

REQUEST FOR PROPOSALS

Grant Invitation and Application Instructions

Funding Opportunity: 2026-2028 Benefits Enrollment Center Grants

NCOA is excited to release a call for proposals for the next cycle of Benefits Enrollment Centers. The focus of this opportunity is to expand access to benefits for qualifying low-income Medicare beneficiaries through the Benefits Enrollment Center (BEC) model. The goal of the BEC program is to promote lasting transformations to the ways older adults and adults living with disabilities are assisted with enrolling in and retaining the benefits for which they are eligible.

For additional information about the BEC network and the organizations funded in the previous cycle please visit: https://www.ncoa.org/article/meet-our-benefits-enrollment-centers.

Funding Opportunity Description

The NCOA Center for Economic Well-Being (CEW), under a cooperative agreement from the U.S. Administration for Community Living (ACL), will provide grants for a 30-month period (Feb. 1, 2026-July 31, 2028) to selected organizations for the implementation of Benefits Enrollment Centers (BECs). BECs use person-centered strategies in a coordinated, community-wide approach to find and enroll Medicare-eligible beneficiaries—both older adults age 65+ and adults living with disabilities—who have limited income and resources to access available benefits. Awarded organizations will support older adults and adults with disabilities in completing initial applications and recertifications in the following core benefits programs:

- Medicare Part D Extra Help (or Low-Income Subsidy, LIS)
- Medicare Savings Program (MSP)
- Medicaid
- Supplemental Nutrition Assistance Program (SNAP)

Grantees will also be expected to provide clients with information on Medicare Preventive Services, which are a variety of services covered by Medicare Part B that focus on health promotion and early disease detection. For more information on Medicare Preventive Services, please visit: https://www.medicare.gov/coverage/preventive-screening-services.

Selected organizations should be part of a state No Wrong Door system for access to long-term services and supports or be willing to make referrals to the local Aging and Disability Resource Centers for access and coordination on state facilitated outreach education, eligibility and/or enrollment systems.



Organizations eligible to apply for BEC grants include state or local community-based nonprofit organizations, state government agencies, American Indian/Alaska Native (Al/AN) entities, Centers for Independent Living (CILs) and faith-based organizations addressing the needs of Medicare-eligible older adults and adults with disabilities. Grants ranging from \$150,000 up to \$300,000 each will be awarded to selected organizations.

Additional Information

Informational Webinar

An informational webinar will be held to provide guidance and answer questions. A webinar recording will be posted to the NCOA website.

Nov. 12, 2025, 2 p.m. ET

Join the webinar here

Meeting ID: 227 513 340 779

Passcode: df2823XN

Frequently Asked Questions

NCOA will accept questions regarding this opportunity until **Nov. 14**. Questions should be sent to Center4EWB@ncoa.org. Questions submitted after this deadline will not be accepted. The FAQ document will be posted on NCOA's website by **Wednesday**, **Nov. 19**.

Use of Grant Funds

These funds are federal funds from the U.S. Department of Health and Human Services Administration for Community Living. As such, all current federal rules apply and must be adhered to by awarded grantees. The full grants policy can be found here: Grants
Policy Statement

In addition, grantees must adhere to all federal terms and conditions, which can be accessed here: Managing a Grant | ACL Administration for Community Living

NCOA Support

NCOA will provide overall direction for the program and will offer technical assistance, training, and tools to grantees to assist them in maximizing enrollment in core benefits. These include:

- A guidance document that walks your organization through all of the considerations necessary to implement the BEC program in your community.
- Monthly technical assistance webinars and peer-to-peer calls on key issues such as outreach to vulnerable communities, person-centered approaches, and tactics for increasing enrollments.



- Individualized support from the grantee's point of contact at NCOA as needed.
- Dashboards that highlight your organization's accomplishments against your targets.
- Facilitated information-sharing sessions with affinity groups where your organization can learn and hear from others facing similar challenges.
- Financial support through grant funds.
- Scholarship assistance to attend Age+Action in the first year of the grant cycle (2026).
- User license(s) for Cumulus, a cloud-based case management software for tracking client data.

Grantee Expectations

Grantees will be required to start implementation of their grant within 60 days of the grant start date. This means grantees will be required to confirm they have: 1) started completing core benefits applications for this grant; and 2) have staff in place to meet application performance targets.

Throughout the grant period, awarded organizations will be expected to:

- Submit data by the reporting deadlines on all clients assisted and monthly programmatic reports through Cumulus. Organizations should only report completed applications using grant funds and cannot duplicate applications reported to the Administration for Community Living through the STARS system. Organizations will be provided Cumulus licenses. If an organization already uses a different client management system, they will need to commit to using an API integration system to upload information into Cumulus by the reporting deadline each month. Organizations not currently using Cumulus are still encouraged to apply.
- Conduct at least one outreach event per quarter and provide a report on the event via Cumulus.
- Use <u>BenefitsCheckUp®</u> or a similar state-provided tool for screening all benefits and enrolling clients.
- Provide clients with information on Medicare Preventive Services.
- Participate in monthly calls that may include conference calls, webinars, and peer-to-peer learning opportunities. Attendance at monthly calls is mandatory.
- Provide at least one client success story/testimonial every 6 months. An example of a quality success story will be provided.
- Assist clients in completing initial applications and/or recertifications for the four core benefits listed above, as well as assisting clients in completing other applications for which they may be eligible.
 - Core Application/Recertification Grant Goals
 - Tier 1: \$150,000 = 600 core applications/recertifications



- Tier 2: \$200,000 = 900 core applications/recertifications
- Tier 3: \$300,000 = 1,200 core applications/recertifications
- Share information and lessons learned with NCOA and other grantees.
- If requested, host/accept NCOA in-person site visits and/or virtual monitoring.
- Attend the Age+Action Conference
- Adhere to all federal terms and conditions found in the Grants Policy listed above.

Grantees that are unable to begin implementation within 60 days will be subject to corrective action and/or termination of their grant agreement and rescission of award funds.

NCOA will conduct four performance checks throughout the grant period to ensure organizations remain on track to achieve their grant goals. Grantees are expected to meet the benchmarks outlined in the chart below and maintain the monthly averages specified. Failure to meet performance benchmarks may result in corrective action, termination of the grant agreement, and/or rescission of funds. Benchmarks noted under 6-month, 12-month, 18-month, and 24-month checks are the expected number of core applications that should be completed by that period.

Performance Period Checks

Funding	Avg. Core Apps Per Month	Total Core Apps by End of Grant	6- Month Check	12- Month Check	18- Month Check	24- Month Check	Final
\$150,000.00	20	600	60	180	300	450	600
\$200,000.00	30	900	90	270	450	675	900
\$300,000.00	40	1,200	120	360	600	900	1,200

Application Deadline

Proposals are due by 11:59 p.m. EST on **Monday, Dec. 1, 2025**, using the online application found here: https://webportalapp.com/sp/login/26-ncoa-bec

PDF PROPOSALS WILL NOT BE CONSIDERED.

The anticipated start date for grant activities is Feb. 1, 2026.



Evaluation Criteria

Section	Criteria	Possible Points
Experience in Benefits Enrollment	 Applicant demonstrates: At least one year of experience supporting Medicare-eligible beneficiaries Past performance data to demonstrate prior experience enrolling clients in core benefits How the BEC project aligns with the overall goals of the organization 	15
Statement of Need	 Applicant describes: Need to increase benefits access within service area Understanding of community served Data used to back up the needs 	10
Approach	 Applicant provides: Planned outreach activities Information about how this funding will support program expansion Specific details about their service delivery model and presents a clear plan to provide application assistance Person-centered benefits enrollment approach or indicates how they will incorporate a person-centered approach into their service delivery Information about how they plan to provide access to services for people who speak languages other than English 	25
Partnerships	 Applicant provides: Letters of support for any partner(s) engaged in the outreach and enrollment process OR provides a clear explanation of how grant objectives will be accomplished in the absence of partnerships Information about their experience collaborating with public agencies Information about current relationship or plan to develop referral relationship with No Wrong Door System and/or Aging and Disability Resource Centers 	25
Management and Organizational capacity	 Applicant provides: Detailed descriptions of the roles and positions Clear plan to ensure program implementation within 60 days of grant start date 	20



	Information about roles of volunteers, if applicable		
	 Information about sub-grantee(s), if applicable 		
Budget	Budget includes:		
	Narrative justification		
	 Funding to attend the Age+Action Conference for 2027 and 2028 	5	
	 Indirect costs do not exceed 15% of direct costs, unless an approved Negotiated Indirect Cost Rate Agreement is attached 		



Application

Below are the questions that will be found in the online application.

Applicant Information

Name of Individual Completing the Application:
Position/Title:
Email:
Organization Director's Name:
Organization Director's Email:
Please name the main point of contact for this grant:
Name:
Email:
Organization Name:
Address:
City:
State:
ZIP code:
Organization Phone Number:
Links to all social media accounts of the organization (Facebook, X, LinkedIn,
etc.). Please note links are required. Handles (e.g. "@ncoa") alone do not provide enough information:
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What is your organization's mission statement? (250 words)

Select which of the following describe your organization (select all that apply):

- Agency Local
- Agency State
- Aging & Disability Resource Center
- American Indian/Alaska Native Entity
- Area Agency on Aging
- Center for Independent Living
- Community Health Center
- Faith-based Organization/Coalition
- Food Bank / Pantry or Similar
- Foundation
- Legal Aid Counseling Service



- Nonprofit
- Senior Center
- State Health Insurance Assistance Program
- Other (please describe):

Experience in Benefits Enrollment

Has your organization served adult Medicare beneficiaries (adults 65 and older or Medicare-eligible adults with disabilities) for at least one year?

- Yes or No (If no is selected, you are not eligible for funding at this time.)
- If yes, please select the percentage of Medicare eligible beneficiaries your organization serves:
 - Less than 10%
 - 11%-25%
 - 26%-50%
 - More than 50%

Has your organization previously received a grant from NCOA in the last 5 years in any program area?

- Yes
 - o If so, what was the grant and when did you receive it?
- No

How does the BEC project align with the overall goals of your organization? (250 words)

Please select the benefits for which your organization has experience completing applications for Medicare eligible beneficiaries in the last year:

- Medicare Part D Extra Help (LIS)
- Medicare Savings Programs (MSPs)
- Medicaid
- Supplemental Nutrition Assistance Program (SNAP)

In calendar year 2024, how many applications did your organization assist clients with for each of the following core benefits?

- Medicare Part D Extra Help (LIS)
- Medicare Savings Programs (MSPs)
- Medicaid
- Supplemental Nutrition Assistance Program (SNAP)



Statement of Need

Please describe your service area (including naming all counties/state(s) served):

Describe why your community or proposed service area needs benefits enrollment support. Please provide population data for your service area, including number of eligible Medicare beneficiaries and share resource(s) used for data. (250 words)

Approach

There are three tiers of funding that correlate to specific core application goals. Organizations should select which tier they are applying for:

Tier	Funding Level	Core Applications
Tier 1	\$150,000	600
Tier 2	\$200,000	900
Tier 3	\$300,000	1,200

Are you willing to be considered for a different tier? Reviewers will be evaluating applications based on how clearly the organization has demonstrated their ability to reach each funding tier. If you are selected for a different tier, you may be required to submit a new budget.

Yes/No

Describe your service delivery model. Please include information about how you plan to support additional clients with applications and/or outreach plans, including your organization's person-centered approach to benefits enrollment. (250 words)

Provide specific examples of your organization's experience assisting clients with completing applications and describe how this funding will help your organization expand on that work. (500 words)

How will you ensure program access to people who speak languages other than English? (100 words)

Partnerships

Collaborations are an important aspect of this work. Please describe partner role(s) and include letters of support from partners (funded or unfunded) that will support your organization in meeting the goals of your application. If you do not have any letters of support, please explain how you plan to meet your grant goals without partnerships. (250 words)

Please describe how working with public agencies will help your organization achieve its goal. Include current or planned relationships with a No-Wrong Door system and/or Aging and Disability Resource Centers. (250 words)



Management and Organizational Capacity

Please describe the roles and positions that you plan to utilize on this project (including title, name, and years of experience). If you don't currently have staff in these positions, please explain the plan to ensure implementation within 60 days of grant start date (2/1/2026). (250 words)

If your organization plans to use volunteers for this project, please describe their roles. (250 words)

Does your organization plan to sub-grant any of these funds? If so, to whom and what portion of the work do you plan to sub-grant? (250 words)

Does your organization understand that use of Cumulus and/or an API Integration into Cumulus is required for this grant?

Yes or No

Should you be awarded, how many Cumulus licenses would your agency need for the grant period? This number should be equal to or less than the number of staff that will be billed and working in the BEC program. (*This question is used only for planning purposes and will not be considered in the scoring of your application.*)

- 1-5
- 6-10
- 11-15
- 16-20
- 20+

Budget and Financials

Prior to making final award determinations, NCOA will conduct a financial review of the top scoring applicants to evaluate their ability to manage the grant. As part of this evaluation, applicants are required to submit, with their proposal, a budget, an audited financial statement and Form 990. Alternatively, an internal budget may be submitted in place of the financial statement and/or Form 990. A sample budget template can be found below.

Organizations applying for funding can apply under the following categories and conditions. Funding is contingent on continued funding from the federal government. The project period is Feb. 1, 2026-July 31, 2028.

Please note that to receive federal funding organizations need to be registered on sam.gov and will need to ensure their registration remains active throughout the grant cycle. If you have a sam.gov registration, please provide your UEI number. If you do not



have a UEI number, your organization will need to register prior to receiving an award. You can learn more about registering for a UEI number through the <u>Federal Award Management Administration</u>. Registration specialists are available by phone at 855-706-5687.

Budget Template

Provide detailed budget information below; please include budget amounts and narrative. All budgets should include \$5,000 for program staff to attend NCOA's Age+Action conference in 2027 and 2028 (\$2,500 per year). Please note that indirect costs are limited to 15% of total direct costs. If your organization has an approved Negotiated Indirect Cost Rate Agreement (NICRA), please attach it below.

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costs are limited to 15% of total direct costs. If your organization has an approved
Negotiated Indirect Cost Rate Agreement (NICRA), please attach it below.
Organization Name:
Project Director:

Fiscal Director:

Fiscal Director Phone Number:

Grant Period: Feb. 1, 2026, through July 31, 2028

	Categories	Budget Percentage	Budget Narrative
	PERSONNEL		
1	Direct Labor		
2	Fringe Benefits		
3	PERSONNEL TOTAL		
	OTHER DIRECT COSTS		
4	Travel		
5	Printing		
6	Supplies		
7	Telephone		
8	Postage		
9	Advertising		
10	Equipment		
11	Consultants/Subcontractors		



12	Other	
13	OTHER DIRECT COSTS	
	TOTAL	
14	INDIRECT COSTS (limited to	
	15% of direct costs)	
15	GRAND TOTAL	

^{*}Indirect costs can be 15% of the direct total, unless you have negotiated an indirect cost rate agreement.

I affirm to the best of my knowledge and belief, that:

- All statements and representations made are honest and accurate.
- No information has been intentionally falsified, omitted, or misrepresented.
- I am fully aware that providing false or misleading information may result in consequences such as rejection of this application, or, if funds are awarded, corrective action and/or termination of their grant agreement and rescission of award funds.

About the National Council on Aging

The National Council on Aging (NCOA) is the national voice for every person's right to age well. We believe in a just and caring society in which each of us, as we age, lives with dignity, purpose, and security. Working with thousands of national and local partners, we provide resources, tools (online and in community), best practices, and advocacy to ensure every person can age with health and financial security. Founded in 1950, we are the oldest national organization focused on older adults. Learn more at www.ncoa.org and @NCOAging.

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