Navigators:
Connecting People to Coverage in the Health Insurance Exchange

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What is a “navigator”?

- A guide to help you get where you need to go
- In the Health Insurance Exchanges, navigators help consumers and small employers connect to coverage
  - Make people aware of coverage opportunities
  - Give information to determine best coverage option
  - Help them enroll
- Navigators support “no wrong door” approach to enrollment

Navigator duties

- Outreach and education about availability of coverage
- Provide “fair and impartial” information about coverage options, financial help to pay premiums
- Help people select and enroll in appropriate coverage (private or public)
- Refer for consumer assistance to resolve issues
- Provide information in culturally/linguistically appropriate manner; accessible to persons with disabilities
- Maintain expertise in eligibility, enrollment, programs

Who's eligible to be a navigator?

- Has or can readily establish relationships with groups to be served by the Exchange:
  - Small businesses and their employees
  - Self-employed individuals
  - Wide range of consumers (including uninsured/underinsured) who will seek coverage through the Exchange.
- Able to carry out navigator duties
- Meets standards set for navigators (including conflict of interest, privacy/security)
- Provides fair, accurate and impartial information

Groups that might serve as navigators

- 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
- Insurance agents and brokers
- Others capable of carrying out identified duties and meeting applicable standards, including:
  - Tribes, tribal/urban Indian organizations
  - State/local human service agencies

Who CAN'T be a navigator?

- Insurers
  - Including subsidiaries, associations, lobbyists
- Anyone who is paid directly or indirectly by an insurer for enrolling people in health plans

Why navigators? And who needs them?

- More than 300,000 New Mexicans expected to get coverage through Medicaid or Exchange
  - Many will need assistance through process
  - Many have had barriers to coverage in past
- Compared to people currently covered by private insurance, the Exchange population will be:
  - Older
  - Lower income
  - Less educated
    - 3/4 will have high school diploma or less
  - More racially and ethnically diverse
    - 1/4 will speak a language other than English in the home

Population in Exchange (cont.)

- 2/3 uninsured before enrolling
- Less access to health care
  - >1/3 won't have had check-up for >2 years
  - 2/5 don't have usual source of care
  - >1/4 will have had no interaction with care system in prior year
- More complicated coverage scenarios
  - Members of one family may be covered through multiple programs
  - People may transition between coverage programs as their circumstances change

(Source: Kaiser Family Foundation, "A Profile of Health Insurance Exchange Enrollees", Pub. #8147 , 3/2011)

Exchanges are required to have navigators

- PPACA §1311(i), 45 C.F.R. §155.210
- Must have at least two
  - At least one consumer- or community-focused nonprofit and at least one in another category
- Can have more as appropriate to meet needs of population using Exchange
  - E.g., 51 in Massachusetts (2008)
  - Exchange can contract with different navigator entities to reach different population segments
- May have different navigators for individual and small business exchanges.
  - But need some familiar with both markets to serve populations with mixed coverage.

Paying for navigators

- Paid through grants from the Exchange
- Federal establishment grant funds can be used to *set up* navigator program, such as:
  - Needs assessment
  - Identify potential navigator entities
  - Develop standards, training, certification
- Federal grants can't be used to pay navigators; paid from Exchange operational funds
  - Possible funding mechanisms include assessments on insurers, state funds, partnerships with foundations, others
  - Medicaid/CHIP match for services relating to those programs
- *Can't* be paid by insurers (for enrollment in or outside Exchange)

Licensing/certification/oversight

- Can't require broker license
- May require navigator certification/licensure
  - Based on demonstrated command of relevant information and skills, through training or competency
- Exchange to set standards navigators must meet
  - Prevent conflicts of interest
  - Assure necessary expertise
- DHHS to provide model COI standards and best practices for certification/licensure
- Preamble to federal rule encourages Exchanges to do regular reviews and assessments of navigators

Training

- Exchange to develop training
  - Initial and ongoing
- At minimum, ensure competency in:
  - Needs of underserved and vulnerable populations
  - Eligibility and enrollment rules and procedures
  - Range of public programs and qualified health plan options available
  - Proper handling of confidential information

Brokers and agents

- May be navigators only if they give up broker role
- Brokers continue to have important traditional role
  - Especially in small business market
  - Existing relationships
  - Some market segments better reached through brokers, others through consumer/community-based navigators
- Participation explicitly contemplated by PPACA (§1312(e), 45 CFR §155.220)
  - Enroll individuals and employers in qualified health plans
  - Help individuals apply for premium/cost-sharing assistance
- Requirements: register with Exchange, comply with privacy/security standards, be trained in full range of coverage options (including public programs), use Exchange's application process

Requirements for Navigators and Brokers under Federal Rules

(Source: Brooks, Georgetown Univ. Health Policy Institute, Center for Children and Families)

	Navigators	Brokers
Knowledge of all QHP options, as well as Medicaid, CHIP and BHP (if application)	Maintain Expertise	Receive Training
Conduct outreach and education	✔	
Provide fair, impartial information	✔	
Provide information on all QHP options	✔	
Provide information in manner that is culturally and linguistically, and accessible for people with disabilities	✔	
Comply with privacy and security standards	✔	✔
Have no conflicts of interest	✔	