Navigators and Other Marketplace Assistance Programs

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS for MEDICARE and MEDICAID SERVICES
Center for Consumer Information and Insurance Oversight

May 2013
Background

- Starting October 1, 2013, consumers in all states will be able to choose affordable health insurance options through a new Health Insurance Marketplace. Some states are setting up a State-based Marketplace, others will work with the federal government in a State Partnership Marketplace and the remaining states will have a Federally-facilitated Marketplace.

- Consumers in every Marketplace will be able to get help as they apply for and choose new insurance options. This assistance will be provided in a number of different ways: through Navigators, in-person assistance personnel, and certified application counselors. In addition, agents and brokers will also help consumers enroll in new insurance options.
Navigator Duties and Requirements

- **Navigator Grant Programs** are required by section 1311(i) of the Affordable Care Act.
- Each Navigator must be trained to perform all of the listed duties in § 1311(i)(3) and 45 CFR § 155.210(e):
  - Maintain expertise in eligibility, enrollment, and program specifications and conduct public education activities
  - Distribute fair, accurate, and impartial information about enrollment in Qualified Health Plans (QHP) and other health programs such as Medicaid and CHIP
  - Facilitate selection of a QHP
  - Refer consumers to Consumer Assistance Programs (CAPs) or other ombudsmen programs
  - Provide information in a manner that is culturally and linguistically appropriate and accessible for people with disabilities
Navigators’ Community and Consumer Focus

• 45 CFR § 155.210 requires that at least two types of entities serve as Navigators in each Marketplace, and that at least one of which must be a community and consumer-focused nonprofit.

• The regulation also requires that Navigators be trained to ensure they have expertise in the needs of underserved and vulnerable populations (e.g. rural populations and people living with HIV/AIDS).

• Navigator grantees could include individuals and organizations that often target their outreach to specific ethnic, geographic, or other communities, although all Navigators should have the ability to help any individual who seeks assistance.
Eligibility

• Eligible entities:
  – Self-employed individuals
  – Public and private entities including non-profit organizations, tribes and tribal organizations, unions, chambers of commerce, etc.

• Ineligible entities:
  – Health insurance issuers and their subsidiaries
  – Associations that include members of, or lobbies on behalf of, the insurance industry
  – Recipients of any direct or indirect consideration from and health insurance issuer in connection with enrollment
In the Federal Marketplace, including states partnering with HHS to build a Marketplace, HHS is responsible for funding and awarding Navigator grants.

- HHS will provide technical assistance and oversight to these awardees and will coordinate information sharing among the FFM and the state in which it is located.

States building their own Marketplace will build their own Navigator programs including awarding and overseeing grants, developing standards, and ensuring adherence to programmatic requirements.
Non-Navigator Assistance Personnel

- Federal regulations at 45 CFR § 155.205(d) and (e) provide that each Exchange must conduct consumer assistance, outreach, and education activities, including the Navigator program, to educate consumers about the Exchange and insurance affordability programs and to encourage participation.

- Establishing a non-Navigator consumer assistance program pursuant to § 155.205(d) and (e) will help ensure that the Exchange is providing outreach, education, and assistance to as broad a range of consumers as possible so that all consumers can receive help when accessing health insurance coverage through an Exchange.
A “non-Navigator assistance program” is a program established to fulfill these consumer assistance, education, and outreach functions.

SBMs may, but need not, establish non-Navigator assistance programs.

Consumer SPMs will operate non-Navigator assistance programs as a condition of their participation in the partnership.

HHS does not anticipate operating non-Navigator assistance programs in the FFM.
Funding for Navigators and Non-Navigator Assistance Personnel

• Section 1311(i)(6) of the Affordable Care Act prohibits Marketplaces from using section 1311(a) Exchange Establishment grant funds to fund Navigator grants, although grant funds may be used to cover the Marketplace’s cost of administering the Navigator program.

• SBMs may not have sufficient funds independent of section 1311(a) grant funds during their initial year of operation to achieve all of the goals of the Navigator program. As a transitional policy in such circumstances, SBMs may use a non-Navigator assistance program in their initial year of operation to fill in any gaps in their Navigator program. When an SBM becomes self-sustaining, it can choose to establish or continue a state-funded non-Navigator assistance program.

• Section 1311(a) grant funds are available for non-Navigator assistance programs in Consumer SPMs because the state has elected to establish and operate outreach, educational, and assistance activities to assist in its transition to a State-based Exchange, as a condition of its participation in the Consumer Partnership Exchange.
Certified Application Counselors (Proposed)

- On January 22, 2013 CMS issued a proposed rule at 78 F.R. 4593 introducing a separate class of certified application counselors, such as community health centers, health care providers and entities, and community-based organizations, to assist consumers with enrolling in coverage through the Marketplace.

- As proposed, certified application counselors would be designated by the Marketplace to provide the same application assistance that is available from Navigators, non-navigator assistance personnel, or licensed agents and brokers, but would not be funded through the Marketplace.

- Counselors would receive training and certification prior to providing assistance.
Navigators, Non-Navigator Assistance, and CACs in the Marketplace

- **States building their own Marketplace** are required to have a Navigator program and a certified application counselor program, but may choose whether to build a non-Navigator (in-person) assistance program.

- **States working with CMS** to build the consumer functions of their Marketplace will have a Navigator program, a non-Navigator (in-person) assistance program, and a certified application counselor program.

- **The federal Marketplace** including states working with CMS only on plan management functions will have a Navigator program and a certified application counselor program, but is not anticipated to have non-Navigator (in-person) assistance personnel.
Differences Among In-Person Assistance Services

<table>
<thead>
<tr>
<th>Availability in the Marketplace</th>
<th>Navigators § 1311(i) 45 CFR 155.210</th>
<th>In-Person Assistance Personnel 45 CFR 155.205(d),(e)</th>
<th>Certified Application Counselors 45 CFR 155.225(b) (Proposed)</th>
</tr>
</thead>
<tbody>
<tr>
<td>FFM (required)</td>
<td>FFM (none)</td>
<td>FFM (would be required)</td>
<td></td>
</tr>
<tr>
<td>SPM (required)</td>
<td>SPM (required)</td>
<td>SPM (would be required)</td>
<td></td>
</tr>
<tr>
<td>SBM (required)</td>
<td>SBM (optional)</td>
<td>SBM (would be required)</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Training</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>FFM – Training and certification program developed by CMS. Includes COI, CLAS, and privacy/security standards. SPM – Training and certification program developed by CMS; may be supplemented by state. Includes COI, CLAS, and privacy/security standards. SBM – Training and certification program developed by SBM.</td>
<td>FFM – N/A SPM – Training and certification program developed by CMS; may be supplemented by state. Includes COI, CLAS, and privacy/security standards. SBM – Training and certification program developed by SBM. CMS training standards would apply if paid for with federal Exchange Establishment grant funds.</td>
<td>FFM and SPM – Training and certification program would be developed by CMS. SBM – Training and certification program would be developed by SBM.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Funding</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>FFM and SPM – CMS grants to Navigator entities SBM – Exchange operational funds.</td>
<td>FM – N/A SPM and SBM – 1311 Establishment Grants to States may be used.</td>
<td>Would not be funded through the Marketplace</td>
</tr>
</tbody>
</table>
Each FFM (and SPM) State will receive an apportionment of funds based on that State’s portion of the total number of uninsured legal residents, divided by the total number of uninsured legal residents among all States with FFMs (and SPMs).

- Total funding for each state will be no less than $600,000.

Small entities/individuals are encouraged to partner to form consortiums.

Awards will be structured as cooperative agreements.

The performance period is up to 12 months from the date of award.
Additional Preliminary Information

• To apply for a Navigator funding, potential applicants must be sure to:
  – Have a EIN/TIN number
  – Register with www.grants.gov and set up a profile
  – Obtain an active Dun and Bradstreet Number
  – Register in the System for Award Management (SAM) system

• Without the above information, applications will not be accepted.

• Additional information on these processes are included in the funding opportunity announcement.
Application Review and Selection Process

- Must include: Cover Sheet, Standard Forms, Cover Letter, Project Abstract, Project Narrative, Work Plan and Timeline, Budget and Budget Narrative(s).

- **Important Dates:**
  - Optional Letter of Intent due: May 1, 2013
  - Applications due: June 7, 2013
  - Anticipated award date: August 15, 2013
HHS Assistance and Recipient Reporting

• HHS Involvement
  – Technical Assistance
    • Recipients must complete an HHS-developed training program and pass an exam.
  – Collaboration
  – Program Evaluation
  – Project Officers and Monitoring

• Recipient Reporting
  – Progress Reports (quarterly and final)
  – Financial Reports (quarterly and final)
NPRM Proposed Standards for Navigators and Non-Navigator Assistance Personnel

- The proposed rule at 78 Fed. Reg. 20581 establishes standards for Navigators and non-Navigator (in-person) assistance personnel in FFMs, SPMs, and non-Navigator (in-person) assistance personnel in SBMs funded through 1311(a) grant funds.
- SBMs may choose to use these standards as a model for their Navigator programs and non-federally funded non-Navigator programs, but need not do so.

**Proposed Standards**
- Conflict of interest standards
- Training and certification standards
- Meaningful access standards
NPRM Proposed Conflict of Interest Standards

- Assistance personnel covered by the proposed rule will be required to:
  - Submit to the Marketplace a written attestation that they and their staff are free of certain conflicts of interest
  - Submit to the Marketplace a written plan to remain free of conflicts of interest while providing Marketplace consumer assistance
  - Provide information to consumers about the full range of QHP options and insurance affordability programs for which they are eligible
  - Make any required disclosures to mitigate conflicts of interest to the Marketplace and each consumer who receives application assistance
• Proposed Conflict of Interest Disclosure Requirements
  – Would be required to disclose other lines of insurance business they intend to sell while carrying out consumer assistance functions
  – Would be required to disclose existing and former (within last 5 years) employment relationships with health insurance issuers and subsidiaries
    • Including existing relationships of the individual’s spouse or domestic partner
  – Would be required to disclose any existing or anticipated relationships with issuers of health insurance issuers and subsidiaries aside from already prohibited relationships
NPRM Proposed Training Standards

• Proposed standards for certification and recertification
  – All Navigators and non-Navigator (in-person) assistance personnel would be required to register with the Marketplace, complete an HHS-developed training, pass a certification examination, obtain continuing education, and be certified and/or recertified on at least an annual basis.

• Proposed training standards would include
  – Working with vulnerable and underserved populations; providing culturally and linguistically appropriate services; and ensuring services are accessible to people with disabilities
  – Information on insurance affordability programs, including Medicaid and CHIP
  – Basic concepts about health insurance and the Marketplace; QHPs; differences between health plans; eligibility and enrollment
  – Privacy, security, and customer service standards
  – Outreach and education methods and strategies
Proposed Culturally and Linguistically Appropriate Services & Access for Individuals with Disabilities

Proposed Applicability of CLAS Standards

• Would require assistance personnel covered by the proposed rule to provide consumers with culturally and linguistically appropriate services, including:
  – Maintaining knowledge about the racial, ethnic, and cultural groups in their service area
  – Assisting consumers in their preferred language
  – Recruiting a diverse staff that is representative of the demographics in their service area

Proposed Standards ensuring access by individuals with disabilities

• Consumer education materials and locations would be accessible to individuals with disabilities
• Auxiliary aids would be provided where necessary
• Navigator and non-Navigators would acquire sufficient knowledge to refer people with disabilities to appropriate Medicaid services
Proposed Amendments to Existing Rule

• Clarify that State or Marketplace licensing, certification, or other standards should not prevent the application of the provisions of title I of the Affordable Care Act
  – States cannot require that Navigators be licensed agents or brokers
  – States cannot require Navigators to carry errors and omissions coverage

• Clarify that a Navigator must also not:
  – Be an issuer of stop loss insurance, or a subsidiary of an issuer of stop loss insurance
  – Receive any consideration, directly or indirectly, from any issuer of stop loss insurance in connection with the enrollment of individuals or employers in a QHP or non-QHP
Navigator and Other Assistance Programs’ Training and Certification

- Navigators, non-Navigator assistance personnel in SPMs, federally-funded non-Navigator assistance personnel in SBMs, and CACs will need to register with the Marketplace.
- All will be required to take CMS-approved training and pass a certification exam.
- Training will be hosted on the Medicare Learning Network (MLN).