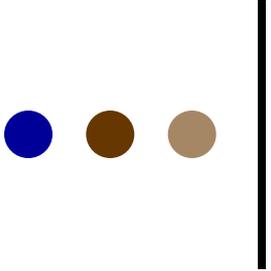


# Navigators, Outreach, Other Assisters

Pam Silberman, JD, DrPH

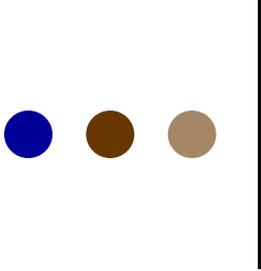
President & CEO

February 21, 2012



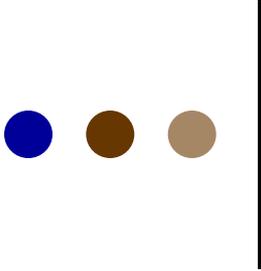
# Agenda

- Brief overview of navigators, outreach, enrollment provisions in ACA
- Review of tentative recommendations for role of navigator in nongroup market
- Outstanding questions



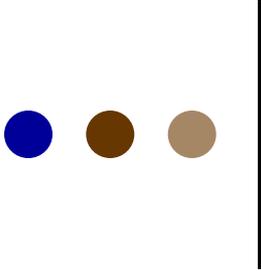
# Agenda

- **Brief overview of navigators, outreach, enrollment provisions in ACA**
  - **ACA statutory provisions**
  - **Notice of Proposed Rulemaking (NPRM)**
  - **Other consumer assistance provisions**
- Review of tentative recommendations for role of navigator in nongroup market
- Outstanding questions



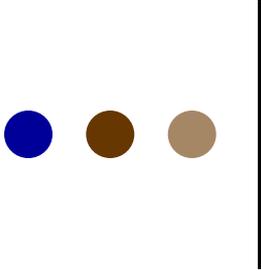
# ACA Requirements for Navigators (1311(i))

- 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.



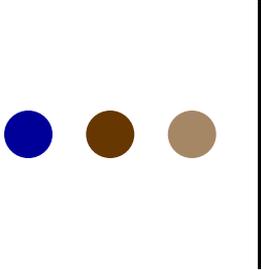
# ACA Requirements for Navigators (1311(i))

- 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.



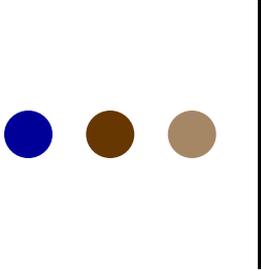
# ACA Requirements for Navigators (1311(i))

- 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



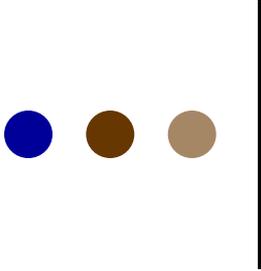
# ACA Requirements for Navigators (1311(i))

- 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.”



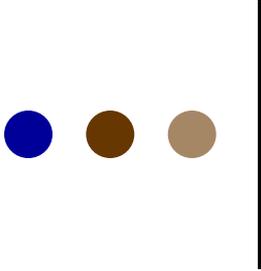
# **NPRM: Navigator Requirements (45 CFR 155.210)**

- To be a navigator, an entity must:
  - Demonstrate an existing, or that it could readily establish relationships with employers and employees, consumers (including uninsured and underinsured consumers), or self-employed individuals likely to be eligible to enroll in a QHP.
  - Meet licensure or certification or other standards.
  - Not have a conflict of interest during the term as Navigator.
    - Navigator cannot be a health insurance issuer.
    - Navigator cannot serve both as a navigator and agent/broker (with financial compensation from insurer) for plans sold inside the HBE; however, agent/broker can serve as a navigator for plans sold inside the HBE, and still receive commission to enroll employers or individuals in non-QHPs (ie, outside the HBE).



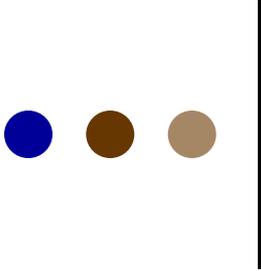
# Navigator Requirements (45 CFR 155.210)

- HBE must provide Navigator grants to *at least two* of the following category of entities:
  - Community and consumer-focused nonprofit groups
  - 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, and
  - Other public or private entities that meet the requirements of this section (such as Indian tribes, tribal organizations, or state and local human service agencies).



# Navigator Requirements (45 CFR 155.210)

- Navigators must be able to:
  - Maintain expertise in eligibility, enrollment and program specifications and conduct public education.
  - Provide information/services in fair, accurate, and impartial manner.
  - Facilitate enrollment in QHPs.
  - Provide referrals to applicable consumer assistance or ombuds program.
  - Provide information in manner that is culturally and linguistically appropriate.



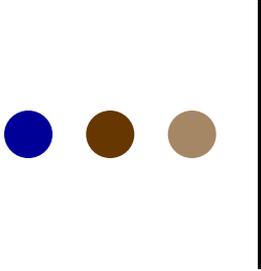
# Navigator Funding (45 CFR 155.210)

- Funding may *not* be from federal funds received by the State to establish the HBE.
- However, if the state chooses to permit or require Navigator activities to address Medicaid/CHIP administrative functions (eg, outreach and enrollment), and such functions are performed under a contract or agreement that specifies a method for identifying costs/expenditures related to Medicaid and CHIP activities, the Medicaid/CHIP agency may claim federal funding for the share of expenditures at normal administrative match rate.

# HBE Consumer

## Assistance Tools and Outreach (45 CFR 155.205)

- HBE must operate toll free call center.
- HBE must also maintain an Internet website that:
  - Includes standardized comparative information on QHPs, including premium and cost sharing information, summary of benefits and coverage, identification of level of plan, results of enrollee satisfaction survey, quality ratings, medical loss ratio, transparency of coverage measures, and provider directory.
  - Is accessible to people with disabilities, and must provide meaningful access to people with limited English proficiency
- HBE must conduct outreach and education..



# Medicaid Agency Outreach Requirements

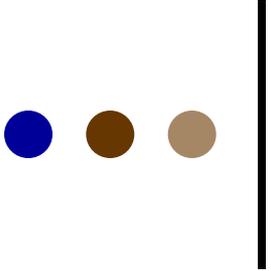
- Agency must conduct outreach to vulnerable populations (Sec. 2201)
  - Vulnerable populations include: children, unaccompanied homeless youth, children and youth with special health care needs, pregnant women, racial and ethnic minorities, rural populations, victims of abuse or trauma, individuals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

# 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)
- Hospitals can determine presumptive eligibility for all Medicaid populations. (Sec. 2202)
  - Note: Hospitals can decide if they want to make Medicaid presumptive eligibility determinations
- States may allow certain other providers to make presumptive eligibility determinations. (Sec. 2001(a)(4)(B))
  - Includes FQHCs, RHCs, local health departments

# HBE, Medicaid, and CHIP Enrollment Coordination

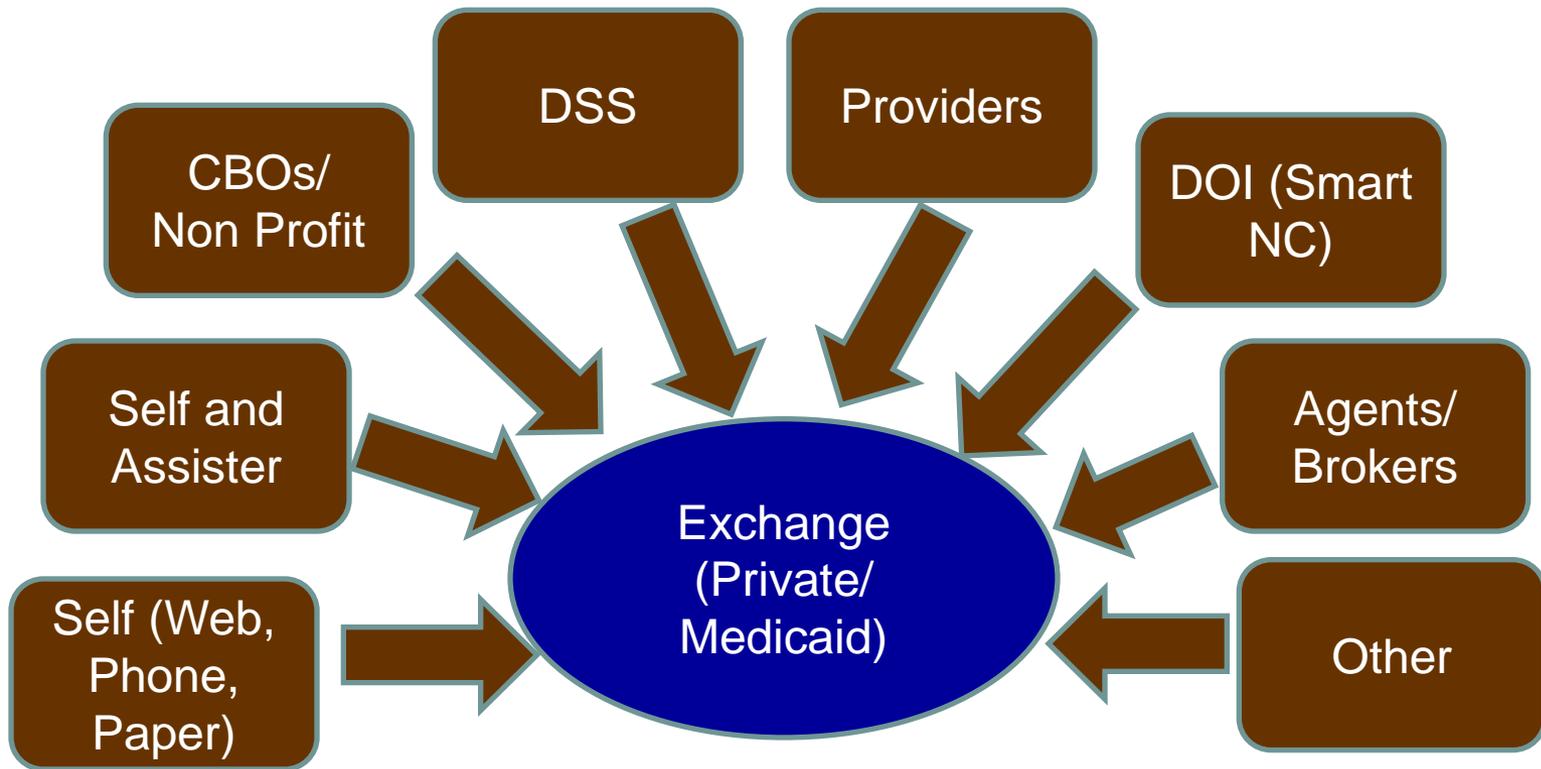
- If HBE identifies people who are eligible for Medicaid or CHIP, HBE must enroll them into those programs.. (ACA 1311(d)(4)(F))
- State must ensure that people who apply for Medicaid or CHIP, but who are found to be ineligible, are screened for eligibility for enrollment into a QHP and, if applicable,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

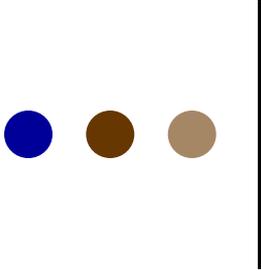


# Agenda

- Brief overview of navigators, outreach, enrollment provisions in ACA
- **Review of tentative recommendations for role of navigator in nongroup market**
- Outstanding questions

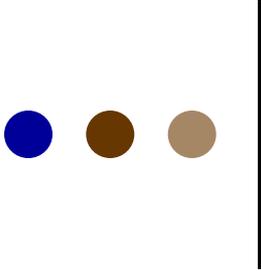
# Different Types of Enrollment Assisters





# 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 Levels of Consumer Assistance

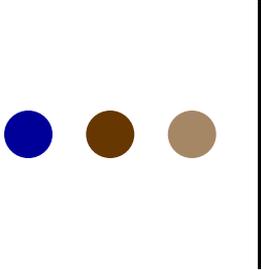
- General information and outreach
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- Technical advice selecting plan that is best for the individual/family/small business
  - Licensed agents or brokers

# ● ● ● | Navigators: Subcommittee Discussion

- What training should be required?
  - Navigators should go through training similar to that required of SHIP counselors
- Should navigators be certified?
  - Yes, navigators should pass competency exams and be certified (similar to SHIP)
- Should there be ongoing continuing education requirements (CE)
  - Yes, similar to SHIP

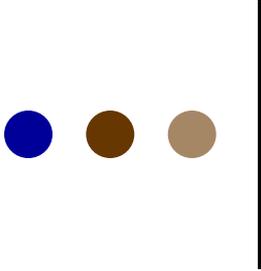
# Navigators: Subcommittee Discussion

- Who should develop and administer initial training, certification, and ongoing CE
  - *NCDOL in collaboration with HBE*
- 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



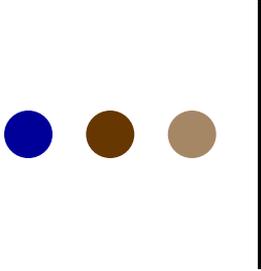
# Navigators: Subcommittee Discussion

- Who could serve as navigators?
  - Community based organizations, nonprofits, DSS staff, agents/brokers
  - HBE should contract with sufficiently diverse groups to reach all potential eligibles
  - Navigators should be linguistically and culturally appropriate for target populations



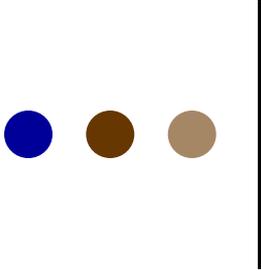
# Navigators: Subcommittee Discussion

- Would HBE help link potential applicants to navigators (if requested)?
  - Yes, HBE would help link individuals/families/small businesses to trained and certified navigators (if requested)
  - Conversely, HBE would not link individuals to other, non-certified, individuals/groups



# Navigators: Subcommittee Discussion

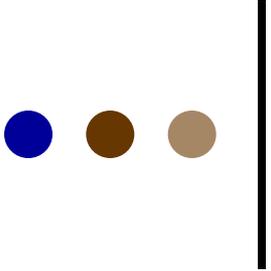
- What oversight and accountability should be required?
  - Navigators should provide information on numbers of people served and types of services provided
  - State should create a complaint system so people can provide feedback on specific navigators
  - State should establish minimum activity thresholds for navigators (eg, number of one-on-one counseling sessions, number of people who enrolled, number of people from target populations, number of people reached during information and outreach sessions)
  - HBE should track who is providing assistance and what plans people are enrolling in



# Navigators

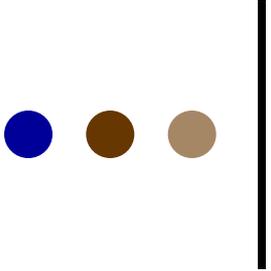
	Training	Certified	Advert. Link	Paid (by whom)	Plan Selection	Acct./ code conduct
DSS	Y	Y	Y	Grants for traing	N	Y
CBO/Govt agency	Y	Y	Y	HBE*	N	Y
Safety net PC	Y	Y	Y	HBE* ?	N	Y
Hospital/ Pvt prov	?	?	?	?	N	?
Agent	Y -	Y	Y	HBE same level pay	Y	Y
Individuals	?	?	?	???	N	

Cost allocation for Medicaid eligibility part of enrollment function.



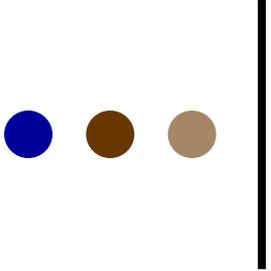
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- Brief overview of navigators, outreach, enrollment provisions in ACA
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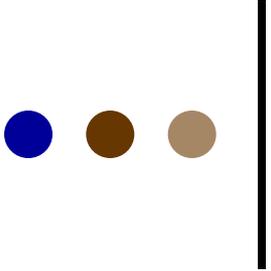
# Outstanding Questions

- What is the role of health care providers in helping people enroll (eg, hospitals, FQHCs/RHCs, Local Health Departments, pharmacists, doctors)
  - Formal navigators? Informal assisters?
  - How to address potential conflict of interest?
  - Are there different considerations for safety net organizations than others? (Note: FQHCs/RHCs may have less conflicts of interest than other providers because ACA requires that they are paid on Medicaid prospective cost basis)



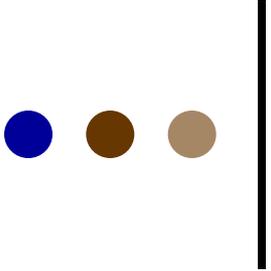
# Outstanding Questions

- How should navigators be paid (if at all)?
  - ACA notes that the HBE should provide “grants” to navigators
  - What is the source of funding for navigators (particularly in FY 2013 and 2014)?
  - Should navigators be paid based on volume of people served? Volume enrolled?
  - What is the estimated cost of navigators in early years? Later years?



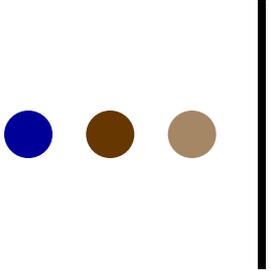
# Outstanding Questions

- What training, if any, should be offered to other organizations that are not recognized as official navigators?



# Outstanding Questions

- 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?

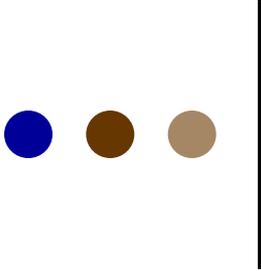


# Outstanding Questions

- Who will help individuals in the enrollment process if they are required to provide additional information to address conflicting administrative data?
  - Example: Person loses job, so last year's wages do not reflect current income.



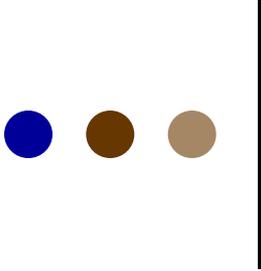
# Discussion



# Medicaid Work Group Recommendation

## Develop a Broad-based Education and Outreach Campaign to Educate the Public about New Insurance Options

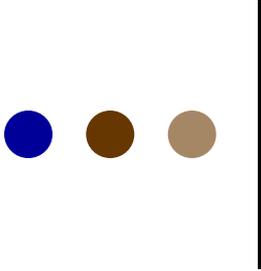
- DMA, DOI, and the HBE should work together to develop a broad-based **education and outreach campaign** to educate the public about different health insurance options and insurance affordability programs. As part of this effort, DMA, DOI and the HBE should:
  - Develop educational materials that explain the different insurance options and how people can apply for help paying for health insurance coverage.
  - Enlist the help of community based organizations, provider groups, and government agencies to educate the general population about the different coverage options.



# Medicaid Work Group Recommendation

## Develop a Broad-based Education and Outreach Campaign to Educate the Public about New Insurance Options (cont'd)

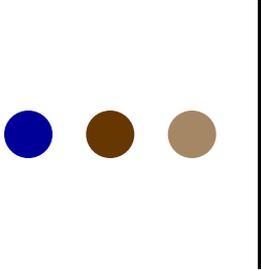
- Special efforts should be made to identify and educate organizations that have relationships with traditionally underserved communities, including the uninsured, and small businesses.
- Provide enhanced training to organizations that are charged with assisting people enroll into Medicaid, NC Health Choice, or private insurance coverage offered through the HBE.
- Create a unified toll free telephone hotline that is widely advertise to provide information about the new insurance options.
- DMA, DOI, and the HBE should seek federal, state, and/or private foundation funds to pay for media coverage to educate the public about the new insurance options.



# Medicaid Work Group Recommendation

## Retraining DSS Eligibility Workers

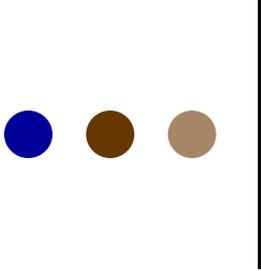
- DMA, DSS, and the North Carolina Department of Social Services Directors should provide training to county Department of Social Services (DSS) eligibility workers to help them understand the new eligibility and enrollment processes that will go into effect in the fall of 2013, and the new roles and responsibilities of DSS workers under the Affordable Care Act.
- Local Departments of Social Services should ensure that there is at least one DSS eligibility worker who is trained and certified as a patient navigator in each DSS office, to ensure that local DSS offices know about all the available insurance affordability options.



# Safety Net Workgroup Recommendation

## Allow Safety Net Organizations to Function as Patient Navigators

- The HBE should train and certify staff at safety net organizations to serve as patient navigators. In accordance with the ACA, these groups would be required to:
  - Provide public education to raise awareness of QHPs.
  - Distribute fair and impartial information.
  - Facilitate enrollment in QHPs.



# Safety Net Workgroup Recommendation

## Allow Safety Net Organizations to Function as Patient Navigators (cont'd)

- 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.
- Meet standards to avoid conflict of interest.
- As staff of safety net organizations, they should also educate consumers and patients about appropriate use and location of care.