



**HEALTH BENEFITS EXCHANGE AND INSURANCE OVERSIGHT WORKGROUP
NAVIGATOR SUBCOMMITTEE
Monday, March 5, 2012
North Carolina Institute of Medicine, Morrisville
1:00 – 4:30 pm
Meeting Summary**

Attendees

Members: Allen Feezor (co-chair), David Atkinson, Teri Gutierrez, Jean Holliday, Rep. Verla Insko, Julia Lerche, Carolyn McClanahan, Aaron Nelson, Susan Nestor, Carla Obiol, Elizabeth O’Dell, Elizabeth Phillips, Lauren Short, Rebecca Whitaker

Steering Committee and NCIOM Staff: Kimberly Alexander-Bratcher, Krutika Amin, Thalia Fuller, Pam Silberman, Anne Williams

Other Interested people: Lisa Gibson, Andy Landes, Michael Keough, Sandy Morgan, Jessica Stone

WELCOME AND INTRODUCTIONS

*Allen Feezor
Senior Policy Advisor
North Carolina Department of Health and Human Services
Co-chair*

Mr. Feezor welcomed people to the meeting and asked everyone to introduce themselves.

CREATING ENROLLMENT “NO-WRONG DOOR” FOR PEOPLE APPLYING TO ANY INSURANCE AFFORDABILITY PROGRAM & ROLE OF NAVIGATORS, AGENTS/BROKERS IN THE SMALL GROUP MARKET

*Pam Silberman, JD, DrPH
President & CEO
North Carolina Institute of Medicine*

Dr. Silberman briefly reviewed the provisions in the Affordable Care Act (ACA) for navigators, outreach and enrollment. She summarized the subcommittee’s tentative recommendations for the role of navigators in the nongroup market before facilitating group discussion on the outstanding questions:

- How should the HBE provide outreach, education, and enrollment facilitation to the small group market?
 - Who can serve as “navigator” in the SHOP?
 - What is the role of agents/brokers?
 - Compensation for navigators, agents/brokers
- What training, if any, should be offered to other organizations that are not recognized as official navigators?

- 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?

A copy of Dr. Silberman’s presentation is available here: [Navigator Subcommittee Update](#).

Selected Group Discussion:

- Individual Navigators vs. Navigator Entities
 - To be Navigators, individuals must have a connection to a Navigator Entity, which can be paid through Navigator grant funds. Individuals cannot receive grant funds.
- Code of Ethics, Conflicts of Interest, and Accountability
 - Individuals can serve as navigators if neither they nor their family members are personally conflicted in terms of compensation or job performance.
 - Provider/safety net organizations cannot be navigator entities if they have a financial conflict, but employer conflict of interest no longer precludes individuals in safety net organizations to serve as navigators.
 - Signed acknowledgement for trained individual navigators that they will not steer people towards any specific QHP or carrier, and that their certification can be terminated for inappropriate behavior.
 - Conflict of interest provisions apply differently to individual navigators and agents/brokers. Within the exchange, agents/brokers must choose to sell as either an agent or a navigator, but not both.
 - Follow SHIP model of providing blanket personal liability protection for certified HBE navigators.
 - HBE should not link individuals requesting assistance to captive agents. There are still incentives for non-captive agents.
 - TAG should discuss whether we should just require a flat agent commission inside and outside the HBE across health plans. This would reduce any type of conflict of interest.
- Role of the Navigators in SHOP
 - Outreach
 - The role of broker is very important as a marketing tool to make sure small business employers know about the HBE and help enroll. Excluding brokers can drive business outside the HBE.
 - Outreach should look to a variety of business network types. Only about half of business owners are part of Chambers of Commerce. Owners not part of a Chamber of Commerce are often part of industry associations/resource organizations. Smaller Chambers of Commerce

- Provide outreach and education for community groups, hospitals, and provider groups to make sure they understand the program and referral resources.
- Information can be available on the web, in toolkits, through workshops. The same information and materials should be provided for all groups.