



The Expanding Access to Women's Health Grant

CCIIO
Oversight Group
07/02/2024

Background

- Section 1003 of the Affordable Care Act (ACA) added a new section 2794 to the Public Health Service Act (PHS Act) entitled, “Ensuring That Consumers Get Value for Their Dollars.”
- Congress appropriated \$250 million to be awarded in Federal fiscal years (FYs) 2010 through 2014 for the Rate Review Grant Program.
- Any appropriated Rate Review Grant funds not fully obligated by the end of FY14 remain available to the Secretary for grants to States for planning and implementing the insurance market reforms and consumer protections under Part A of title XXVII of the PHS Act.

Expanding Access to Women's Health Grant

The Expanding Access to Women's Health Grant Program will provide a funding source to States for activities related to planning and implementing the market reforms and consumer protections under the below listed provisions of Part A of title XVII of the PHS Act to enhance and expand access to reproductive health and maternal health coverage and services.

- I. Section 2707 – Comprehensive Health Insurance Coverage (Essential Health Benefits Package)
- II. Section 2713 – Coverage of Preventive Health Services

Recommended Areas of Focus for Activities

Section 2707 – Comprehensive Health Insurance Coverage (Essential Health Benefits Package)

States may use grant funds to:

- Assess and update current EHB-benchmark plans to include broader scope of benefits coverage for reproductive health and maternal health coverage and services available in the State,
- Conduct surveys, interviews, and focus groups with women to gauge their knowledge of, access to, and satisfaction with their State's EHB-benchmark plan selection as it pertains to their reproductive healthcare needs,
- Consult with medical providers or associations on how best to update the State's EHB-benchmark plan to include broader scope of benefits coverage for reproductive and maternal healthcare services, and
- Research other State EHB-benchmark plans and perform an analysis of potential adjustments to the respective State's existing EHB-benchmark plan to support a broader scope of benefits coverage for reproductive and maternal healthcare services.

Recommended Areas of Focus for Activities – Continued

Section 2713 - Coverage of Preventive Health Services

States may use grant funds to:

- Design and disseminate educational materials to help women understand their ability to obtain contraceptive healthcare without cost sharing,
- Conduct workshops and seminars to educate consumers on their reproductive healthcare coverage options in their State and other States, and
- Develop tools and/or checklists to enhance their review of issuer form filings and perform targeted market conduct examinations of health insurance issuers to verify compliance.

Eligibility

All 50 States and the District of Columbia are eligible to apply.

- Only the State regulating agency responsible for implementation and enforcement of the applicable two pre-selected market reforms and consumer protections (Section 2707 and Section 2713) under Part A of Title XVII of the PHS Act is eligible to apply.

Only one application per State is permitted, except in a State in which there is more than one regulating entity.

- The regulatory agencies involved must collaborate with each other regarding a proposed budget. Also, each State regulatory agency will be viewed as a distinct recipient responsible for submitting separate required programmatic and financial reports.
- Multiple applications will be required to split the total grant award allocated for that State.

Key Dates

- All applicants must submit the mandatory Letter of Intent (LOI) by the deadline given, **July 8, 2024**. Send LOI's to James.Taing@cms.hhs.gov.
- CMS will provide applicants with information on funding allocation prior to July 12, 2024.
- Applications are due **August 7, 2024** (11:59 p.m. EST) in [Grants.gov](https://www.grants.gov) (search **CFDA # 93.797**).
- Anticipated Award date by **September 13, 2024**.
- The grant will have an expected project and budget period of 24 months from the award date: **September 13, 2024 to September 12, 2026**.

Funding

- CMS anticipates approximately \$11.1 million will be available for the Expanding Access to Women's Health Grant pending the availability of funds.
- Baseline Funding: Each State will receive a minimum of \$210,000 for a two-year project period.
- CMS will inform States of additional funding allocations, including whether baseline award amounts have increased and if there are sufficient funds available for the "Workload" supplemental awards after receipt of the Letters of Intent.

Application and Submission Process

- A Letter of Intent is required to apply for the Expanding Access to Women's Health Grant. E-mail Letters of Intent to James.Taing@cms.hhs.gov by 11:59 pm Eastern Standard Time on **July 8, 2024**.
- All grant applications must be submitted and received electronically through <http://www.grants.gov> by 11:59 pm Eastern Standard Time on **August 7, 2024**.
- All applications will receive an automatic time stamp upon submission, and applicants will receive an email reply acknowledging the application's receipt. **Applications not received by the application deadline through www.Grants.gov will not be reviewed.**

Unique Agency Identifier and System for Award Management (SAM)

- An applicant is required to:
 - Provide its Data Universal Numbering System (DUNS) number and Employee Identification Number/Tax Identification Number (EIN/TIN) to register in the [System Award Management \(SAM\)](#) before submitting its application,
 - Provide a valid unique entity identifier in its application, and
 - Maintain an active SAM registration with current information while it has an active Federal award or an application or plan under consideration by a Federal awarding agency.

Employer Identification Number (EIN)

All applicants must have a valid Employer Identification Number (EIN), otherwise known as a Taxpayer Identification Number (TIN), assigned by the Internal Revenue Service.

Review and Selection Process

- Applications will be screened to determine eligibility for further review.
- Applications will be evaluated by a merit review committee. The merit review committee may include Federal and/or non-Federal reviewers.
- The results of the merit review of the applications by qualified experts will be used to advise the CMS approving official who will make the final award decision
- CMS review for potential risks posed by applicants prior to award.
- CMS reserves the right to conduct pre-award negotiations with applicants.

Federal Award Notices

- If successful, applicants will receive a Notice of Award (NoA) signed and dated by the CMS Grants Management Officer via GrantSolutions.
- The NoA is the legal document authorizing the grant award and issued to the applicant as listed on the SF-424.
- If unsuccessful, CMS will notify the applicant electronically via email to the email address listed on its SF-424 within 30 days of the program award date.

Reporting Requirements

All successful applicants under this announcement must comply with the following reporting and review activities:

- Three (3) Quarterly Progress Reports
- Annual Progress Report
- Final Progress Report
- Work Plan Updates
- Federal Financial Reports (FFR)
- Audit Requirements
- Payment Management System Requirements

Programmatic and Budget Contacts

Programmatic Contact:

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