

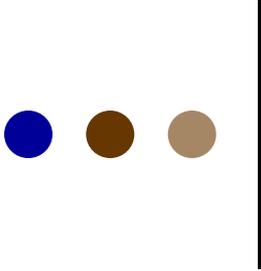
Consumer Assistance (Navigator Subcommittee)

Pam Silberman, JD, DrPH

President & CEO

March 21, 2012

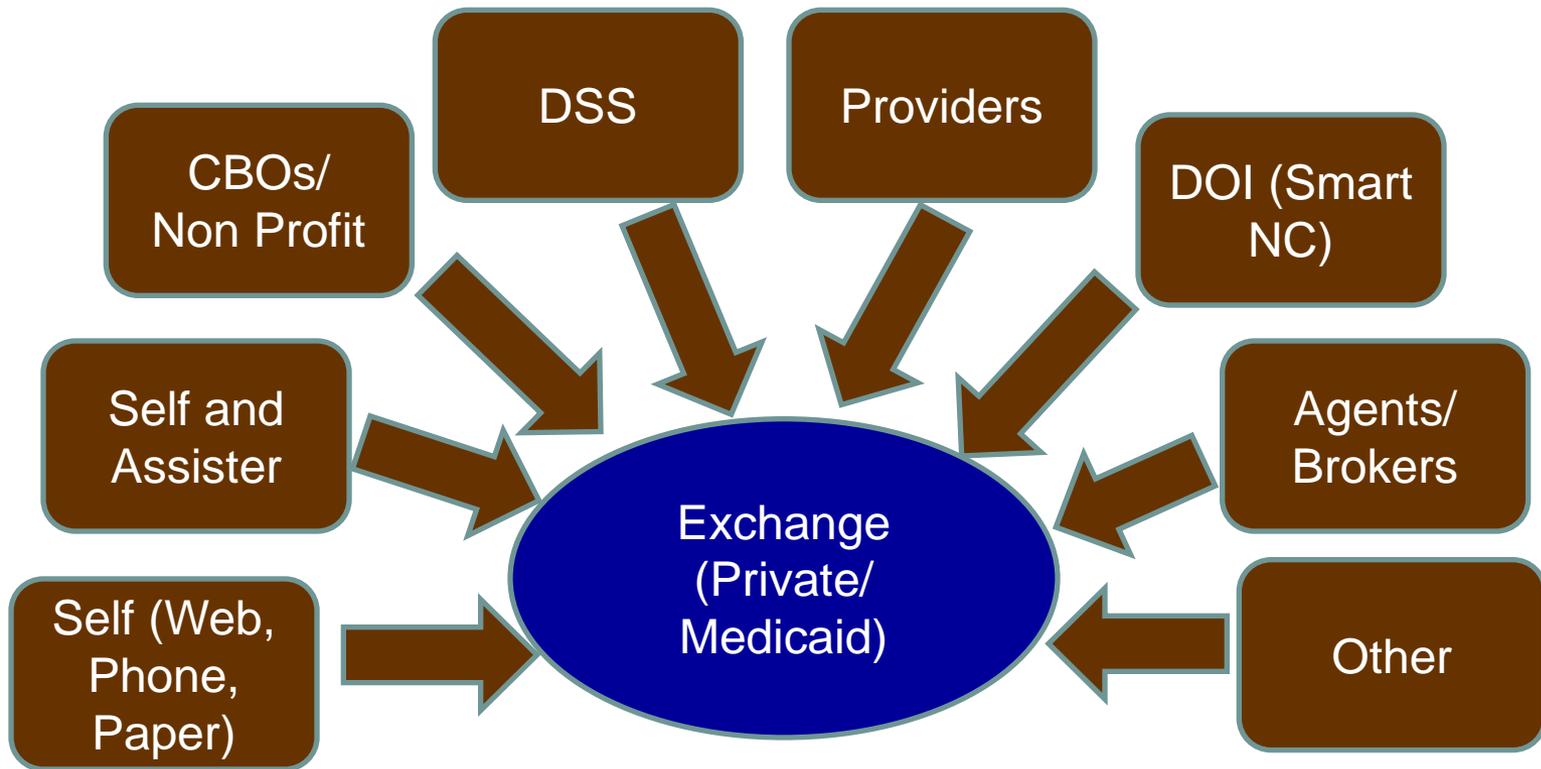


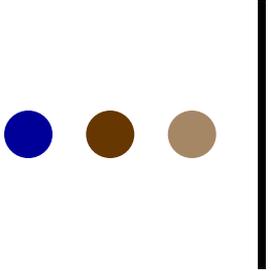


Different Levels of Consumer Assistance

- General information and outreach
 - Examples: Community groups, individuals, government agencies
- Personal assistance understanding options, using website, enrolling into a plan
 - Informal: friends, neighbors
 - Formal: navigators
- Technical advice selecting plan that is best for the individual/family/small business
 - Licensed agents or brokers

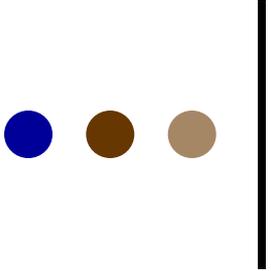
Different Types of Enrollment Assisters





Agenda

- Outreach/education
- Role, training, accountability for navigators
- Role, training, accountability for agents/brokers
- Role of DSS in ensuring “no-wrong door”



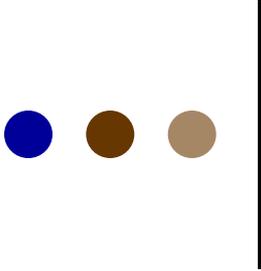
Agenda

- **Outreach/education**

- Role, training, accountability for navigators

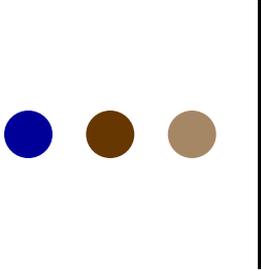
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- Role of DSS in ensuring “no-wrong door”



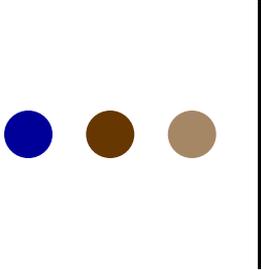
Consumer Assistance Tools (45 CFR 155.205)

- (a) HBE must operate a toll-free call center to address needs of consumers
- (b) Must operate Website that
 - (1) provides comparative information about QHPs, cost sharing, metal level, enrollee satisfaction information, quality ratings, MLR information, transparency of coverage measures, and provider directory.
 - (2) Publishes financial information about average costs of licensing, regulatory fees, any other fees, administrative costs, monies lost to fraud and abuse.



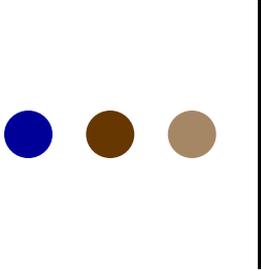
Consumer Assistance Tools (45 CFR 155.205)

- (b) Must operate Website that
 - (3) provides applicants with information about Navigators and other consumer assistance services
 - (4) Allows for an eligibility determination to be made
 - (5) Allows qualified individuals to select a QHP
 - (6) Makes an electronic calculator available to facilitate comparison of QHPs after subsidies



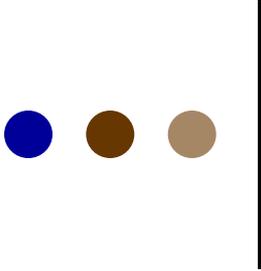
Consumer Assistance Tools (45 CFR 155.205)

- (c) Information must be provided in plain language in a manner that is accessible and timely to:
 - (1) Individuals living with disabilities including accessible Web sites and the provision of auxiliary aids and services at no cost to the individual
 - (2) Individuals who are limited English proficient through provision of language services including oral interpretation, written translation, and taglines in non-English languages indicating availability of language services
 - (3) Information individuals about the availability of these services and how to access such services



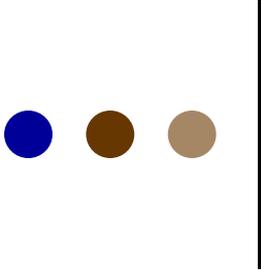
Consumer Assistance Tools (45 CFR 155.205)

- (d) Consumer assistance. The HBE must have a consumer assistance function and must refer consumers to consumer assistance programs in the state.
- (e) Outreach and education. The HBE must conduct outreach and education activities to educate consumers about the HBE and insurance affordability programs to encourage participation.



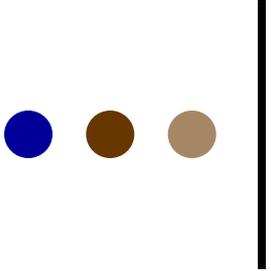
Medicaid Agency Outreach Requirements

- Agency must conduct outreach to vulnerable populations (Sec. 2201)
 - Vulnerable populations include: children, unaccompanied homeless youth, children and youth with special health care needs, pregnant women, racial and ethnic minorities, rural populations, victims of abuse or trauma, individuals with mental health or substance-related disorders, and individuals with HIV/AIDS.



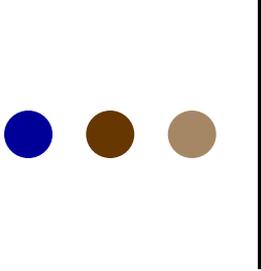
Outreach and Education Recommendations

- HBE, in conjunction with NCDOI, NCDMA, and others, should develop standardized outreach and education toolkit so that interested individuals and organizations can disseminate similar materials. Toolkit should include information about:
 - All insurance affordability programs, small business tax credit, enrollment system, and referrals for further assistance
- HBE, DOI, DMA should offer workshops or other training opportunities to individuals and groups to provide basic information about new insurance opportunities.



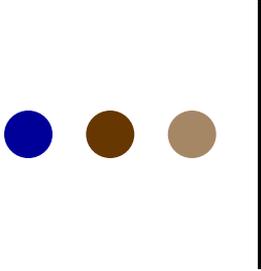
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- Outreach/education
- **Role, training, accountability for navigators**
- Role, training, accountability for agents/brokers
- Role of DSS in ensuring “no-wrong door”



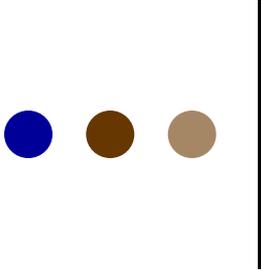
ACA Requirements for Navigators (1311(i))

- HBE must establish a program to award grants to entities that serve as navigators
- To receive a grant, the entity must:
 - Demonstrate that it has, or could readily establish relationships with employers and employees, consumers (including uninsured and underinsured consumers) or self-employed individuals likely to be qualified to enroll in a QHP.
 - Entities may include trade, industry and professional associations, commercial fishing, ranching and farming organizations, community and consumer-focused nonprofit groups, chambers of commerce, unions, resource partners of the Small Business Association, and other licensed insurance agents and brokers, and other entities that can carry out duties and meet statutory responsibilities.



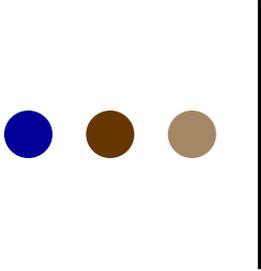
ACA Requirements for Navigators (1311(i))

- The duties of the navigator include:
 - Public education to raise awareness of QHPs
 - Distribute fair and impartial information
 - Facilitate enrollment in QHPs
 - Provide referrals to any applicable office of health insurance consumer assistance or health insurance ombudsman or other appropriate state agency for an enrollee with a grievance, complaint or question about their health plan
 - Provide information in a manner that is culturally and linguistically appropriate to the needs of the population being served.



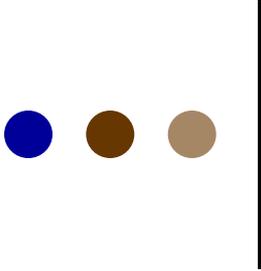
ACA Requirements for Navigators (1311(i))

- The Secretary shall establish standards for navigators to ensure that an entity selected to serve as a navigator is qualified, and licensed if appropriate, to engage in navigator activities and to avoid conflicts of interest. Navigators shall not:
 - Be a health insurance issuer
 - Receive any consideration directly, or indirectly, from a health insurance issuer in connection with the enrollment of qualified individuals or employees of a qualified employer in a QHP



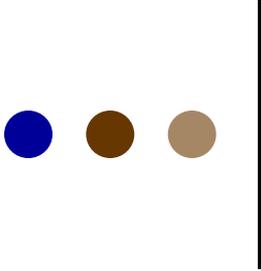
ACA Requirements for Navigators (1311(i))

- The Secretary will work with states to develop standards to make sure the information made available is fair, accurate and impartial.
- Grants to navigators “shall be made from the operational funds of the Exchange and not Federal funds received by the State to establish the Exchange.”



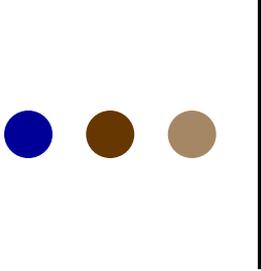
Navigators: Training and Certification

- New federal regulations specify:
 - USDHHS plans to issue training model standards.
 - Exchanges must develop a set of training standards to ensure Navigator competency in the needs of underserved and vulnerable populations, eligibility and enrollment procedures, and the range of public programs and QHP options available through the Exchange.
 - Navigators must comply with privacy and security standards adopted by HBE (including handling of tax data and other personal information).



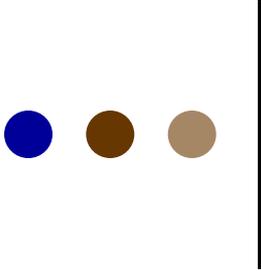
Navigator: Training and Certification

- State HBEs cannot require navigators to hold an agent or broker license, including having errors and omissions coverage.
- Nondiscrimination provisions apply to navigators.
- At least one entity that serves as navigators should be consumer or consumer-focused nonprofit.
- Final rule does not prohibit navigators from receiving grants and other consideration from health insurance issuers for activities unrelated to enrollment into health plans, but DHHS raised concerns about these relationships.



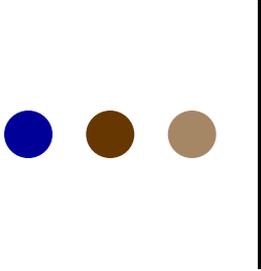
Navigator Regulations (45 CFR 155.210)

- (a) HBE must establish a Navigator program
- (b) Standards. HBE must establish and distribute
 - (1) Standards to prevent or minimize conflicts of interest
 - (2) Training standards to be met by all entities and individuals performing navigator functions, to ensure expertise in:
 - Needs of underserved and vulnerable populations
 - Eligibility and enrollment rules and procedures
 - Range of QHP options and insurance affordability program
 - Privacy and security standards



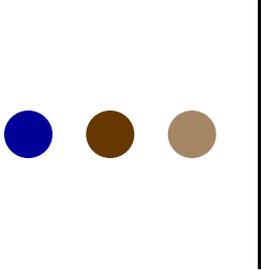
Navigator Regulations (45 CFR 155.210)

- (c) (1) To receive a Navigator grant, the entity or individual must:
 - Be capable of carrying out specified duties
 - Demonstrate that the entity has existing relationships or could establish relationships with targeted populations (including small businesses)
 - Meet licensing or certification standards
 - Not have a conflict of interest
 - Comply with privacy and security standards



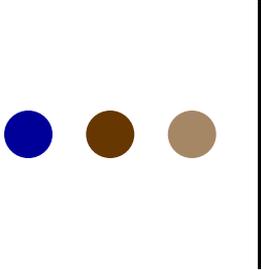
Navigator Regulations (45 CFR 155.210)

- (c) (2) HBE must contract with at least one community and consumer-focused nonprofit group, and at least one of the following other types of navigator entities:
 - Trade, industry, and professional associations
 - Commercial fishing industry organizations, ranching and farming organizations
 - Chambers of commerce
 - Unions,
 - Resource partners of the Small Business Administration
 - Licensed agents and brokers
 - Other public or private entities or individuals that meet the requirements, including but not limited to Indian tribes or tribal organizations, and state or local human service agencies.



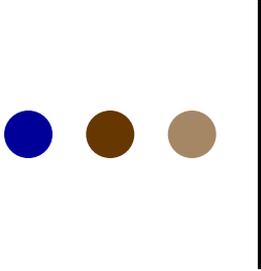
Navigator Regulations (45 CFR 155.210)

- (d) Navigator may not be:
 - Health insurance issuer, subsidiary of an issuer, an association that lobbies on behalf of insurers, or receive any consideration directly or indirectly from issuers in connection with enrollment of individuals or employees into a QHP.
- (e) Duties: Must carry out the following duties:
 - (1) Maintain expertise in eligibility, enrollment, and program specifications and conduct public education to raise awareness about the HBE
 - (2) Provide information and services in a fair, accurate, and impartial manner, acknowledging other health programs.



Navigator Regulations (45 CFR 155.210)

- (e) Duties: Must carry out the following duties:
 - (3) Facilitate selection of a QHP.
 - (4) Provide referrals to applicable office of health insurance consumer assistance or ombudsman program, or other state agencies for grievance, complaint, or questions.
 - (5) Provide information in a manner that is culturally and linguistically appropriate to meet needs of people with limited English proficiency, and ensure accessibility and usability of Navigator tools for people with disabilities.
- (f) Funding for navigator grants may not come from federal funds received by the state to establish the HBE.

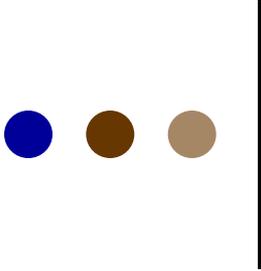


Navigators: Role of Navigator

- What is the role of the navigator?
 - Helping individual/family/small business understand plan options, understand how to access the website, understand insurance concepts so that the individual/family/small business can choose a health plan that is best for them
 - Navigators should not provide advice or steer individual/family/small business to particular plan

Navigator Entities vs. Navigator Individuals

- Subcommittee distinguished between navigator “entities”, and navigator “individual counselors”
 - HBE must contract with navigator “entities”, which include at least two different types of organizations which have, or could easily establish, relations with target populations
 - Navigator entities will serve as local coordinating bodies for locally certified navigator individuals
 - Navigator individuals will be required to be trained and certified, and will provide impartial information and facilitate enrollment for individual seeking coverage

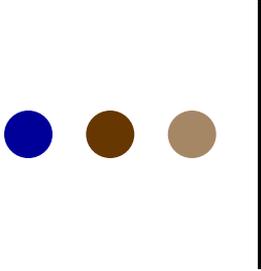


Navigators: Training and Certification

- Subcommittee looked to SHIP model for training and certification
 - SHIP contracts with 109 SHIP coordinating organizations across the state, with more than 800 trained and certified volunteer SHIP counselors
 - SHIP training is provided online, 13 different modules, takes approximately 24 hours to complete.
 - SHIP volunteer counselors must pass a competency exam, and must be recertified annually.
 - SHIP volunteers must complete continuing education, and meet minimum activity thresholds.

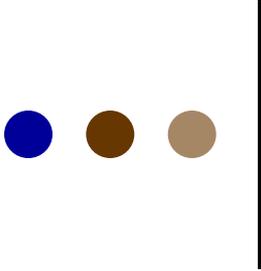
● ● ● | Navigators: Training and Certification

- Subcommittee recommended that we follow a similar model for HBE navigators. Thus, the group recommended:
 - HBE contract with NCDOI to develop a process for training, and certification (after passing a competency exam).
 - NCDOI should also develop requirements for continuing education requirements, minimum threshold activities, and reporting requirements to meet annual recertification.
 - Navigator entities should have a certified navigator coordinator.



Navigators: Conflict of Interest

- ACA regulations require that navigators give impartial advice, and that HBE develop rules to avoid a conflict of interest.
- Final regulations state: “We also clarify here that “conflict of interest,” as used in 155.210(c)(1)(iv) of the final rule, means that a Navigator has a private or personal interest sufficient to influence, or appear to influence, the objective exercise of his or her official duties; for purposes of this rule, it includes the conflict of interest standards developed by each Exchange.”



Navigators: Conflict of Interest

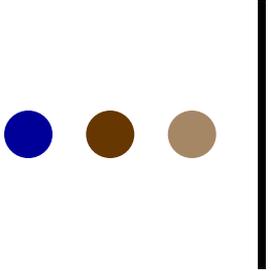
- Navigator subcommittee recommended that:
 - Organizations cannot serve as navigator coordinating entities if they would derive financial benefit from steering individuals into particular plans or insurers.
 - Employees of those organizations can serve as a navigator as long as the individual, or family member, does not receive compensation directly or indirectly from an insurer, and as long as their wages, salary, or job performance is not based on the plans which individuals select.

● ● ● | Navigator Compensation

- Federal grant funds may *not* be used to pay navigator entities for navigator activities
 - May potentially be able to be used to pay for outreach and education, and for state-level training and certification
- Big push is needed in 2013 and 2014, before the HBE will be generating independent funding

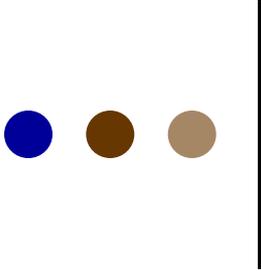
● ● ● | Navigator Compensation

- The navigator subcommittee recommended:
 - HBE use federal funds to pay for training, CE, and certification, and provide small grants to appropriate community based organizations for outreach and education.
 - HBE should seek funding from state philanthropic organizations or other sources to provide small grants to navigator entities to offset administrative costs to oversee work of local navigators.
 - Initially grants should be based on size of target population (flat rate), but later, should build in performance incentives.
 - HBE Board should revisit the issue of whether individual navigators should get paid.



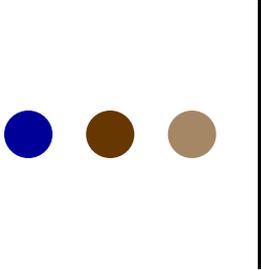
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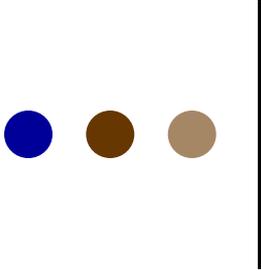
Agents and Brokers (45 CFR 155.220)

- States have the option to permit agents or brokers to enroll individuals or employers into QHPs.
 - If receive compensation for enrolling individuals in QHPs or health plans outside of the HBE, then can not serve as navigators.
 - To gain subsidies offered through the HBE, the agent/broker must use the same application and eligibility verification process through the HBE website.
 - HBE can allow agents and web brokers to use separate Web sites as long as the web site conforms to all the same standards (45 CFR 155.220(c)(3))..



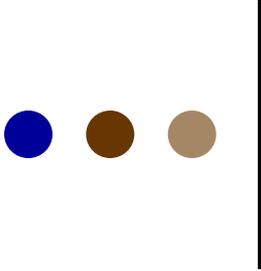
Agents and Brokers (45 CFR 155.220)

- (a) States may permit agents and brokers to:
 - (1) Enroll individuals, employers or employees into any QHP in the individual or small group market offered through the HBE
 - (2) Enroll qualified individuals in a QHP in a manner that constitutes enrollment through the HBE
 - (3) Assist individuals in applying for advance payment of tax credit and cost sharing reductions.
- (b) Website disclosure. The HBE may provide information regarding licensed agents and brokers on its website.



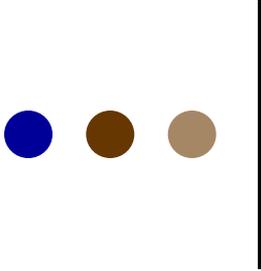
Agents and Brokers (45 CFR 155.220)

- (c) Enrollment through the HBE. A qualified individual may be enrolled in a QHP through the HBE with the assistance of an agent/broker if:
 - (1) The agent/broker ensures the applicant's completion of an eligibility verification and enrollment application through the HBE website
 - (2) The HBE transmits enrollment information to the QHP issuer to allow the issuer to enroll the individuals in the QHP



Agents and Brokers (45 CFR 155.220)

- (3) When an internet website of the agent/broker is used to complete the QHP selection, the website must:
 - (i) Meet all the standards for disclosure and display of QHP information
 - (ii) Provide consumers the ability to view all QHPs offered through the HBE
 - (iii) Not provide financial incentives, such as rebates or giveaways
 - (iv) Display all QHP data provided by the HBE
 - (v) Maintain audit trails and records in electronic format for at least 10 years
 - (vi) Provide consumers with the ability to withdraw from the process and use the HBE website.



Agents and Brokers (45 CFR 155.220)

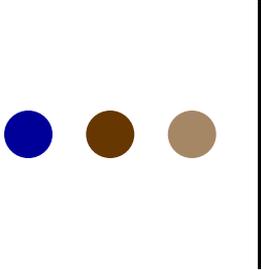
- (d) An agent/broker that enrolls individuals into a QHP in a manner that constitutes enrollment through the HBE, or assists individuals in applying for subsidies must comply with the terms of agreement where agent/broker at least:
 - (1) Registers with the HBE in advance
 - (2) Receives training in the range of QHP options and insurance affordability programs
 - (3) Complies with HBE privacy and security standards
- (e) Must comply with applicable state law, including applicable state law related to confidentiality and conflicts of interest.

● ● ● | Role of Agents/Brokers

- The HBE has the authority to allow agents and brokers to sell coverage in the HBE
- The subcommittee was supportive of funneling small businesses to agents/brokers, because they have additional training to help them determine whether to offer insurance, tax deductibility, Section 125 cafeteria plans, and whether to offer one plan, or multiple plans in the different metal levels.
 - However, agents and brokers also need additional training to understand all the new insurance options

● ● ● | **Role of Agents/Brokers**

- The subcommittee recommended:
 - Agents and brokers must receive similar training and pass a competency exam to be allowed to enroll individuals and small businesses into coverage offered through the HBE.
 - Small employers who need more information or advice should be funneled to an agent or broker, rather than a navigator.
- However, the subcommittee was also concerned about the potential conflict of interest by agents/brokers



Agent/Brokers: Conflict of Interest Provisions

- To address the potential conflict of interest, the subcommittee recommended:
 - HBE should not refer small businesses to agents or brokers who are “captive” or restricted to selling plans by certain insurers.
 - Agents/brokers should disclose differential commissions from different insurers.
 - NCDOI should require insurers to pay the same commission, whether placing business inside or outside the HBE
 - NCDOI and HBE should explore other options to reduce conflicts, such as flat payments regardless of insurer.

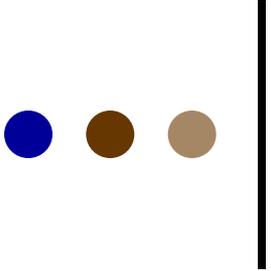
Agents/Brokers:

Disincentive to Sell to Smallest Employers

- Because of the current compensation structure, agents/brokers have little financial incentive to work with smallest employers (<10 employees).

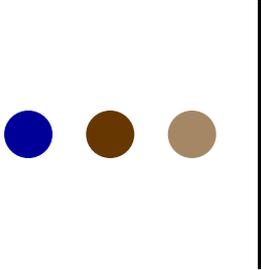
Subcommittee recommended:

- NCDOI and HBE should explore whether agents/brokers should be paid higher rates for small groups, and then lower the per person compensation as the size of the group increases.
- NCDOI and HBE explore whether to pay agents/brokers more for enrolling previously uninsured groups.
- NCDOI TAG should consider whether to eliminate the minimum participation requirements.



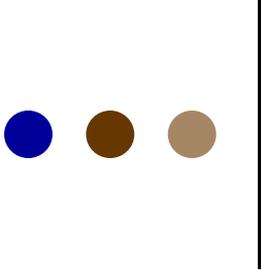
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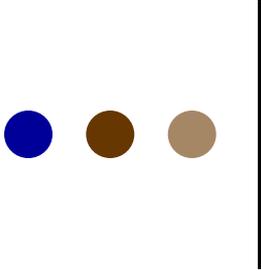
ACA Requirements for Medicaid Assistance

- Medicaid agency must provide assistance to any individual seeking help with the application or redetermination process. (42 CFR 435.908)



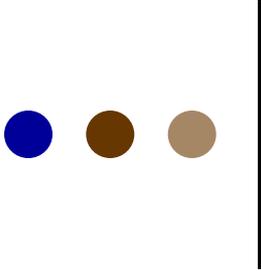
HBE, Medicaid, and CHIP Enrollment Coordination

- If HBE identifies people who are eligible for Medicaid or CHIP, HBE must enroll them into those programs.. (ACA 1311(d)(4)(F))
- State must ensure that people who apply for Medicaid or CHIP, but who are found to be ineligible, are screened for eligibility for enrollment into a QHP and, if applicable, premium assistance, and if eligible, enroll the person into the plan. (ACA 2201, amending 42 USC 1396w-3(b)(1)(C)).



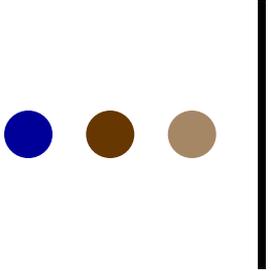
Medicaid Regulations (42 CFR 435.1200, 457.350)

- State Medicaid agency must:
 - Ensure prompt determinations of eligibility and enrollment in the appropriate program without undue delay
 - If determined not to be eligible for Medicaid or CHIP, the state agency must, promptly and without delay, determine potential eligibility for other insurance affordability programs and transfer the information via electronic interface to other programs.



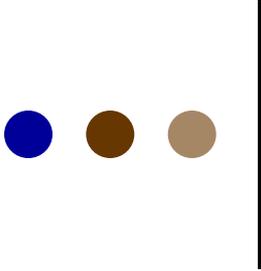
Medicaid Regulations (42 CFR 435.912(b))

- Federal government allows states to define what is “promptly and without undue delay.”
- State’s timeliness standards and performance standards must account for:
 - Capabilities and costs of generally available systems and technologies
 - General availability of electronic data matching and ease of connections
 - Demonstrated performance and timeliness experience of State Medicaid, CHIP, and other insurance affordability programs
 - Needs of the applicants including application preferences
- However, may not exceed 90 days (if application based on disabilities, or 45 days for all other applicants)



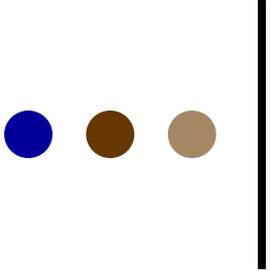
No Wrong Door

- The subcommittee explored the question of how to create a no-wrong door for people applying for any insurance affordability programs
 - What is the role of DSS in helping people enroll in the HBE when a person is determined to be ineligible for Medicaid/CHIP?
 - What is the role of Navigators in helping people enroll into Medicaid and/or CHIP?
- Who will help individuals in the enrollment process if they are required to provide additional information to address conflicting administrative data?



No Wrong Door

- To facilitate a no wrong door approach, the subcommittee recommended:
 - DSS workers be trained and certified as navigators, so that DSS workers can assist people who are ineligible for Medicaid/CHIP to enroll in a qualified health plan offered through the HBE.
 - To make it easier for DSS' to serve as navigator entities, NCFAST should capture most/all of the data needed for navigator accountability.
 - HBE Board should examine options to help offset some of the administrative costs for DSS workers in providing enrollment assistance to individuals ineligible for public coverage.



No Wrong Door

- If DSS workers do not have to immediately enroll people into private coverage, then the subcommittee recommended:
 - HBE Board should create other mechanisms to ensure a “warm hand off” for people who are determined to be ineligible for public coverage to ensure they can receive immediate assistance from a trained navigator



Questions?