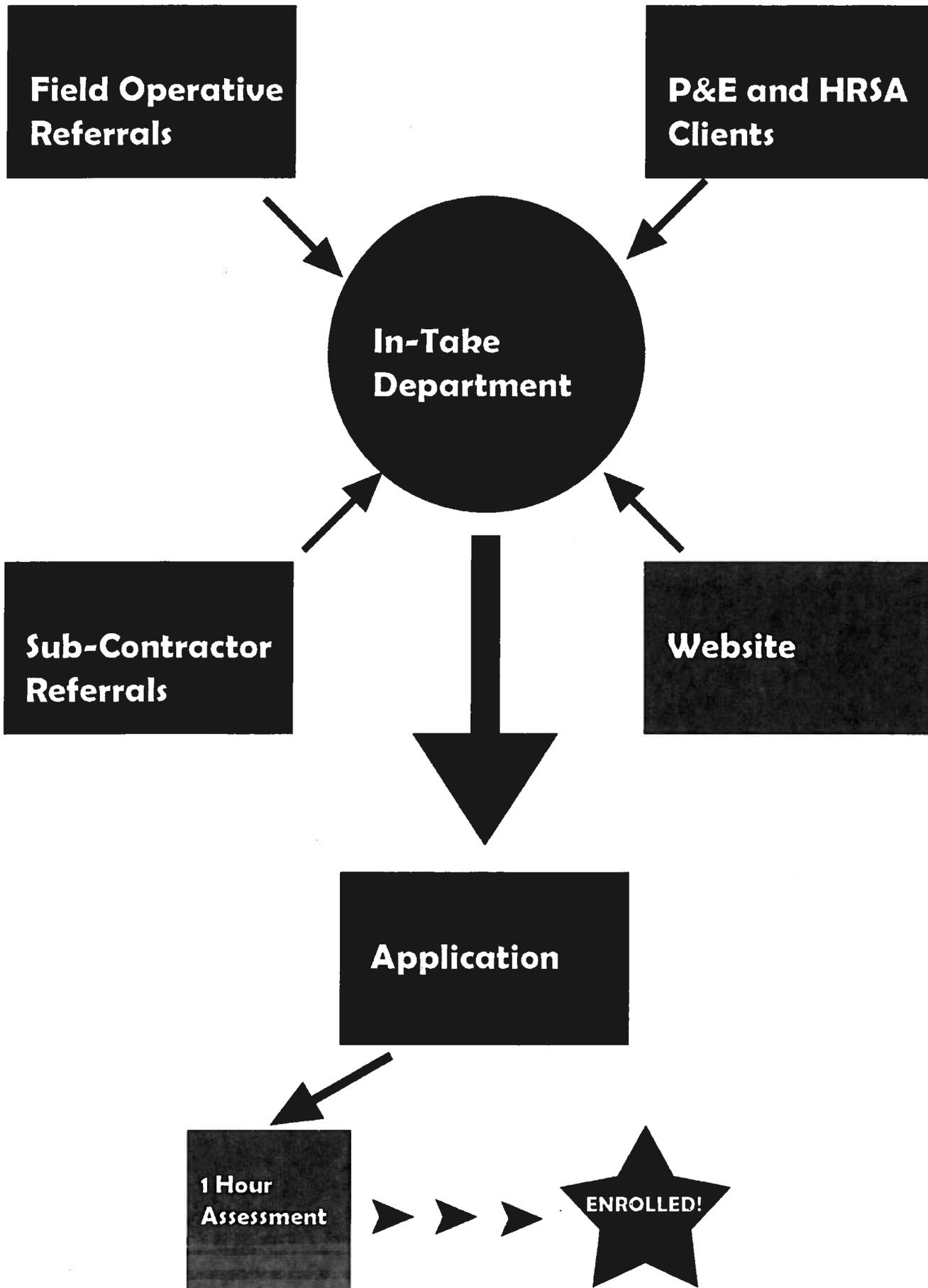
Supplies	Description	Budget Amount
Office Supplies	\$416.67/month x 12 months For basic office supplies such as pens and stationary	\$5,000.00
Total		\$5,000.00

Contractual	Description	Budget Amount
Intake Specialists	\$18.00/hour x 40 hours x 52 weeks/year x 3 FTE Expand Navigation capabilities with additional Intake staff	\$112,320.00
Field Operatives	\$20.00/hour x 40 hours x 52 weeks/year x 6 FTE Work at universities and surrounding communities to educate about EFOF Navigator services	\$249,600.00
Subcontractors	Enable partnering with other organizations for further reach in the state and stipends for very dedicated volunteers	\$50,000.00
Total		\$411,920.00
Construction		Budget Amount
None needed		\$0.00
Other	Description	Budget Amount
Web Design	Create new website to offer consumers information about EFOF Navigation services and educate about ACA and the Exchange	\$10,000.00
Domain Hosting	\$50.00/month x 12 months - Maintain website	\$600.00
Search Engine Optimization	\$200.00/month x 12 months Manage Navigator data	\$2,400.00
Software Database	\$480.00/month x 12 months Manage Navigator data	\$5,760.00
Stipend for cell phones	\$40.00/month x 12 months x 14 program staff Enable field work	\$6,720.00
1-800 Number	\$100.00/month x 12 months Enable patient Navigator enrollment services throughout the state of Florida	\$1,200.00
Postage & Courier Services	Enable mass mailings of brochures to further educate consumers about EFOF Navigator services	\$1,200.00
IT Support	\$1,000/month x 12 months Necessary for the initiation and maintenance of new computer hardware and internet access through secure server	\$12,000.00
Advertising & Marketing	Services required to attract consumers to the EFOF Navigator program	\$20,000.00
Brochures - Printing & Design	\$0.20 per brochure for 20,000 brochures Continue to inform the Florida community about EFOF Navigator services and educate about ACA and the Exchange	\$4,000.00
Total		\$63,880.00
Budget Total		\$637,686.52

Upload #2

Applicant: Epilepsy Foundation of Florida
Application Number: NAV2013000242
Project Title Cooperative Agreement to Support Navigators in Federally-facilitated and State Partnership Exchanges
Status: Awarded
Document Title: OtherNarrativeAttachments-Attachments-1238-Nav Grant Work Flow Diagram.pdf

Flow of clients from target population to enrollment

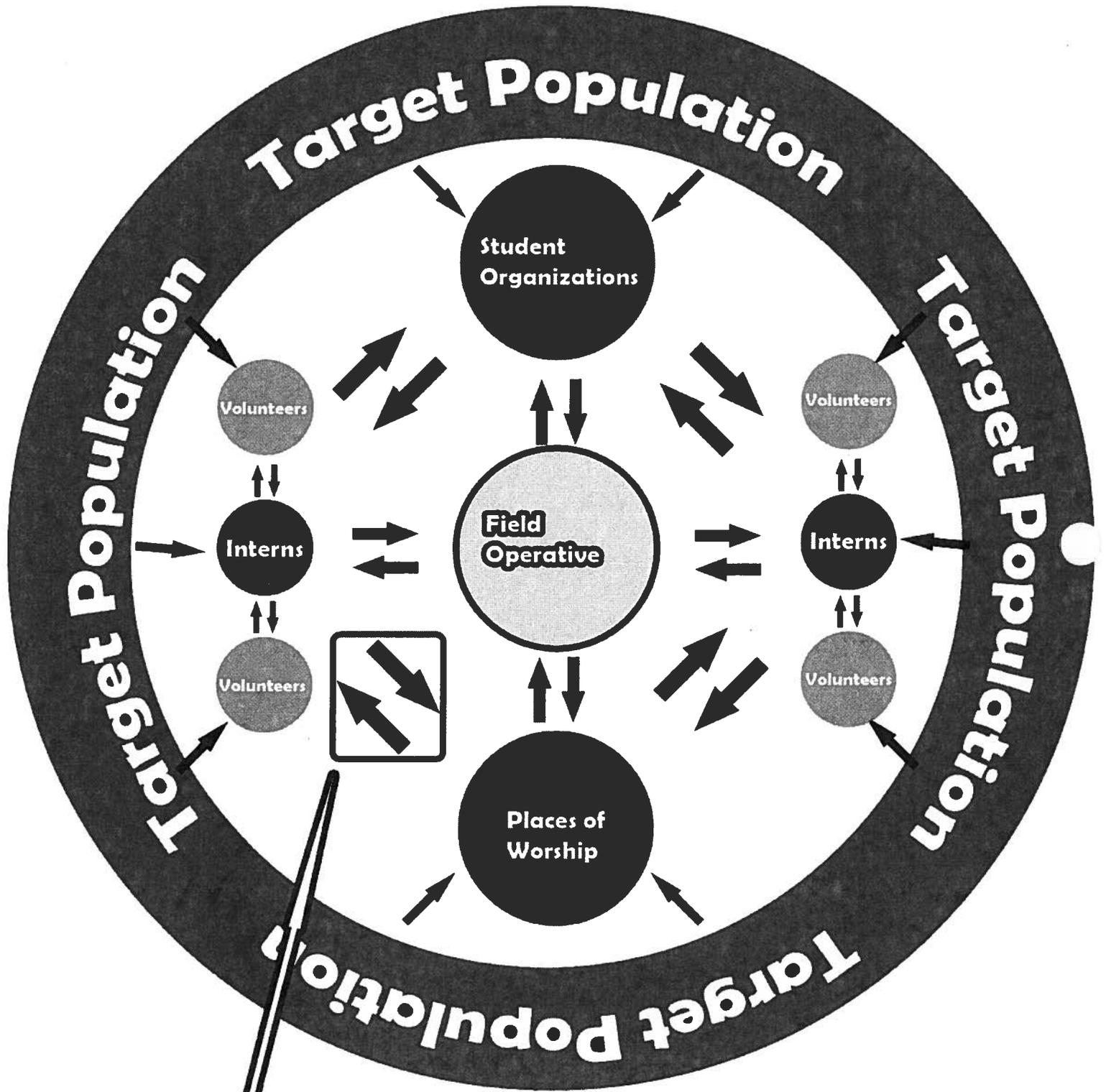


Upload #3

Applicant: Epilepsy Foundation of Florida
Application Number: NAV2013000242
Project Title Cooperative Agreement to Support Navigators in Federally-facilitated and State Partnership Exchanges
Status: Awarded
Document Title: OtherNarrativeAttachments-Attachments-1237-Nav Grant Field Op diagram.pdf

Field Operative Work Flow Diagram

Client flow from target population to field Operatives



= Flow of ideas and resources between two leadership points, but clients always flow towards field operative, who then refers them to In-take

Upload #4

Applicant: Epilepsy Foundation of Florida
Application Number: NAV2013000242
Project Title Cooperative Agreement to Support Navigators in Federally-facilitated and State Partnership Exchanges
Status: Awarded
Document Title: ProjectNarrativeAttachments-Attachments-1242-Nav Grant References.pdf

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Upload #5

Applicant: Epilepsy Foundation of Florida
Application Number: NAV2013000242
Project Title Cooperative Agreement to Support Navigators in Federally-facilitated and State Partnership Exchanges
Status: Awarded
Document Title: ProjectNarrativeAttachments-Attachments-1241-Nav Grant.pdf

Project Narrative

Introduction

Twenty-four percent of Floridians are uninsured according to the Kaiser Family Foundation website (<http://kff.org/>). That is 3,509,164 people under the age of 65 making Florida the third state with the greatest number of uninsured, California and Texas being first and second respectively. 1 in 26 people will develop epilepsy at some point during their lifetime and Florida houses 375,000 people¹ with epilepsy. Using this data, we can infer that twenty-four percent of these are uninsured, that is, 90,000 people with epilepsy. This is a conservative estimate considering the various factors affecting the epilepsy population. The unemployment rate is over three times greater among epilepsy sufferers. The unemployment rate as of March 2013 in the state of Florida is 7.5%² and among those with epilepsy is 25%³. The uninsured rate of EFOF clients is 60%. Further complicating access to health care for some epilepsy sufferers is their restricted driving privileges. To regain them, the State of Florida requires that they be seizure-free for a period of two years or for 6 months with a doctor's certification⁴. This makes our epilepsy population that much more difficult to reach and serve. The EFOF has access to and over 42 years experience of working with this vulnerable and underinsured population, especially those that come from low-income, ethnically diverse and faith backgrounds.

Although every American should have health insurance representation, it is more critical for epilepsy sufferers. The risk of sudden death in the general population under the age of forty is 1 in 50,000 person-years⁵. The risk of SUDEP, sudden unexplained death in epilepsy, for the same age group is 17 in 50,000 person-years⁶. Untreated epilepsy triples the incidence of sudden death in people with one to two seizures per year. This rate increases dramatically with seizure frequency. For example, a person who suffers one to two seizures per month is twenty

times more likely to die unexpectedly and suddenly. The Epilepsy Foundation of Florida (EFOF) represents Floridians who are diagnosed with epilepsy (or are in the process of determining whether or not they have epilepsy) and their families and caretakers. By counting the 90,000 uninsured epilepsy sufferers and their family, approximating the average US household size of 2.58⁷, and one additional caretaker, the EFOF is confident it will serve a minimum of 322,200 people through our existing outreach methods alone. This number is close to 10 percent of the uninsured population in the state of Florida. Our representation of those with epilepsy and their families and caretakers operates regardless of their financial position or socioeconomic status. As a result, the EFOF is uniquely available to help this vulnerable and underserved population navigate the new health insurance marketplace.

Our community outreach team provides the community with educational presentations about epilepsy and head injury prevention. They also attend health fairs and other networking activities to further educate the community about EFOF services and increase awareness. In addition that have had an active presence in places of worship, especially in low-income and ethnically diverse communities by speaking to their congregants directly about epilepsy and EFOF's programs. As patient navigators, their reach to more than 160,000 individuals per year would continue to grow so that awareness about our patient Navigator services will expand.

In addition to having access to Floridians with epilepsy and our current community outreach, EFOF has two additional outreach coordinators that are experienced in community and campus organizing. They have been hired to specifically create a greater presence for the Epilepsy Foundation in low income, ethnic minority, faith-based and youth communities throughout the state by recruiting volunteers from major universities and colleges and creating

a collaborative network that will help raise awareness of the foundation and the services it provides. The innovative technique that they will employ relies on a method of organizing known as “crowd-sourcing” where the manpower of the local community will be leveraged to create quality awareness of the Patient Navigation program among targeted individuals through the power of peer-to-peer contact. They will leverage not just the resources that EFOF has to offer, but also those of the campuses and surrounding communities, in order to ensure suitable awareness of epilepsy and Patient Navigation. The innovations in community organizing that our outreach efforts will employ will enable us to reach an even larger network of individuals for potential Navigator related functions that also happen to be particularly prone to living without insurance, namely low-income ethnic minorities and religious communities. This “crowd sourcing” outreach alone will allow us to touch the lives of students at 6 different Florida universities, and their surrounding communities, focusing on Hispanic and African-American communities, and would put us in a position to reach as many as 1,000,000 additional people.

The combination of our existing outreach to current client networks and our planned expansion to low-income ethnic minorities and communities of faith will enable us to have a potential reach of 562,200 people or just over 15% of Florida’s uninsured population.

Type of Entity: Who We Are

The EFOF was established in 1971 as a not-for-profit 501 (c) (3) company and is the sole licensee of the National Epilepsy Foundation in the state of Florida. The mission of the EFOF is to lead the fight to stop seizures and SUDEP, find a cure, and overcome challenges created by epilepsy through efforts including education, advocacy, and research to accelerate ideas into

therapies. The EFOF has offices in New Smyrna Beach, Fort Lauderdale, Fort Walton Beach, Gainesville, Jacksonville, Miami, Pensacola, Stuart, and West Palm Beach and serves 35 of Florida's 67 counties. The EFOF provides a wide array of services to its multicultural clients, such as, case management, medical and neuropsychological care, information, referral and support, community outreach, counseling, and resource materials. All our services are offered in four languages: English, Spanish, Portuguese, and Creole. Our staff and Board of Directors are culturally diverse and reflect the ethnic composition inherent in the state of Florida. Case management involves providing plans of care which are tailored to meet the specific needs of the client and family. The purpose of information, referral and support is threefold: first, to establish the EFOF as the focal point for general information on epilepsy; second, to provide support mechanisms for individuals, families, and friends coping with the emotional stresses that result from having the disorder; and third, to provide referrals to other social services and health agencies. The EFOF is a community and consumer-focused organization as evidenced by the fact that 91 cents of every dollar that is filtered through the foundation goes to the care of our clients and their families. With these services in place, assisting our clients and their families and caretakers with the task of navigating the health care marketplace would be a natural extension of the EFOF's mission and work.

The multi-lingual and cultural community outreach team through presentations and awareness events, such as health fairs, serves over 160,000 people per year throughout the state of Florida. We have an 877- call center and the multi-lingual intake department services over 500 callers per month on average with a range of 336 to 743 callers per month. Our multi-lingual social services team cares for a total of over 5000 clients. These numbers indicate that

the EFOF serves over 172,000 people per year in a personal manner. The breadth of our contacts is much wider, however, when the internet and social media are accounted for as well. Our web site has 4900 visitors per month on average, that is, over 58,000 visitors per year. We publish a monthly newsletter whose mailing list is over 15,000 subscribers. As health care Navigators, we will publicize our services through our existing community outreach team as well as through internet approaches, including the creation of a new, Patient Navigator specific website in three languages, in order to inform as many Floridians as possible about our new role in the community. Our trained intake department will then be prepared to assist all callers, in the language of their choice, informed through these mediums.

In addition, two of our community outreach coordinators, focused on “crowd-sourcing,” will handle outreach to an even broader population. They come with a background in community and campus organizing, and are well –versed in leveraging the community’s organic assets in pursuit of broad social change. They have created broad and effective coalitions of student organizations at their respective Alma Maters that have been able to leverage student volunteers as community organizers and service project participants off the campus. This was accomplished by creating coalitions of not simply students, but also student organizations and having them participate in service as entire units of able bodied volunteers working towards the same goal.

This year, plans were for them to be positioned at key campuses in the Miami area to establish a greater presence for EFOF among college aged youth. This outreach is designed to give us deeper penetration in the community, focusing on establishing a grassroots movement to help combat epilepsy and raise awareness for it. It is also to expand our reach beyond our

current capacities, and hopefully capture a larger share of the uninsured epilepsy population in Florida, which currently stands at 90,000. As part of the Navigator duties, their outreach will be expanded to 6 universities across Florida and will have a particular focus on low-income ethnic minorities and communities of faith, and will be equipped to mobilize community groups in their language of choice.

The EFOF: Who We Are Not

The EFOF does not issue health insurance or benefit from the issue of any particular health insurance policy/company. We are not a subsidiary of any health insurance issuer or lobby on behalf of the insurance industry. We do not receive any direct or indirect consideration from any health insurance issuer in connection with the enrollment of individuals or employees in a qualified health plan (QHP) or non-QHP. Furthermore, The EFOF has no connection with stop loss insurance issuers, subsidiaries of stop loss insurance issuers, or receives any consideration from a stop loss insurance issuer for the enrollment of individuals into QHPs or non-QHPs.

We have a commitment to serve the public in a fair, accurate, and unbiased manner for what lies in the best interest of the client and their family. This would qualify our employees as fair and impartial advisors as Navigators.

Navigator Team

The EFOF proposes to train 15 FTE social service employees, 10 FTE intake specialists, 5 FTE community outreach coordinators, and 6 FTE Field Operatives who will be representative of the ethnic diversity present in Florida's population. The job of the intake specialist is to answer

our 877 call center in the language of choice and would thus act as the front line in providing Navigator services to individuals from across Florida. Social service employees already assist our clients with obtaining health care coverage and would thus be well prepared to take on the navigator duties. The community outreach team provides the community with information about epilepsy, epilepsy first aid, and prevention of head injuries. They would also be trained navigators who could then provide presentations in the language of choice about the new health care exchange and assist the public in knowing that the EFOF is here to help. The field operatives, with their mobile offices, will be out in the community acting as Navigators. Our team will act as an efficient one-stop shopping health care Navigator center.

This team will be led by the EFOF Chief Executive Officer, [REDACTED] who brings more than 15 years of successful experience in nonprofit administration to the EFOF. She oversees all EFOF programs, works directly with our Board, and spearheads all fundraising and financial management efforts. She has overall responsibility for supervising all 46 EFOF staff and the Statewide Program. Since joining the EFOF in late 2005, [REDACTED] has succeeded in merging the Northeast, Panhandle, and South Florida organizations into the statewide EFOF, has initiated strategic planning, and has begun a media campaign to strengthen the impact of EFOF in Florida.

Accomplishments: Our Expertise

The EFOF is well-equipped to perform all the specific navigator responsibilities as per statutory and regulatory requirements for the entire length of the cooperative agreement. Our social services team already assists with eligibility requirements for enrollment for medical services within the Foundation and channels qualified applicants to Medicaid and CHIP as

appropriate. The team is led by [REDACTED] who has a Bachelor's degree in psychology and over 15 years experience working with the EFOF.

Our 877 call center intake team is led by [REDACTED] who is Hispanic and trained to accommodate all levels of cultural diversity. As the intake supervisor, [REDACTED] trains and oversees a variety of routine tasks, including screening and intake of potential new clients applying for epilepsy services. The intake duties include interviewing, screening, determining eligibility, record keeping, information and referral, and activity reports.

Once the 30-hour training program and examination is completed by our relevant Patient Navigation staff, they will have become well-versed in the eligibility and enrollment rules and procedures. Those that do not qualify for Medicaid or Chip, will be assisted in enrolling in the best fit QHP for the individual and their family. This fit involves taking into consideration the health needs of the individual/family/caretaker and matching these with the best possible insurance that can be afforded.

The EFOF prides itself on being the multi-lingual, cultural information, referral, and support center for epilepsy in the state of Florida and can continue helping patients select the most appropriate QHP. We plan to become knowledgeable about the QHP metal levels, how they operate, the benefits each covers, and payment processes of each with their tax implications. We would then also educate people in the language of their choice about their rights and processes of appeal and expression of grievances and how to contact individual insurance plans as needed. Interested participants will also be referred to the appropriate federal, state, and local agencies for consumers seeking additional information about coverage options not offered through the Exchange.

We are prepared to provide these services in English, Spanish, Portuguese, and Creole thus addressing the language needs of our population. The Foundation will continue to be accessible to people with a variety of disabilities as we are already sensitive to the particular needs of any population and with the need to maintain client privacy and confidentiality in accordance with HIPAA. The EFOF can assist a wide variety of people with a spectrum of needs and channel these to the appropriate resource. Although our initial focus may be on the 90,000 uninsured Floridians with epilepsy and their families and caretakers, we will certainly pursue assisting the community at large with a focus on universities, ethnic minorities and faith-based centers. In addition, any new staff that is hired to help fulfill Patient Navigator functions will reflect the diversity of the target community to be served. This will be especially relevant for the 6 Field Operative FTEs who will be placed in ethnic-minority, low-income and faith communities around the state's major universities, and will be equipped to speak to the challenges that these disadvantaged and underserved communities face on a day-to-day basis.

The EFOF has two prior federal grants and has a well-developed computer security system developed in compliance with the security requirements delineated by these grants. These standards are in compliance with 45 C.F.R. 155.260 and would be extended to all computers, laptops, and tablets used during the term of the Navigator grant.

Community Ties

The Foundation already has a relationship with multiple community associations, universities, local government agencies, hospitals and faith-based institutions. To name a few they are the Florida Departments of Health and Children and Families, the United Way, Holy Cross Hospital, Cleveland Clinic of Florida, Miami Children's Hospital, University of Miami Health

System, University of Florida Shands Health System and the Episcopal Diocese of Southeast Florida. We frequently are asked to provide presentations to school teachers and administrative personnel, school nurses, city parks and recreation employees, police officers, emergency workers such as EMTs and fire fighters, and at other places of employment. We also have our multicultural client base throughout the state. In addition we have a strong faith-based presence with numerous African-American and Latino dominant faith-based centers throughout the state. One of our Community Outreach Coordinators is also a Eucharistic Minister at his church, and has been able to collaborate extensively with the Episcopal Diocese of Southeast Florida on a number of community initiatives targeted at low-income ethnic minorities. With such a strong community presence, educating these groups about our navigator role as part of our presentation protocol would be readily feasible.

Scope of Activities

Once awarded the grant on August 15, 2013, our staff will first mobilize its efforts to hire the additional multi-cultural staff needed and become certified to perform the duties of a Navigator. That means completing the 30-hour training as soon as it is offered. Once the training is completed by our Navigation team, we would begin the process of publicizing our Navigator role in the community and educating the public about the Exchange in multiple languages. This would involve making presentations throughout the state of Florida and announcing our Navigator services on our web site (in three languages), newsletter, Facebook, and Twitter. This process will be further facilitated by our community ties with hospitals, schools and universities, physicians, nurses, other emergency workers, other foundations, and faith-based entities in our communities. Our intake and social services personnel would call our

existing clients and their families and caretakers who are uninsured and inform them about our new role and their responsibility to obtain health insurance. Although our education efforts would persist throughout the year, once October 1st arrives, the enrollment process begins.

Our previous expertise with assisting our clients through the process of obtaining affordable health care will assist our intake and social services staff in facilitating selection of a QHP through the Exchange. As a not-for-profit organization, we lack any connections to health insurance issuers whatsoever and do not plan to form any ties with health insurance issuers in the future. This enables our staff to continue to provide information regarding health care in a fair, impartial, and unbiased manner. There is nothing to be gained or lost by our Foundation and staff pending the choices made by the public seeking health insurance.

Our multicultural training and experience as well as abilities to provide information in English, Spanish, Portuguese, and Creole will expand access to information in the Florida community. Our clients are from many different Hispanic nationalities, African-American, and Haitian as well and reflect our existing multi-cultural and linguistic expertise. We also assist clients with disabilities such as hearing impairments, wheelchair dependence for mobility, and intellectual disabilities and are prepared to assist all-comers regardless of special needs. Finally, we are well-versed in the maintenance of PII confidentiality and protection of PII. Our staff is HIPAA certified through a web-based training program.

Through the existing community outreach specialists we were already set to begin crowd sourcing this fall, the introduction of Patient Navigator responsibilities and resources allows us to greatly expand the potential and reach of these efforts across the state of Florida. The 6 new Field Operative FTEs will be headquartered at universities where the EFOF currently

has a local office presence. They are: the University of West Florida in Pensacola, the University of Florida in Gainesville, the University of North Florida in Jacksonville, Florida Atlantic University in Boca Raton, Nova Southeastern University in Davie and Florida Memorial University in Opa-Locka (an HBCU), respectively. These young individuals encompass the largest percentage group of the uninsured in the state of Florida. 60% of the uninsured in the state of Florida reside between the ages of 18 and 44⁸. By framing Patient Navigation as a powerful instigator for sweeping social change and poverty alleviation, an appetite for involvement in the functions of this program will be created amongst college-aged youth throughout the State of Florida, and through their help as volunteers and interns, our reach will grow exponentially until we reach nearly 1 million Floridians.

Field Operatives will recruit student volunteers to go and make presentations in places where ethnic minorities, faith communities and low-income youth are likely to congregate. Most of the time, that will be on the campus that they currently occupy as a headquarters, but it will also include the students of the surrounding neighboring community colleges and the faith-based centers that cater to a Latino or African-American or Afro-Caribbean demographic who are more disproportionately in need of a QHP. Volunteers will mainly be recruited from the university's student organizations, and whenever possible, these organizations will be invited to become official collaborative partners of EFOF. As partners, the organizations will be expected to perform at least one activity every quarter to raise awareness about Patient Navigation, and help enroll as many qualified applicants as possible. Dedicated volunteers will have the opportunity to apply for paid competitive internships that will allow them to more reliably dedicate their time towards Patient Navigation duties.

Volunteers, recruited by field operatives, will engage in three main activities: presentations, tabling, and partner identification. For presentations, volunteers will be trained on Patient Navigation to the extent that they will be able to make a brief pitch to interested applicants in the language of their choice about the program's potential benefits and how they can get in touch with our intake department to get enrolled. For tabling, volunteers, with field operatives whenever possible, will help man tables that will be set-up in places where low-income ethnic minorities and the spiritually minded are likely to congregate and spread awareness to passersby. For this to be effective, tables have to be in place in multiple locations for extended periods of time, and this will require volunteer manpower. For partner identification, volunteers will canvass local businesses, schools and faith-based entities either by phone or in-person, to see if they would be willing to host a presentation on Patient Navigation conducted either by the Field Operative, a trained intern, or a very dedicated volunteer.

Participating student organizations will compete with one another at each campus for the distinction of being the most valuable EFOF Patient Navigation partner. The winning organization will be awarded a partnership stipend from our partnership line-item in the budget, to allow them to continue working with us as an official partner in Patient Navigation. A similar competition could be set-up among faith-based centers of a local community, and faith-based centers in ethnic and low-income communities that establish themselves as reliable resources for Patient Navigation will also become eligible for a collaborative stipend to aid them in their efforts.

Field Operatives themselves will compete with one another to maximize productivity at every campus. They will meet certain metrics related to their recruitment of volunteers, and the referrals they garner for the intake department. These metrics will be: number of presentations, number of volunteers recruited, number of student organizations recruited as partners, number of community organizations recruited as partners with an emphasis on faith-based entities in low-income ethnic communities, and number of referrals coming from their service area. All of this data will be compiled into a Power Ranking that will be weighted by factors such as total population size and their socio-economic status.

As disseminators of information about epilepsy, we are accustomed to helping people obtain the medical care and services they need or provide medical care directly through the Foundation. As Navigators, we will continue to pride ourselves as disseminators of information by referring callers to any applicable office of health insurance consumer assistance or health insurance ombudsman. Consumers with a grievance, complaint, or question will be referred to the appropriate State agency or agencies and out of state callers will be referred to their State Navigators. Furthermore, we will maintain handy access to contact information for the appropriate federal, state, and local agencies for consumers seeking additional information about coverage options not offered through the Exchange.

Most importantly, throughout the year of the grant, our trained staff will maintain expertise in eligibility, enrollment, and program specifications by attending any additional training sessions beyond the initial 30-hour training session as recommended by HHS. This preparation will enable our staff to assist consumers in the selection of a QHP and, if needed, procedure for appealing an eligibility determination. Our staff will maintain knowledge about

how the QHPs operate, including benefits covered, payment processes, tax implications of enrollment decisions, rights and processes for appeals and grievances, and how to contact individual plans. We will also advise on the eligibility requirements for premium tax credits and cost-sharing reductions and the impact of premium tax credits on the cost of the premiums. All the while not losing sight of the benefits of having health insurance through the Exchange and how each individual has the responsibility of having health insurance.

In the final analysis, the Epilepsy Foundation of Florida is in a pivotal position to reach vulnerable populations, assist consumers, conduct public education and outreach activities, and provide information and services to individuals with varying levels of education and financial health literacy in a manner that is culturally and linguistically appropriate. The EFOF is accustomed to working with individuals with limited English proficiency, individuals with disabilities, populations underserved in the current health insurance market, and vulnerable populations throughout the state of Florida. In addition, our innovative Field Operative program, which will be advised by our experienced community outreach specialists, will give us expanded reach to a critical underserved population in the form low-income ethnic minorities and communities of faith. We will thus have a three prong approach which utilizes first our existing connection with the multicultural epilepsy community in Florida, second our established connection with government agencies, hospitals, universities, faith-based entities, and businesses, and third new-formed connections through the field operatives in order to get the word out and provide an efficient one-stop health care Navigation center.

Upload #6

Applicant: Epilepsy Foundation of Florida
Application Number: NAV2013000242
Project Title Cooperative Agreement to Support Navigators in Federally-facilitated and State Partnership Exchanges
Status: Awarded
Document Title: OtherNarrativeAttachments-Attachments-1236-Nav Grant Work Plan1.pdf

Goal	Objective	Activities	Staff Responsible	Timeframe
Part 1: Laying the Foundation				
Talent Search, Acquisition, and orientation	To find capable talent from a quality pool to man both leadership and subordinate positions, and orient them to expectations	National pool of applicants will be created through online and internal publication means. Social media will also be employed. Employees will be offered competitive salary as specified by HHS. They will then receive the written program summary and will attend an all-staff orientation	CEO [redacted] will conduct the talent search, make the final hiring decisions and will conduct orientation	Aug. 15th - 30th 2013
Training	Effectively train current and newly hired staff for Patient Navigation functions and responsibilities	Staff will undergo the required 30-Hour training, which they will be paid to do on time not normally dedicated to their EFOF responsibilities. They will meet with their supervisors at least twice for further clarification and orientation	Training will be undertaken by each individual staff person. In-Take head [redacted] Social Services head [redacted] Community Resource Head [redacted] and CEO [redacted] will meet with staff to discuss individual departmental expectations	Aug. 30th - Sept. 15th 2013
Promotion	To effectively promote the Patient Navigation program to Florida's uninsured epilepsy community, and to the community of uninsured individuals in the vicinity of the 6 university campuses where EFOF has a local office presence.	To internal network: All uninsured clients will be called by the case managers, will be e-mailed regarding Patient Navigation opportunities, and will be encouraged to have their families enroll. (Existing reach of 15,000 clients and their family members)	Social Services Dept. led by Case Manager [redacted]	Aug. 15th 2013 - Aug. 15th 2014
		To existing network: Community Resource Specialists and HRSA specialists will incorporate Patient Navigation curriculum into their existing education and advocacy efforts at schools and medical centers (Existing reach of 150,000 participants)	Community Resource Specialists will be led by Dept. Head [redacted]	
		To expanded network: A combination of social media, online marketing and community organizing at schools, churches, businesses, hospitals and other public gathering spaces conducted by field operatives (6 who have yet be hired) will allow us to reach underserved and uninsured communities of young and economically disadvantaged ethnic minorities and spiritually minded individuals. This campaign will also require raising awareness through posters, fliers and brochures (Expanded Reach to 500,000 targeted individuals, calculated by including college campus and reachable community networks in Gainesville, Jacksonville, Broward and Miami-Dade)	The Program Director, under close supervision from CEO [redacted] and advised by Marketing and Development Officers [redacted] and [redacted]	
Partner Acquisition	To acquire community partners that will give us access to their network and give us a greater chance of reaching the uninsured population of the State of Florida	Partner ID: Hospitals, Schools, Churches, Small Businesses and Trade Unions will be targeted for partnerships by Field Operatives.	Field Operatives and their interns/volunteers under supervision of the Program Director	Aug. 15th - Dec. 1st 2013
		Partner engagement: After they have been ID'd, Field Operatives will meet with partners to discuss material support, logistics and access to their network.	Field Operatives will handle negotiations with potential partners	

Part 2: Implementation of Program Functions

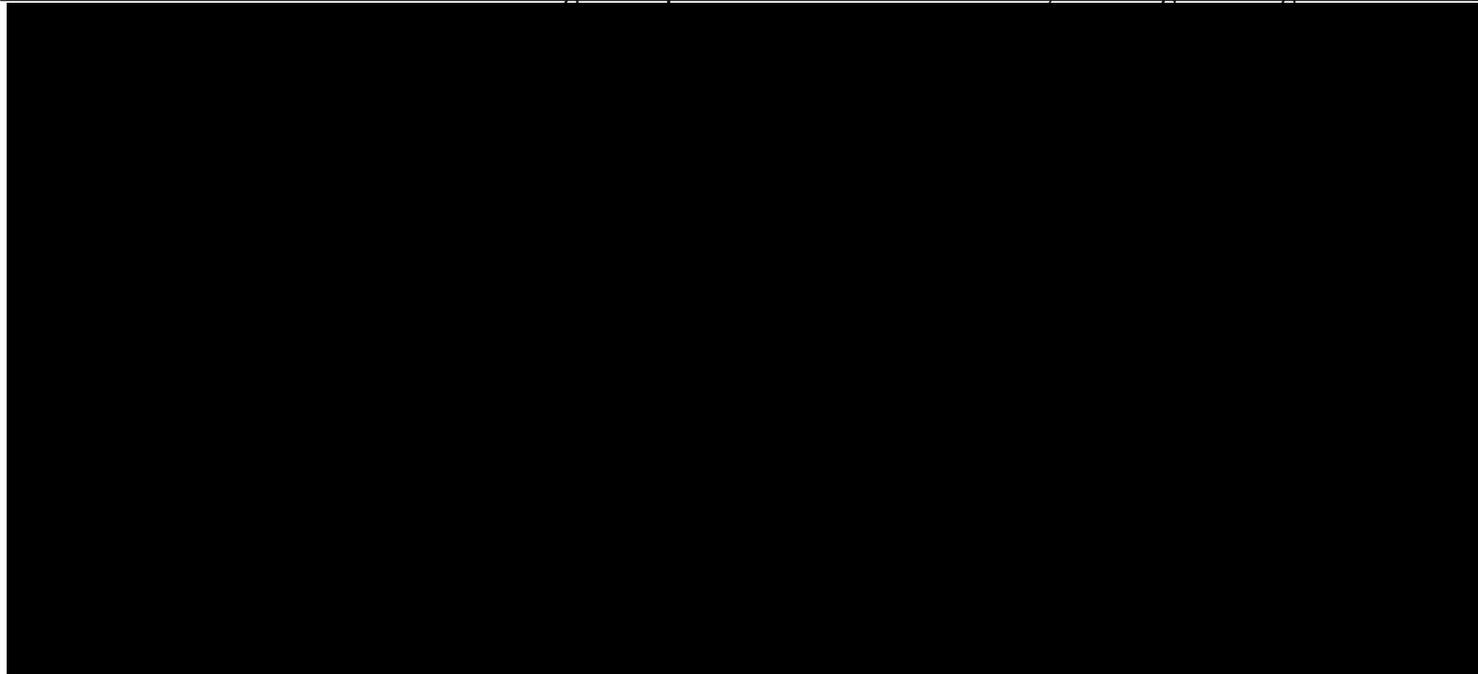
<p>In-Take</p>	<p>To navigate patients to their appropriate QHP, will handle all referrals from the field</p>	<p>In-take specialists (5 FTEs to be hired) in addition to the ones already employed by EFOF, will be trained on Patient Navigation enrollment, and will be the primary Patient Navigators, fielding all referrals that are not handled by case managers. Enrollment will be handled over the phone. A file will be opened for every new applicant. Will be monitored by the new database on a secure network to respect patient confidentiality</p>	<p>In-Take Department, led by Dept. head [REDACTED]</p>	<p>Oct. 1st 2013 - Aug. 15th 2014</p>
<p>Internal Outreach by Case Managers</p>	<p>To reach out to current EFOF clients, make them aware of the Patient Navigation opportunities, and enroll any interested clients themselves</p>	<p>Will be main POC for current clients of EFOF. Will be trained on Patient Navigation and will solely be in charge of enrolling current client network</p>	<p>Social Services Department led by Dept. Head [REDACTED]</p>	<p>Oct. 1st 2013- Aug. 15th 2014</p>
<p>Existing Network Outreach</p>	<p>To reach out to the participants of our various Prevention and Education events and programs by adding Patient Navigation curricula to the existing presentations</p>	<p>Community Resource Specialists will be main POC for participants of prevention and education presentations and activities. Presentations will include curricula on Patient Navigation. Specialists will refer interested parties to In-Take.</p>	<p>Community Resource Specialist led by [REDACTED]</p>	<p>Oct. 1st 2013- Aug. 15th 2014</p>
		<p>HRSA specialists will be main POC for HRSA participating children and families. Their presentations will incorporate curricula on Patient Navigation. Will refer interested families to In-Take.</p>	<p>HRSA specialists [REDACTED] and [REDACTED]</p>	<p>Oct. 1st 2013- Aug. 15th 2014</p>
<p>Expanded Network Outreach by Field Operatives</p>	<p>To reach out to the underserved population of uninsured young adults (18-35) and the community at large and refer them to In-take for Patient Navigation</p>	<p>Campus Organizers Will recruit student volunteers to enroll other uninsured students into a QHP. Will work with academic institutions to establish an official presence for EFOF on that campus by establishing an EFOF student organization (Sept. 1st –Oct. 1st). Then, they will construct a collaborative network between university student organizations and students at neighboring community colleges to engage the target demographic of the young and uninsured. (Oct. 1st-Nov. 1st) Referrals will go to In-Take. (Sept. 1st – Aug. 15th 2014). Dedicated volunteers will be offered structured internships with stipends so that they can more reliably dedicate their time to Patient Navigation. (First stipends to be awarded on Oct. 1st). Their reach will include the community at large of businesses, schools and community fixtures, with a special emphasis on faith based institutions</p>	<p>6 Field Operative FTEs, their interns and their volunteers under supervision from the Program Director</p>	<p>Student Organization establishment (Sept. 1st - Oct. 1st 2013)</p>
				<p>Collaborative Network Establishment (Oct. 1st - Nov. 1st 2013)</p>
				<p>Referrals will go to in-take (Sept. 1st 2013 - Aug. 15th 2014)</p>
				<p>Stipend to be awarded on Oct. 1st 2013</p>

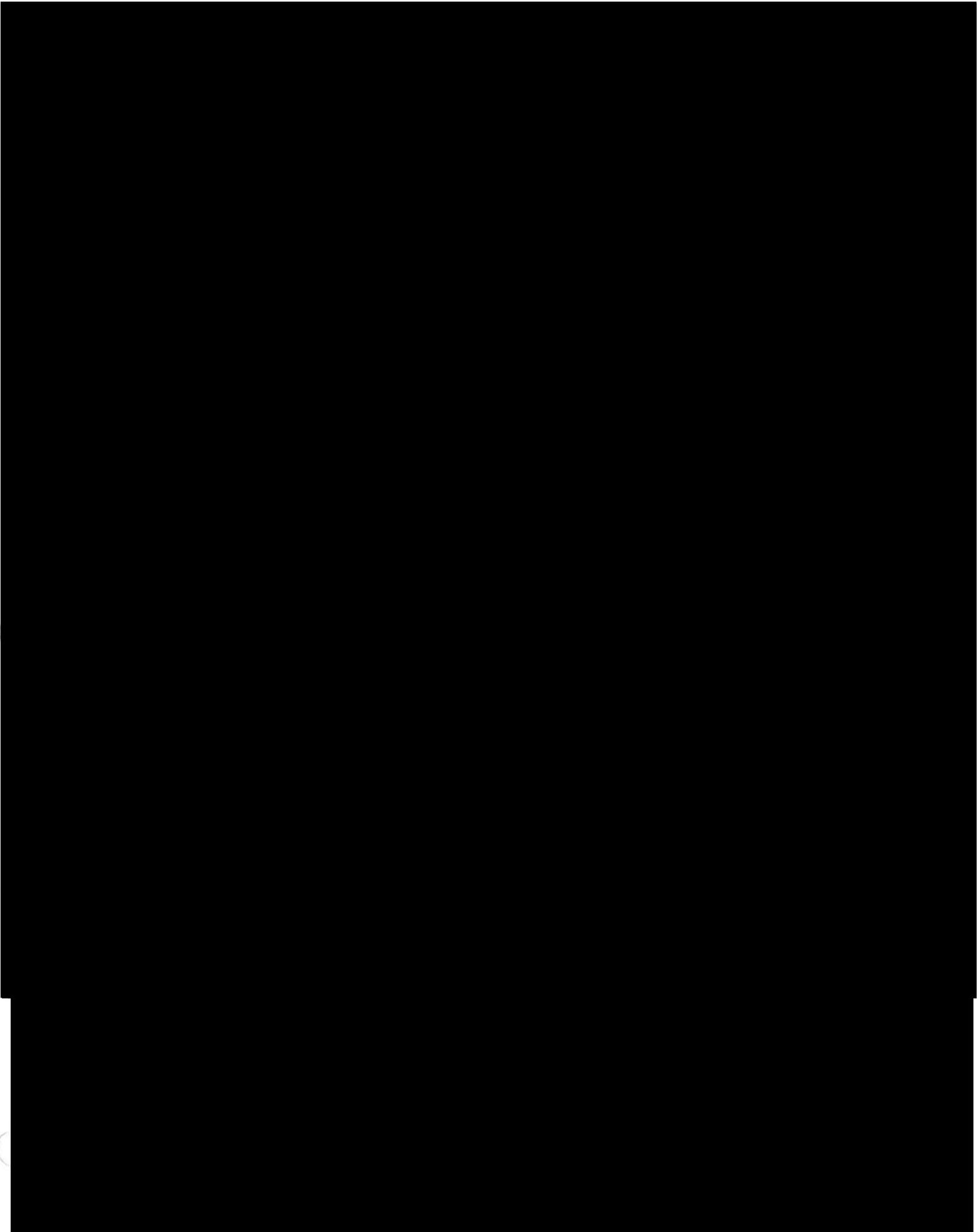
Part 3: Oversight, Accountability and Data

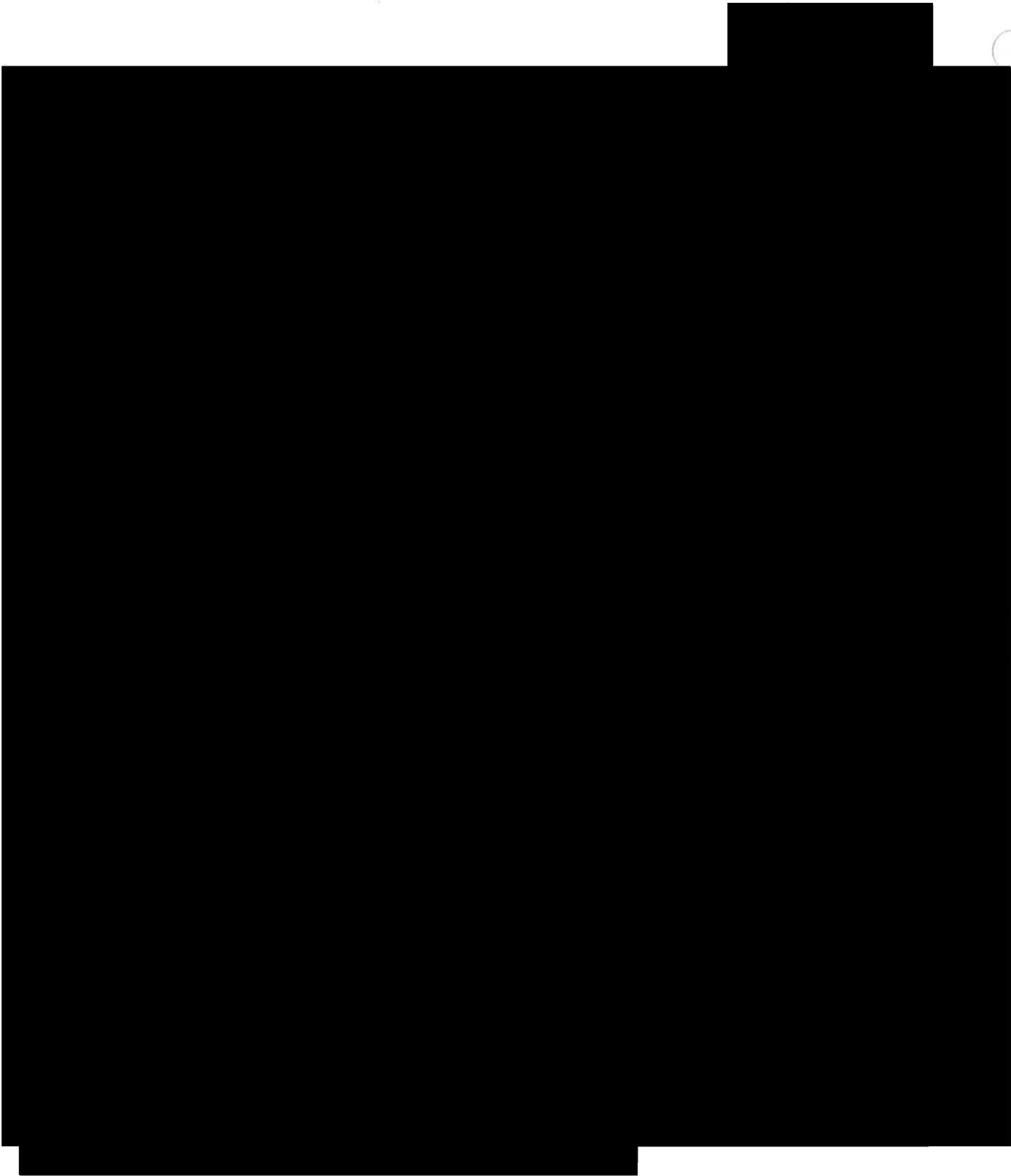
Internal and Existing Network Outreach	<p>To provide oversight for the outreach to and enrollment of EFOF clients and participants in the existing network. This will include any referrals to in-take from the expanded network</p>	<p>Data collected and synthesized by In-Take and Case Managers</p>	<p>In-take Head ██████████ and lead Case Manager ██████████</p>	<p>Oct. 1st 2013 - Aug. 15th 2014</p>
		<p>Department heads review data and make adjustments and recommendations where necessary, send CEO summary of program penetration, results and challenges</p>	<p>Dept. Heads: In-take led by ██████████ Social Services led by ██████████ Community Resources led by ██████████ reporting to CEO ██████████</p>	
Expanded Network Evaluations	<p>To provide oversight for the outreach to the expanded network of referrals that will include young adults, students, and members from the community at large</p>	<p>Field Operatives will meet certain metrics regarding number of presentations conducted, number of meetings held with community members, and number of referrals to In-Take. Numbers will be reported on a weekly basis into a Google Doc, and a weekly check-in by the Program Director will happen with each operative to discuss progress and room for improvement. A weekly conference call will also act as a forum to exchange ideas and offer constructive criticism.</p>	<p>Program Director and Assistant Program Director</p>	
		<p>Data collected by Field Operatives will be synthesized by Program Director, and will be used to make game-plan adjustments wherever necessary.</p>	<p>Program Director</p>	

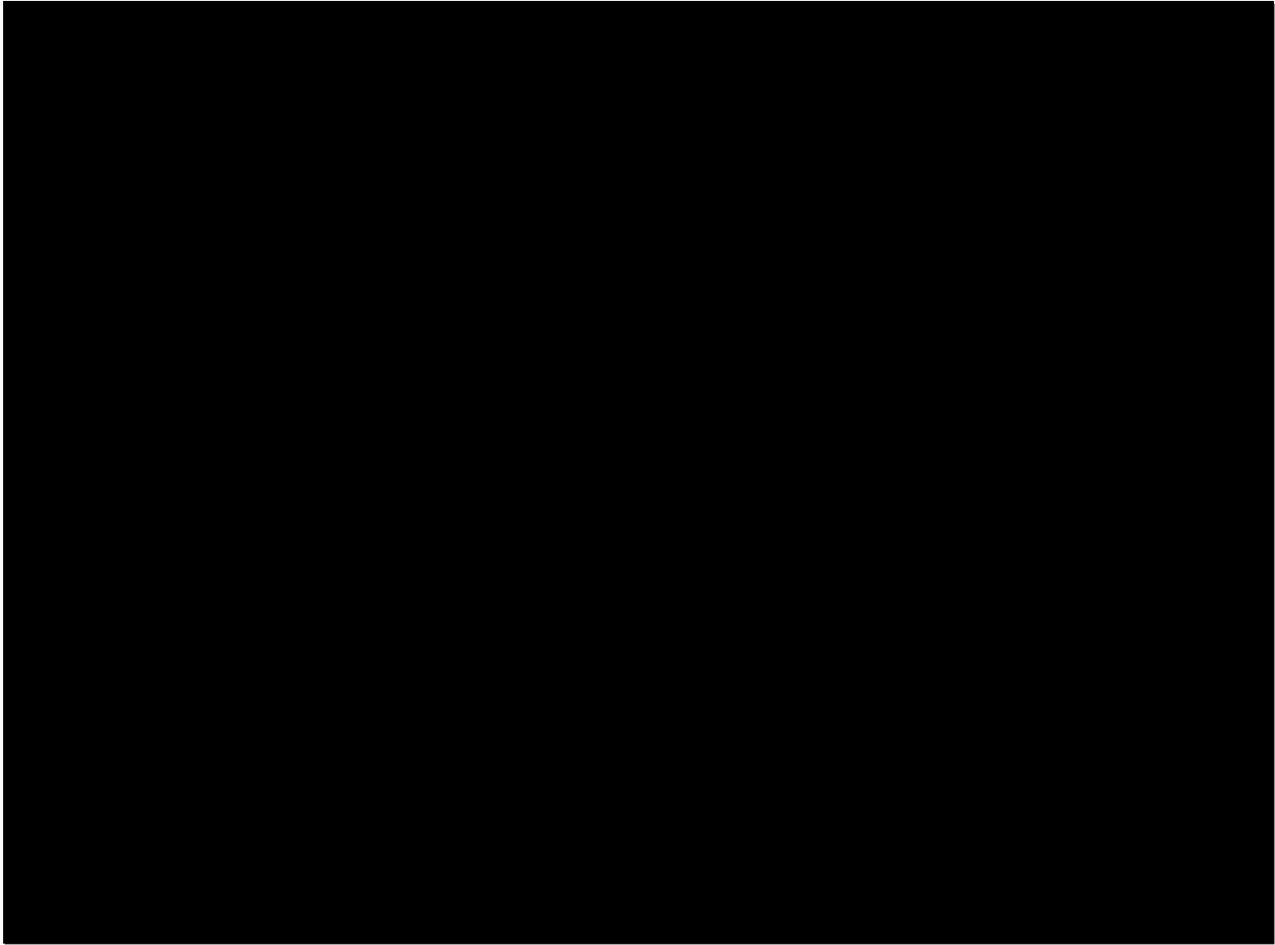
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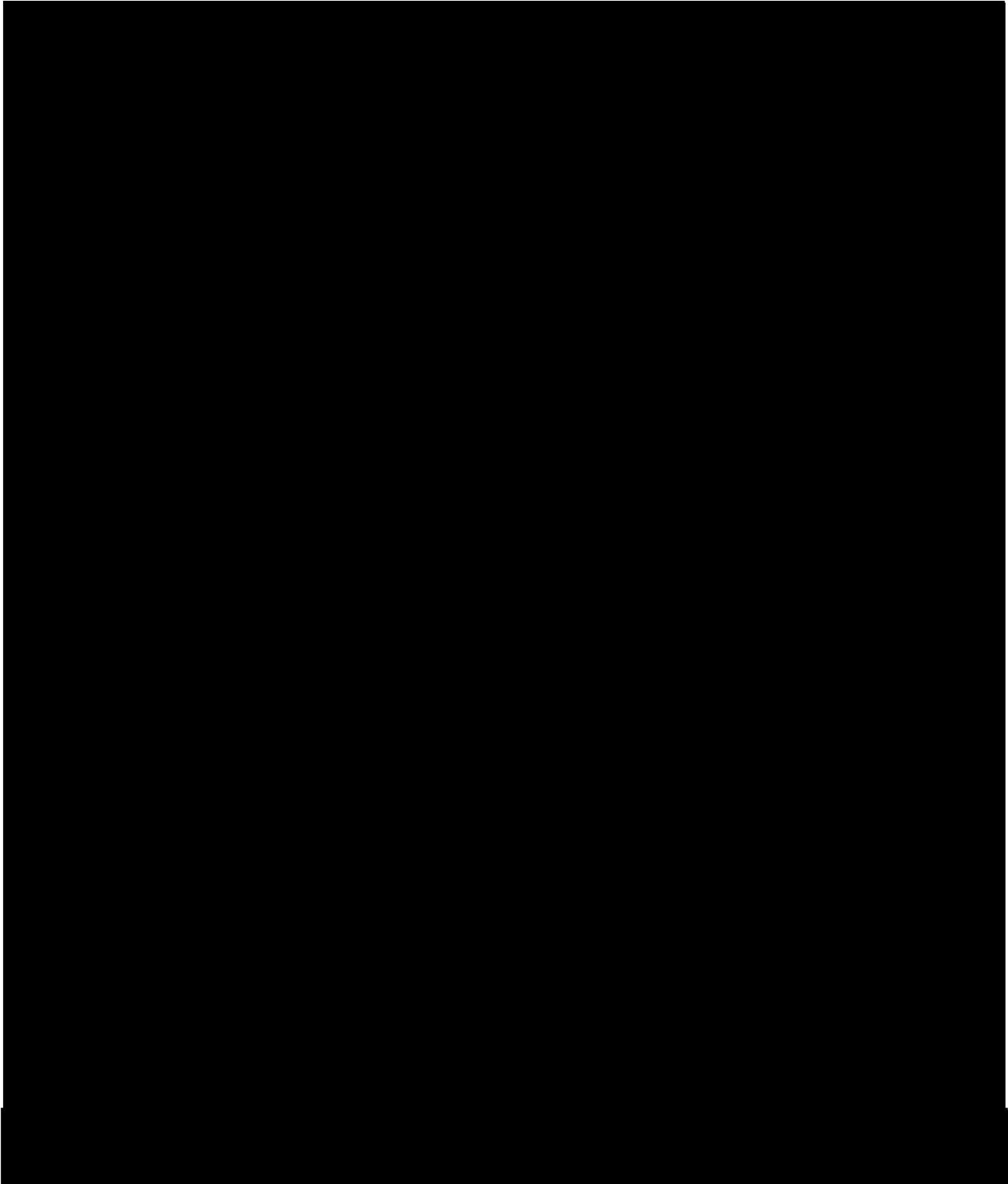
Applicant: Epilepsy Foundation of Florida
Application Number: NAV2013000242
Project Title Cooperative Agreement to Support Navigators in Federally-facilitated and State Partnership Exchanges
Status: Awarded
Document Title: OtherNarrativeAttachments-Attachments-1239-Nav Grant Resumes.pdf

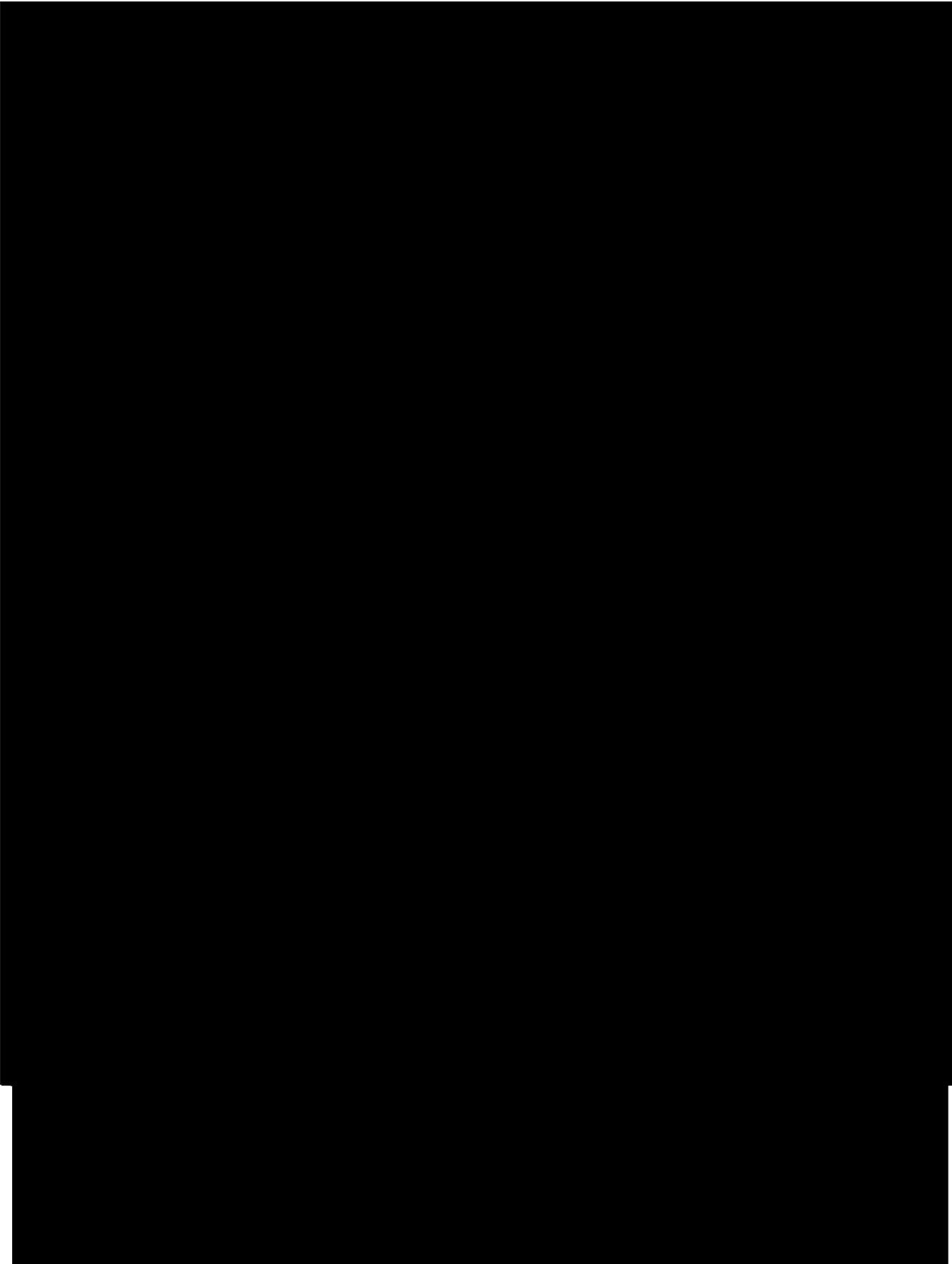


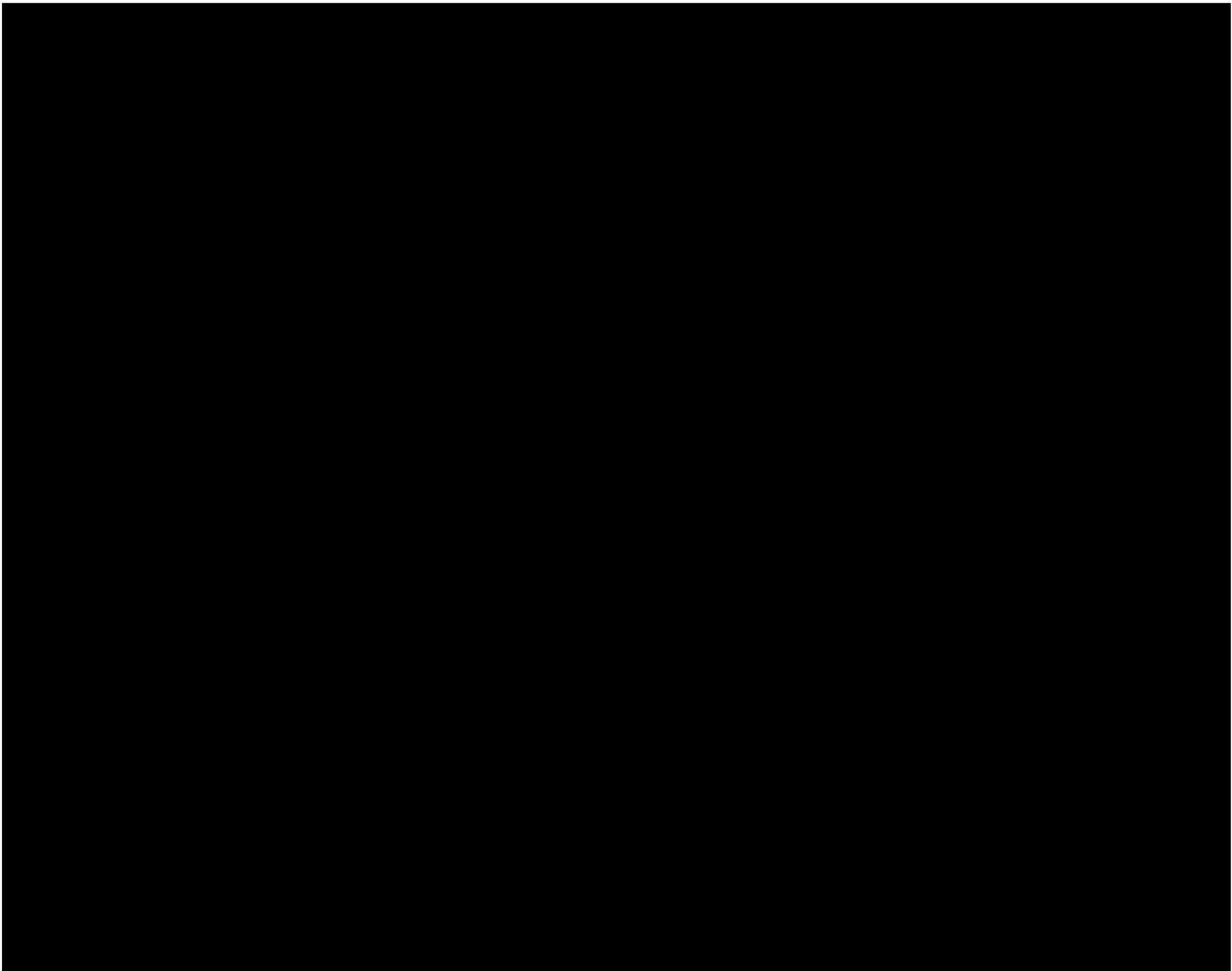


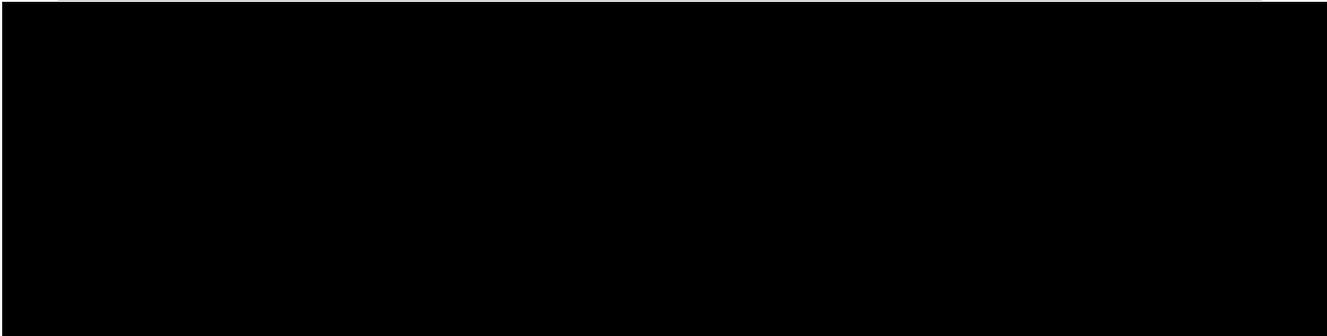
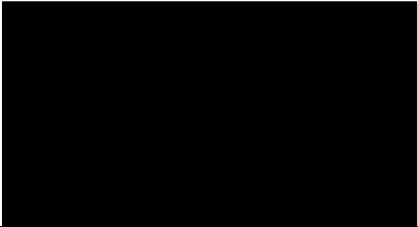


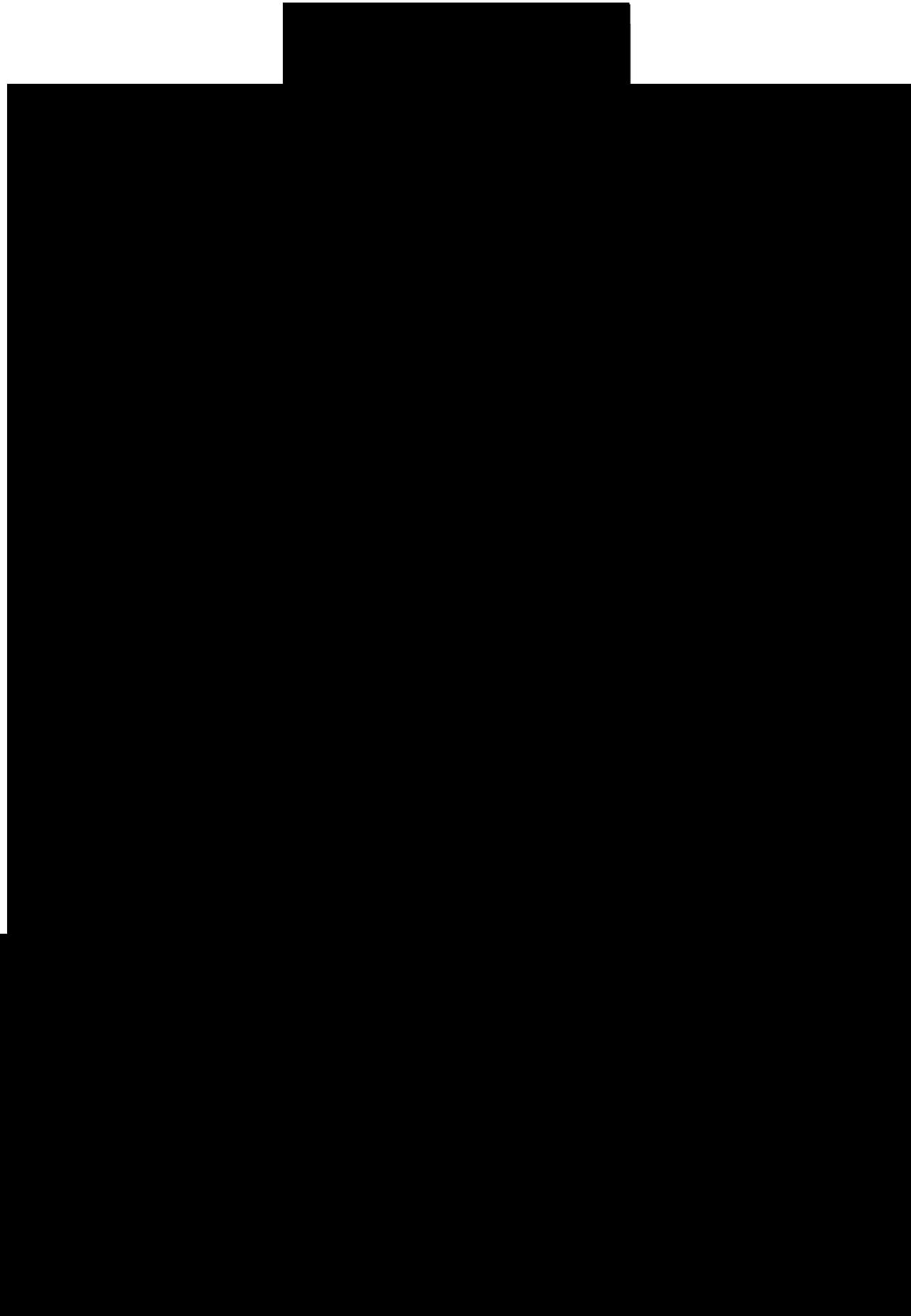


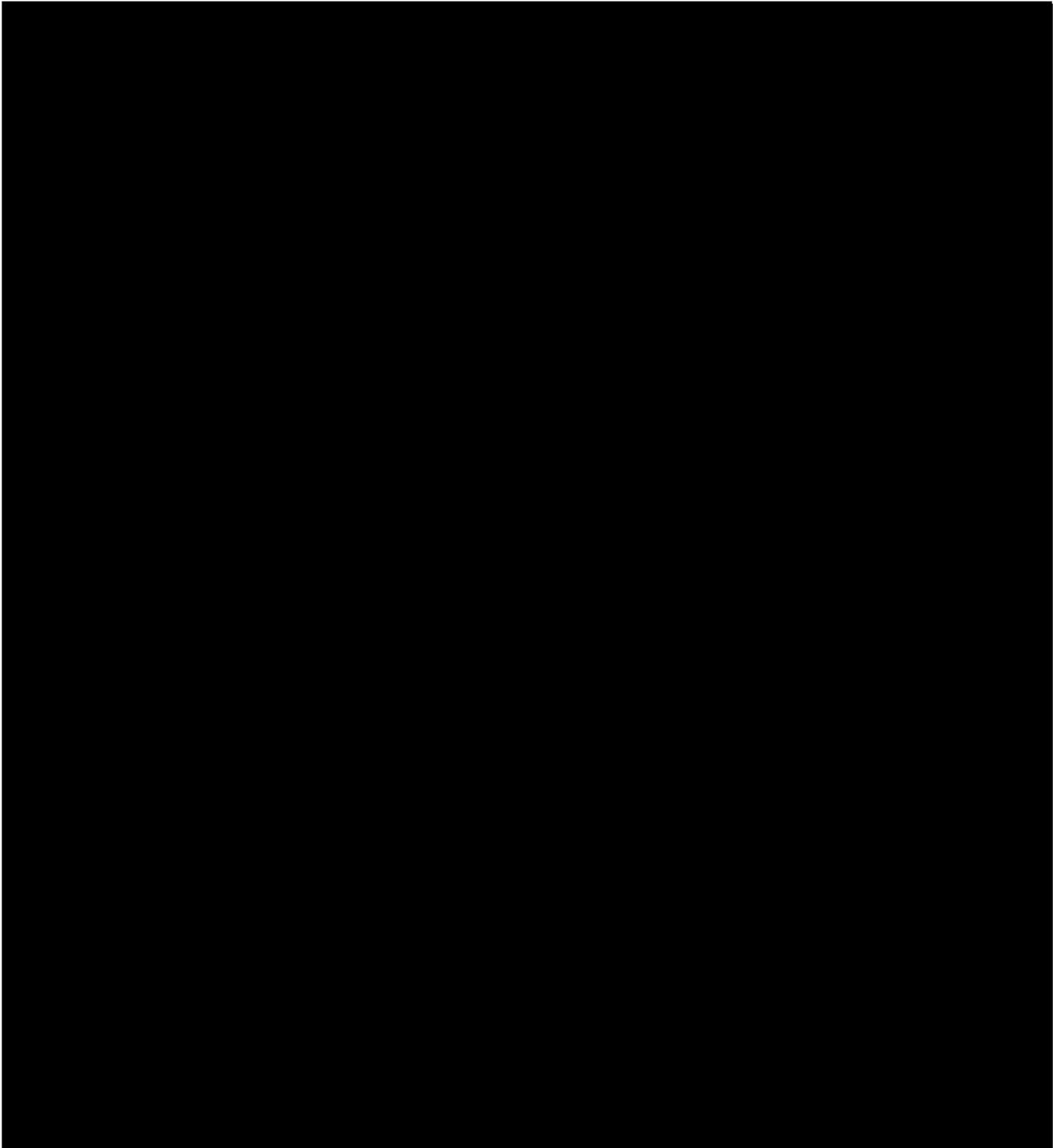


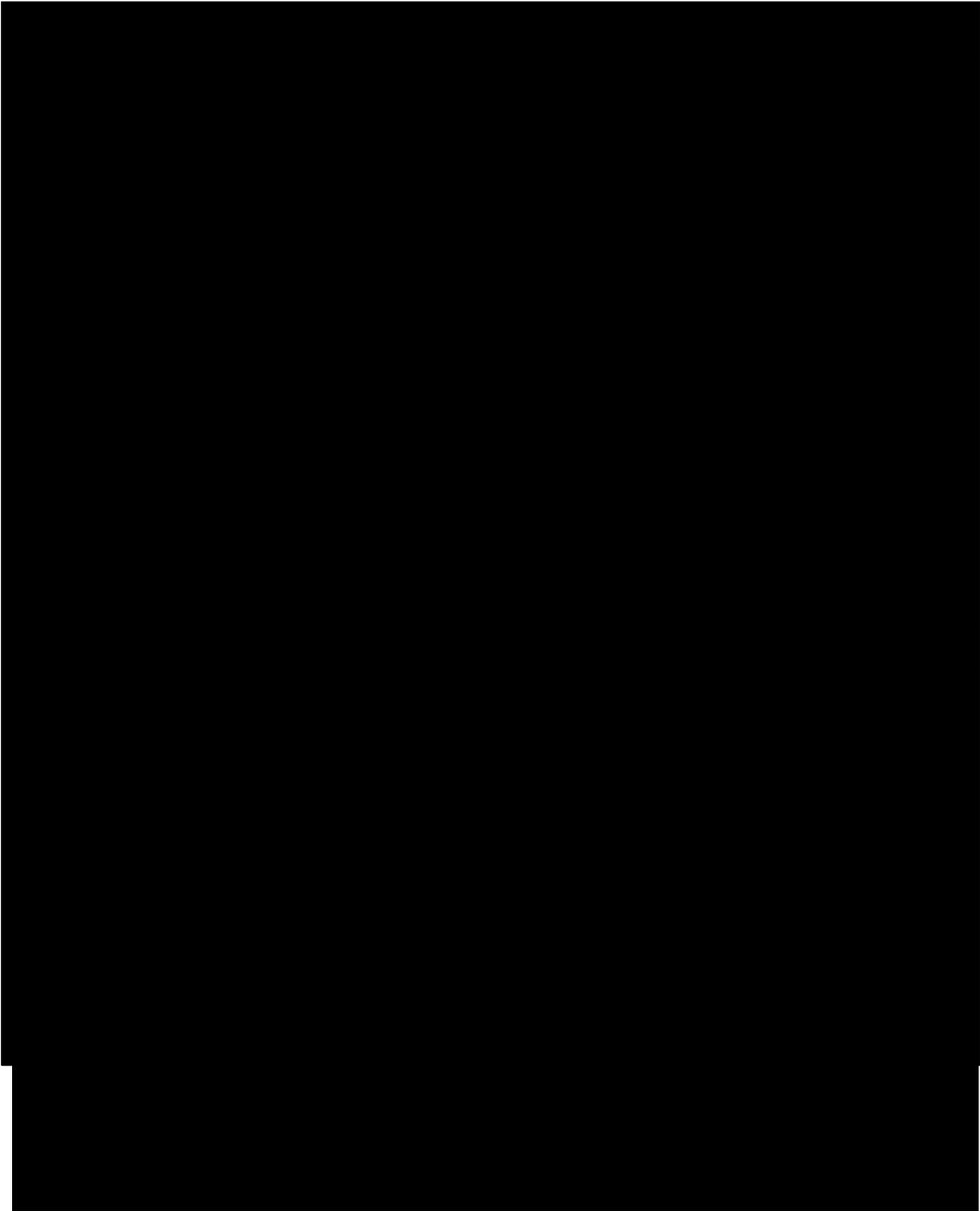




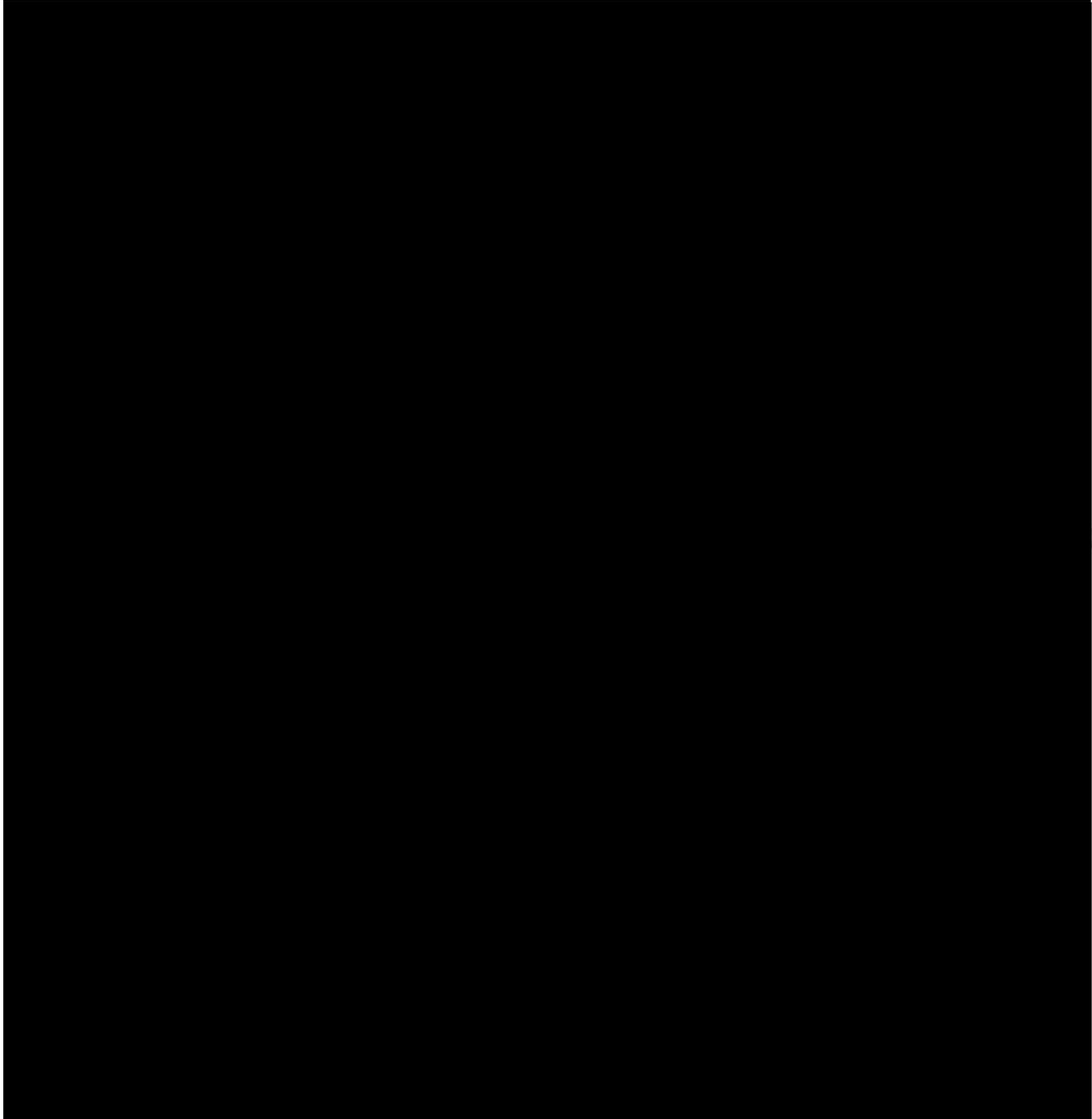


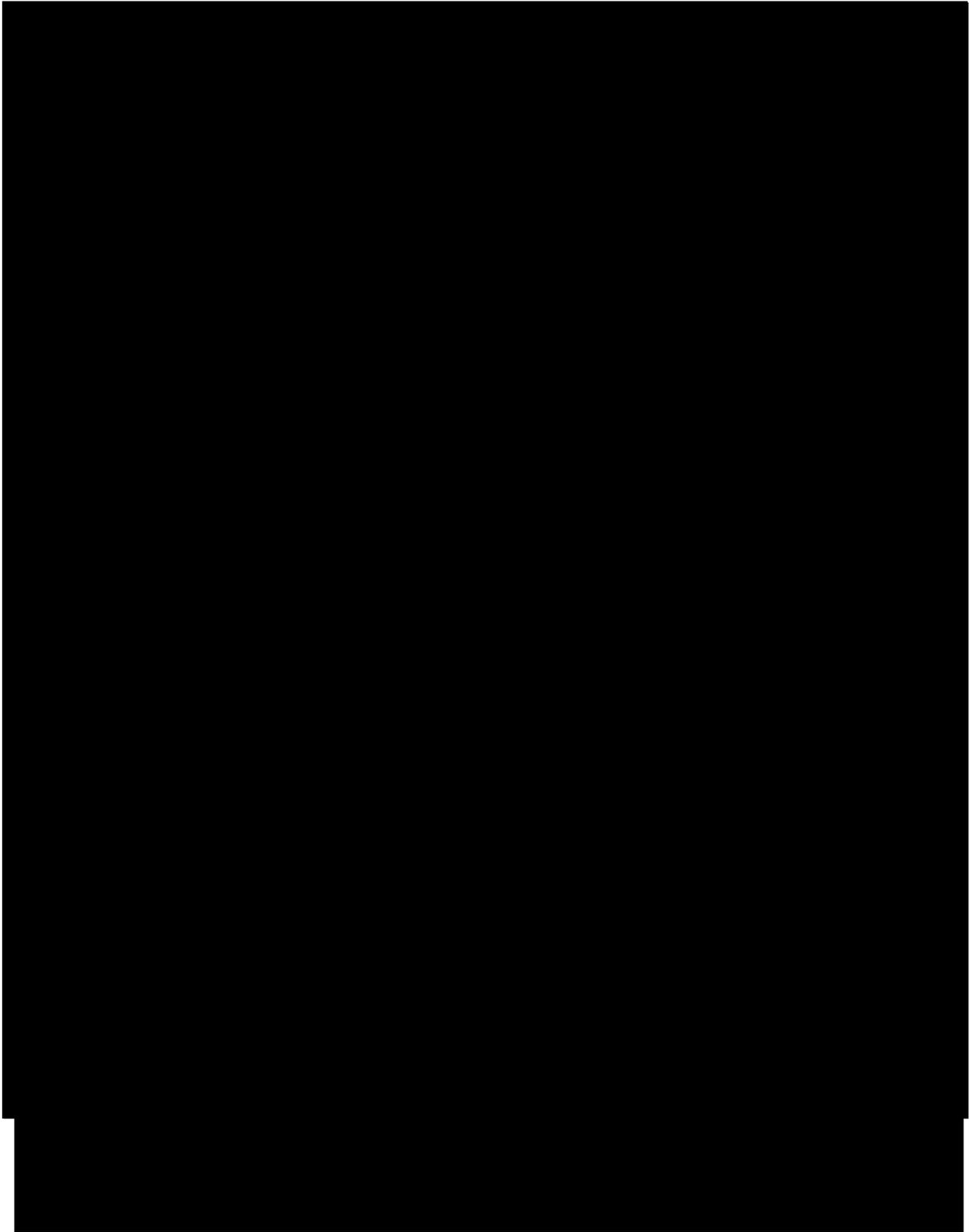


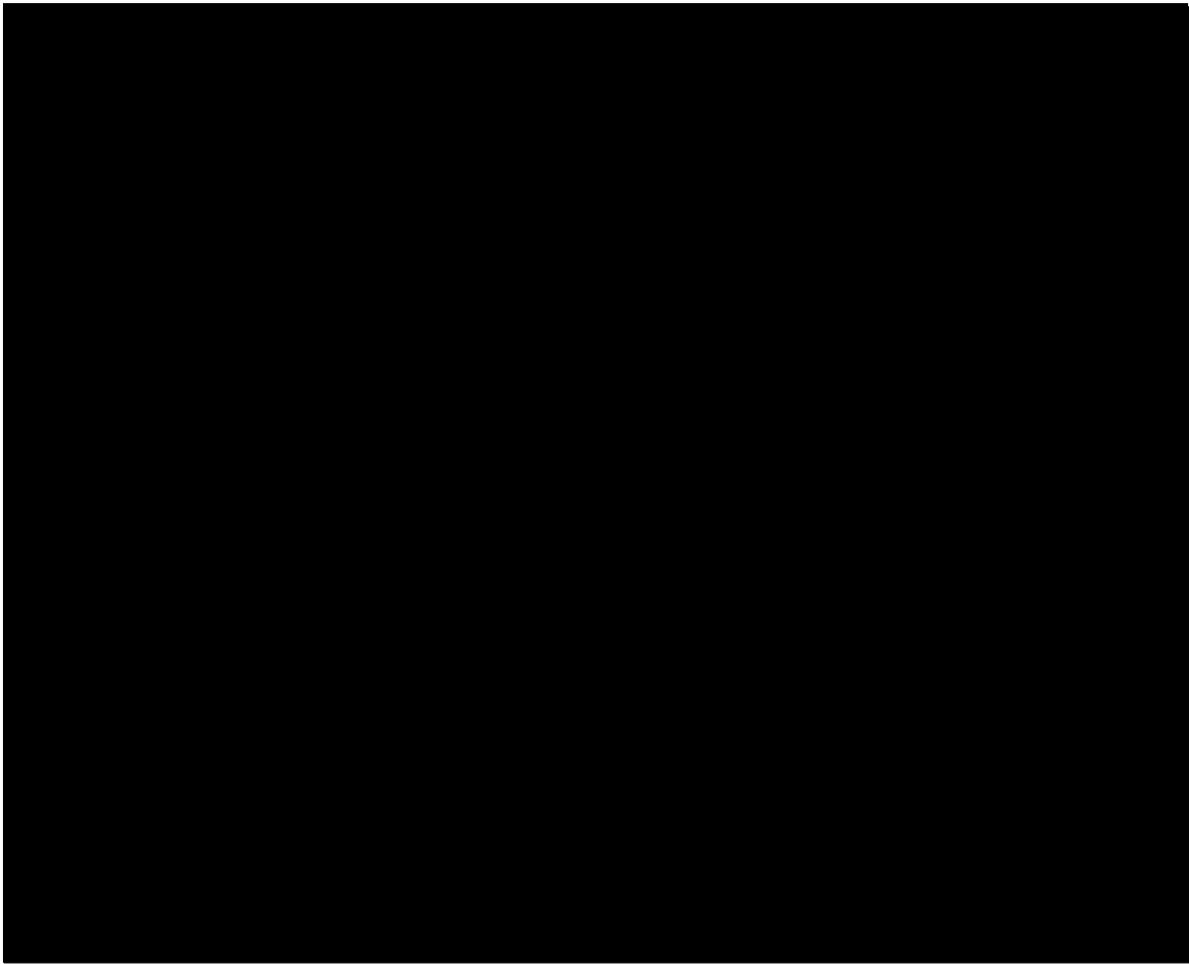


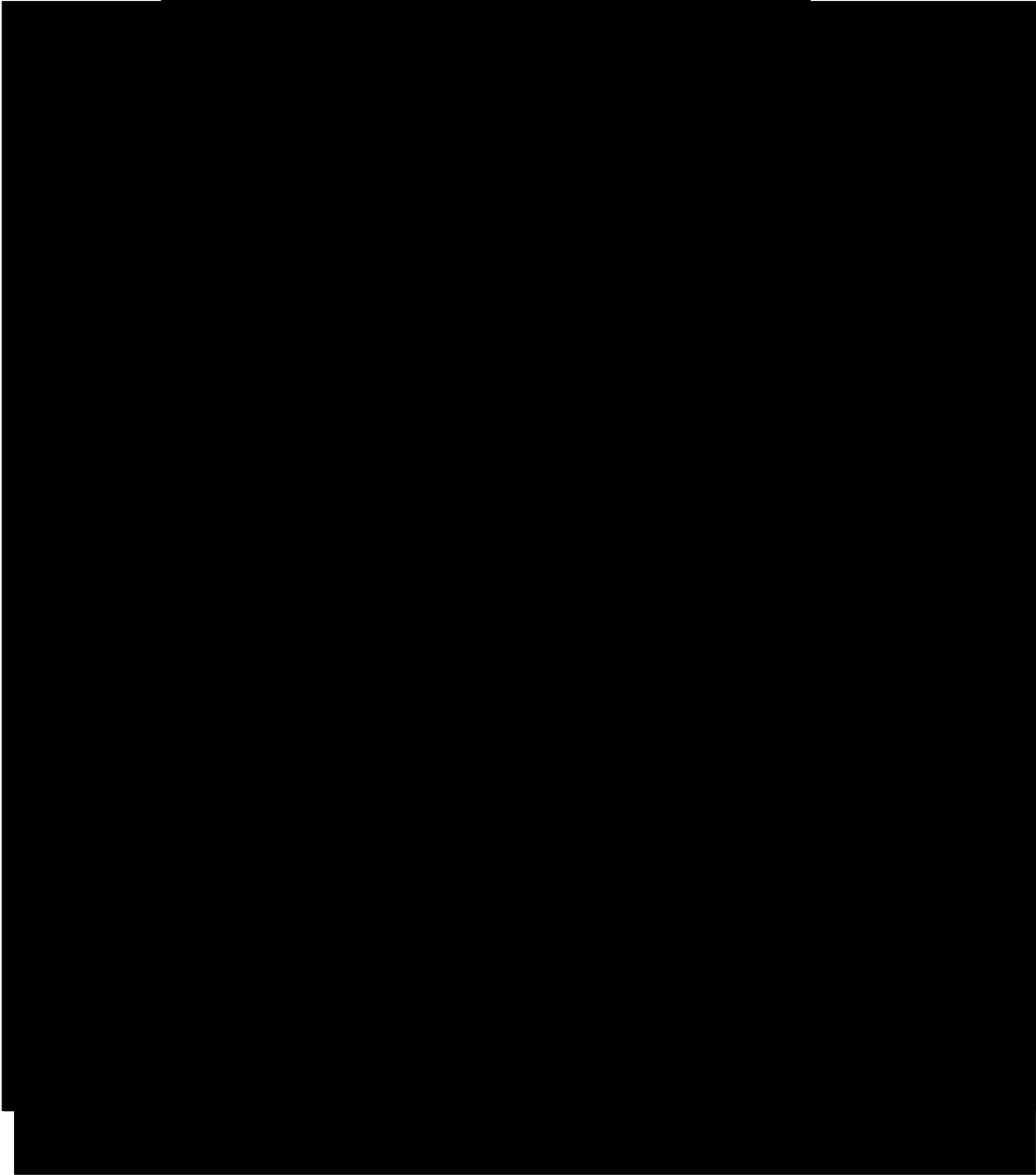
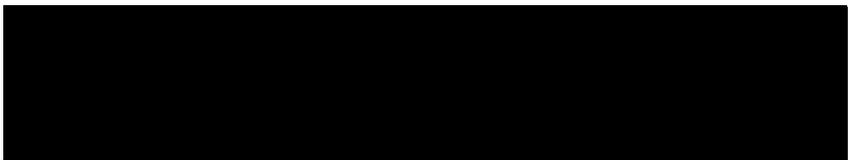


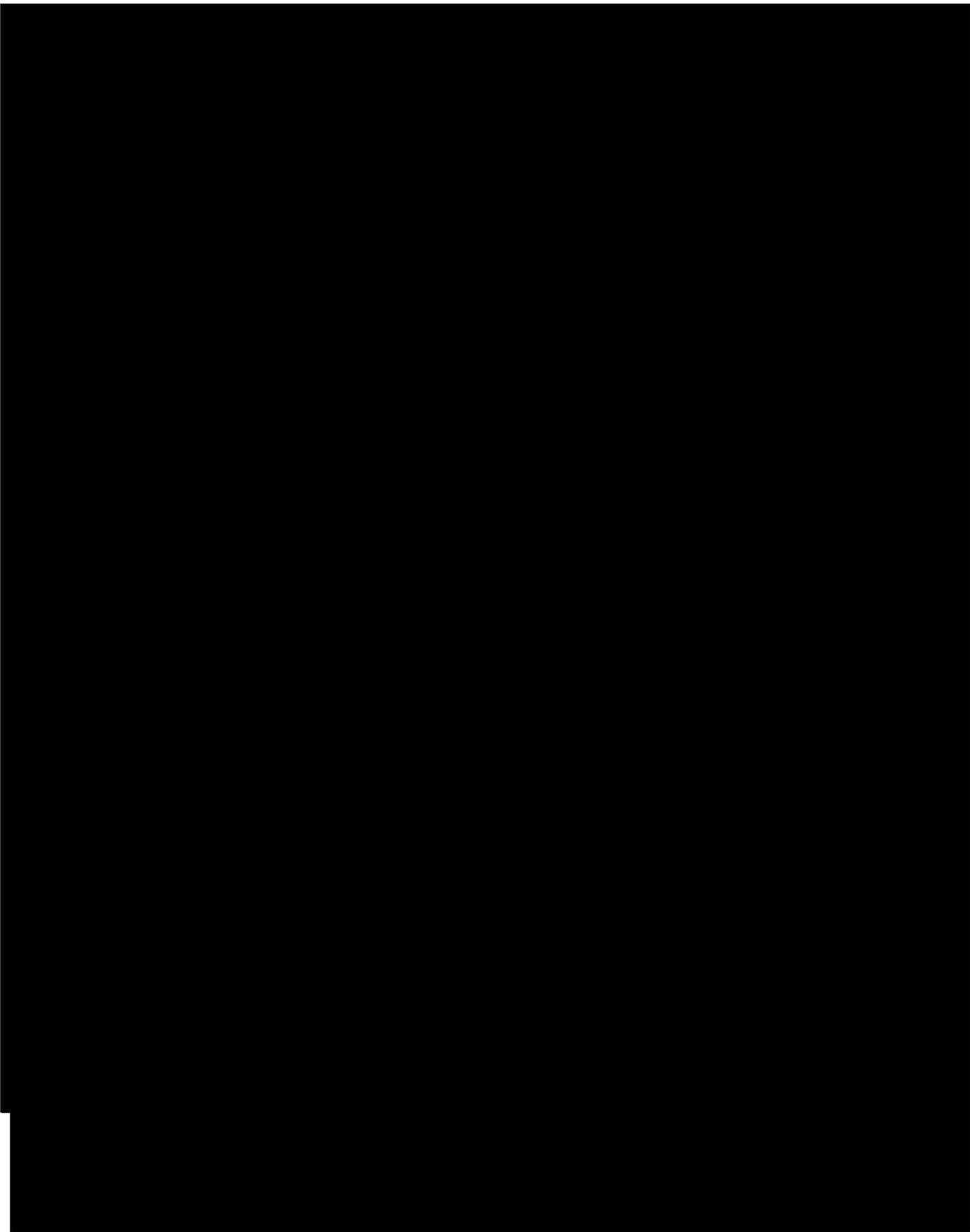


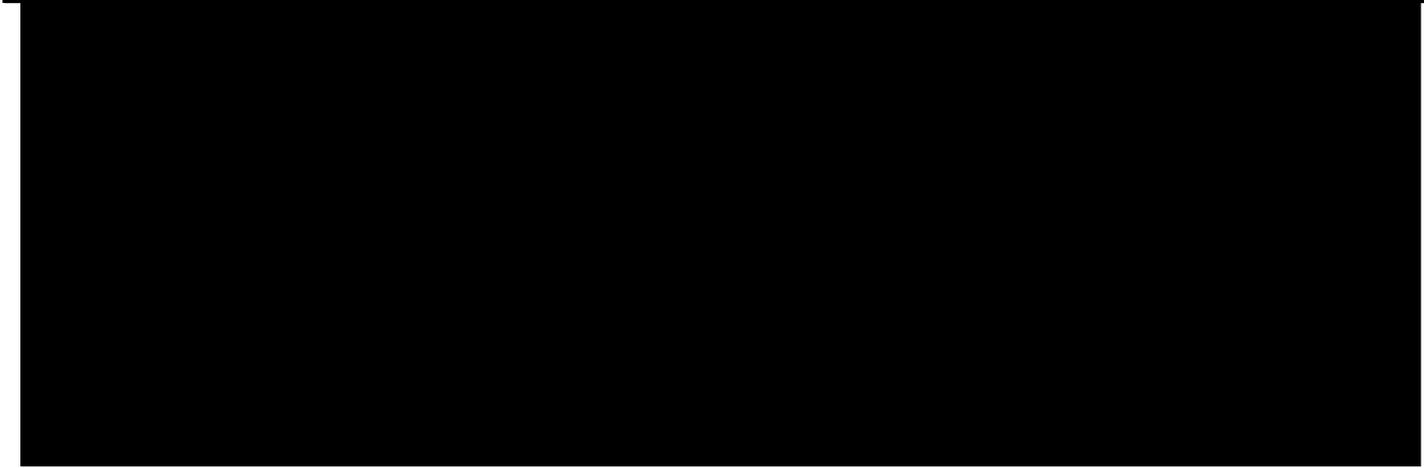
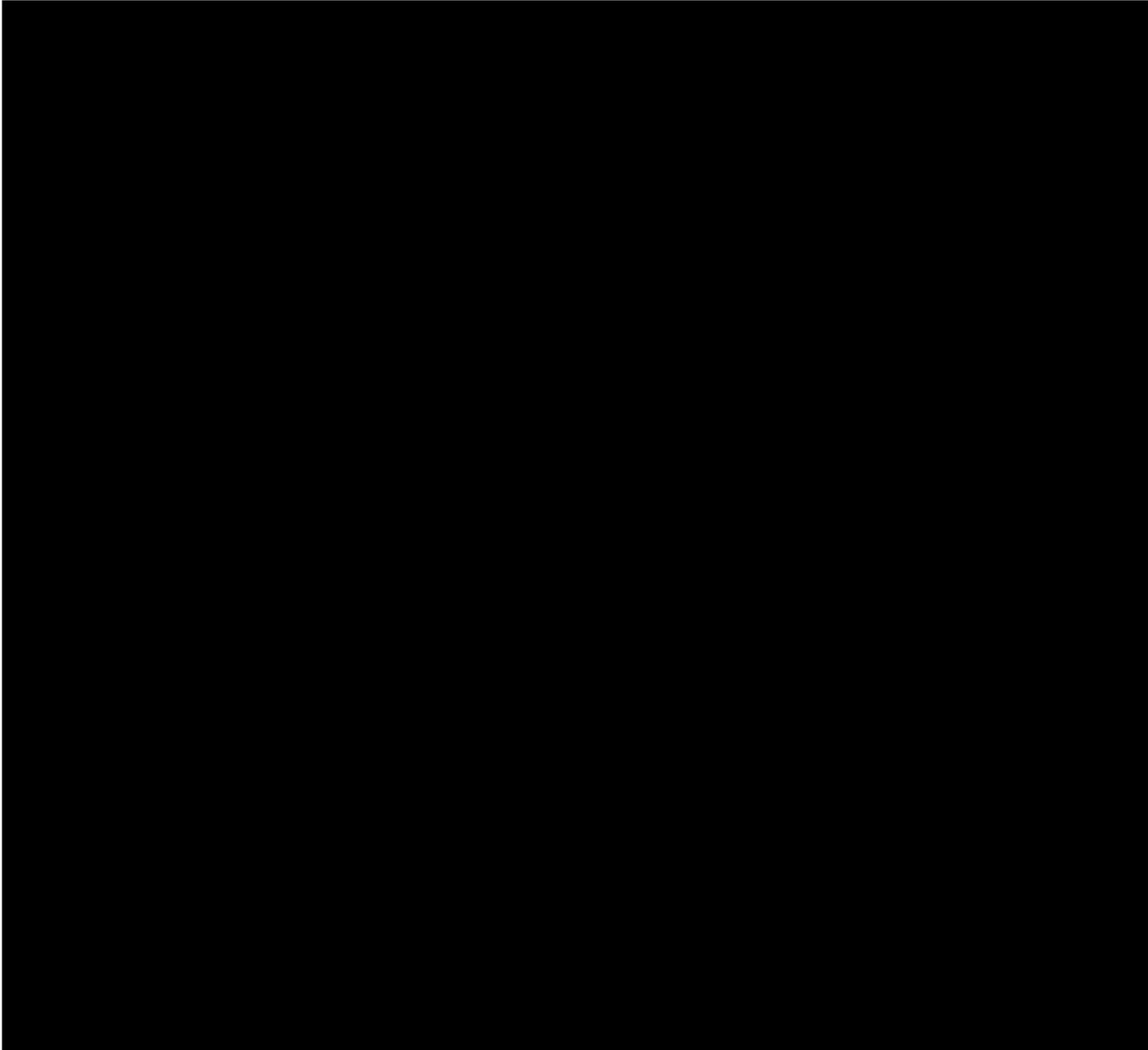


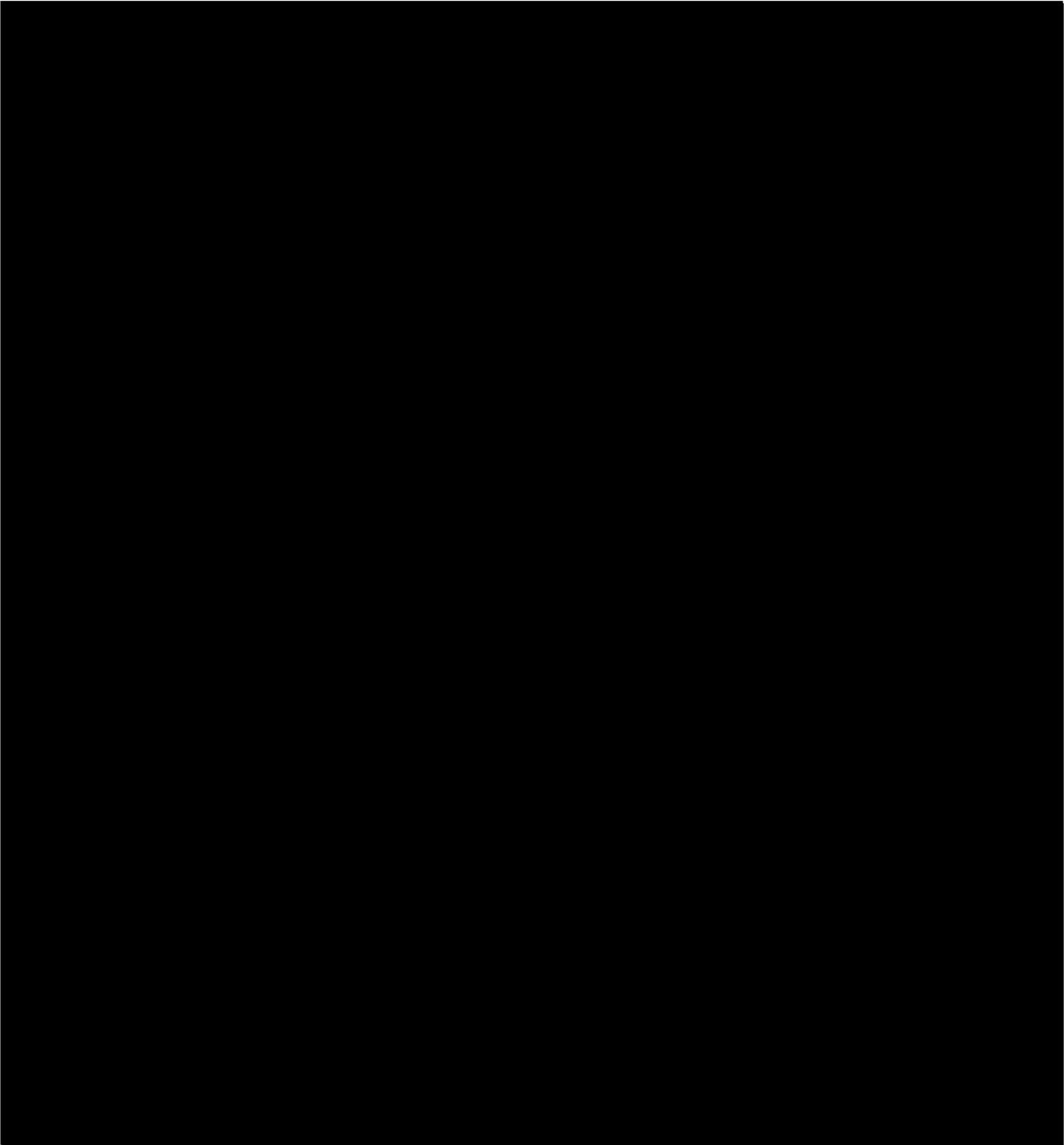












Upload #8

Applicant: Epilepsy Foundation of Florida
Application Number: NAV2013000242
Project Title Cooperative Agreement to Support Navigators in Federally-facilitated and State Partnership Exchanges
Status: Awarded
Document Title: OtherNarrativeAttachments-Attachments-1235-Nav Grant Cover Ltr.pdf

Cover Letter

To: [REDACTED]
Grants Management Officer
Centers for Medicare and Medicaid Services
Office of Acquisition and Grants Management

[REDACTED]

From: Epilepsy Foundation of Florida (a consumer-focused, nonprofit group)

[REDACTED]

Title: Cooperative Agreement to Support Navigators in Federally-facilitated and State Partnership Exchanges

Project Director: [REDACTED] CEO

Lead Applicant: [REDACTED] Community Resource Specialist

[REDACTED]

Amount of Funding: \$637,686.52

Upload #9

Applicant: Epilepsy Foundation of Florida
Application Number: NAV2013000242
Project Title Cooperative Agreement to Support Navigators in Federally-facilitated and State Partnership Exchanges
Status: Awarded
Document Title: OtherNarrativeAttachments-Attachments-1240-Nav Grant Ltr of Rec.pdf

June 6th 2013

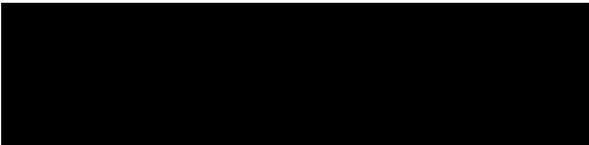

Director of Development
IDEAS

To Whom it May Concern,

I am writing you today to endorse the expertise and credentials of the Epilepsy Foundation of Florida (EFOF) regarding their ability to build collaborative networks between student organizations and community entities for social change and how this will be a tremendous asset for the Patient Navigation program in the State of Florida, especially in their outreach to ethnic, low-income and faith communities.

The EFOF has shifted their focus towards creating a more pronounced presence on university and community college campuses. Part of their strategy involves building collaborative networks of student organizations and community groups in order to build a grassroots movement dedicated to social change. To this end, they have recently hired two new community outreach specialists with extensive backgrounds in campus organizing and community involvement. Speaking as someone who is currently the Director of Development for the international environmental non-profit IDEAS, a group which was recently recognized by former President Bill Clinton as a leading innovator in the realm of organizing for social change, I feel very confident in EFOF's ability to do similar work for the Patient Navigation program. They will bring awareness to the program using the best method possible: peer-to-peer contact. While other organizations may throw thousands of dollars on expensive TV and Radio ads to get the word out about Patient Navigation, EFOF will instead capitalize on this opportunity for what it is—a chance to change the world for the better. That's a message that is cheapened when it attempts to be "sold" by the likes of insurance companies and other for-profit entities (let alone the fact that it would be a conflict of interest), but it is one with a powerful promise that can be communicated by an un-biased and culturally diverse organization like EFOF. If it succeeds, then many more people will have access to quality health insurance that will play a big role in their upward mobility. Students and civically-minded people want to get behind important causes like that, and that is why instead of trying to dominate the airwaves with expensive ads, EFOF will encourage folks in low-income, ethnic and faith communities to talk to each other, and raise awareness for this program in a grassroots manner. It's certainly cheaper than traditional promotion, and it works.

EFOF knows what's important in when it comes to advocating for social change. They will be an effective advocate for Patient Navigation, and will do their part in bringing low-income, ethnic and faith communities the kind of health coverage they deserve.


Director of Development
IDEAS

Upload #10

Applicant: Epilepsy Foundation of Florida
Application Number: NAV2013000242
Project Title Cooperative Agreement to Support Navigators in Federally-facilitated and State Partnership Exchanges
Status: Awarded
Document Title: Form PerformanceSite_1_4-V1.4.pdf

Project/Performance Site Location(s)

Project/Performance Site Primary Location I am submitting an application as an individual, and not on behalf of a company, state, local or tribal government, academia, or other type of organization.

Organization Name:

DUNS Number:

* Street1:

Street2:

* City: County:

* State:

Province:

* Country:

* ZIP / Postal Code: * Project/ Performance Site Congressional District:

Project/Performance Site Location 1 I am submitting an application as an individual, and not on behalf of a company, state, local or tribal government, academia, or other type of organization.

Organization Name:

DUNS Number:

* Street1:

Street2:

* City: County:

* State:

Province:

* Country:

* ZIP / Postal Code: * Project/ Performance Site Congressional District:

Project/Performance Site Location 2 I am submitting an application as an individual, and not on behalf of a company, state, local or tribal government, academia, or other type of organization.

Organization Name:

DUNS Number:

* Street1:

Street2:

* City: County:

* State:

Province:

* Country:

* ZIP / Postal Code: * Project/ Performance Site Congressional District:

Project/Performance Site Location(s)

Project/Performance Site Location 3

I am submitting an application as an individual, and not on behalf of a company, state, local or tribal government, academia, or other type of organization.

Organization Name:

DUNS Number:

* Street1:

Street2:

* City: County:

* State:

Province:

* Country:

* ZIP / Postal Code: * Project/ Performance Site Congressional District:

Project/Performance Site Location 4

I am submitting an application as an individual, and not on behalf of a company, state, local or tribal government, academia, or other type of organization.

Organization Name:

DUNS Number:

* Street1:

Street2:

* City: County:

* State:

Province:

* Country:

* ZIP / Postal Code: * Project/ Performance Site Congressional District:

Project/Performance Site Location 5

I am submitting an application as an individual, and not on behalf of a company, state, local or tribal government, academia, or other type of organization.

Organization Name:

DUNS Number:

* Street1:

Street2:

* City: County:

* State:

Province:

* Country:

* ZIP / Postal Code: * Project/ Performance Site Congressional District:

Project/Performance Site Location(s)

Additional Location(s)

Add Attachment

Delete Attachment

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