

2.6 OPERATING NAVIGATOR PROGRAM

2.7 IN-PERSON ASSISTANCE PROGRAM

2.8 ROLE OF AGENTS AND BROKERS

NOVEMBER 2012

Summary

Minnesota's Health Insurance Exchange (HIX) is a marketplace for individuals and small businesses to compare, choose, and purchase affordable health insurance. An HIX can make health care easier to navigate for consumers and small businesses. Minnesota's HIX will allow Minnesotans to easily compare health insurance options based on cost, quality, and consumer satisfaction. It will foster fair and equitable competition to encourage insurers and health care providers to place a great focus on value, quality, and affordability.

An HIX can help small businesses provide affordable coverage choices to their workers and allow employees to choose the plan that is best for them and their families. Subsidies and tax credits will be available to eligible individuals and small businesses to make coverage more affordable. Eligible Minnesotans can purchase private health insurance or enroll in public programs like Medicaid/CHIP through the HIX.

Consumer Assistance will be critical to the success of the HIX. In order to ensure quality health care is accessible to consumers and to meet the Affordable Care Act (ACA) requirement that each HIX have a Navigator Program, Minnesota's Health Insurance Exchange will establish a Customer Assistance / Navigator Program that identifies specific roles and responsibilities. This consumer assistance will provide public outreach and education and help individuals through the eligibility determination process, plan selection and utilization of available subsidies.

The Navigator, Agent, and Broker work group is tasked by the Minnesota Health Insurance Exchange Advisory Task Force with providing recommendations regarding HIX consumer assistance, including assister roles, levels of service, training, certification, conflict of interest, and compensation. Many of the materials included in this section of Minnesota's Blueprint were created for or by the Navigator, Agent, and Broker Work Group.

Overview of Federal Navigator Requirements

Section 1311 (i) of the ACA requires that all health insurance exchanges establish a Navigator program that provides grants to entities to assist consumers as they seek services from an HIX. The ACA lists specific responsibilities for Navigators, the types of organizations that may serve as Navigators and outlines eligibility requirements and standards. Per the ACA, Navigators must:

- a. Conduct public education activities to raise awareness of the availability of qualified health plans;

Minnesota Health Insurance Exchange Blueprint Application Documentation

- b. Distribute fair and impartial information concerning enrollment in qualified health plans, and the availability of premium tax credits under section 36B of the Internal Revenue Code of 1986 and cost-sharing reductions under section 1402;
- c. Facilitate enrollment in qualified health plans;
- d. Provide referrals to any applicable office of health insurance consumer assistance or health insurance ombudsman established under section 2793 of the Public Health Service Act, or any other appropriate State agency or agencies, or any enrollee with a grievance, complaint, or question regarding their health plan, coverage, or a determination under such plan or coverage; and
- e. Provide information in a manner that is culturally and linguistically appropriate to the needs of the population being served by the Exchange or Exchanges.

According to the ACA, eligible entities must have an existing relationship or the ability to easily create a relationship with potential users of the HIX and will consist of individuals, public entities and private entities that will communicate with, educate and enroll consumers in Qualified Health Plans (QHP's) and publically funded health care through multiple enrollment methods provided by the HIX.

To be certified, Minnesota's HIX must offer Navigator grant funds to a community and consumer-focused non-profit group and an entity from at least one of the following categories:

- 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 may include but are not limited to Native American tribes, tribal organizations, urban Indian organizations, and State or local human service agencies.

To ensure consumers are properly protected, the HIX must ensure all private or public entities selected as a navigator are qualified, and licensed if appropriate, to engage in the navigator activities.

Navigators must not be:

- A health insurance issuer;
- A subsidiary of a health insurance issuer;
- An association that includes members of , or lobbies on behalf of, the insurance industry; or
- An entity or individual that receives any consideration directly or indirectly from any health insurance issuer in connection with the enrollment of any individuals or employees in a QHP or a non QHP.

Finally, Navigator grants cannot be funded by Federal Exchange establishment funds.

Recommendations per Minnesota Health Insurance Exchange Advisory Task Force ^{1,2}

The MN HIX Advisory Task Force adopted several recommendations on January 18, 2012 to help guide the development of a Minnesota-made Health Insurance Exchange. The following guiding principles will inform the design and development of the Minnesota Consumer Assistance / Navigator Program:

- 1) **Roles:** The Navigator program should support the creation of different Navigator roles, with appropriate responsibilities, designed to address the specific needs of the particular populations served by the HIX. The Navigator program should be structured to support different Navigator roles designed to address the specific needs of diverse populations, in particular those experiencing the highest levels of uninsurance and the worst health disparities. This set of roles includes the role played by Agents and/or Brokers.
- 2) **Training and Certification:** The Navigator program should develop certification and training requirements that align with the defined Navigator roles and levels of service provided. This process should support sufficient Navigator capacity and allow for different entities to serve in any of the Navigator roles, based on ability to meet the established requirements.
- 3) **Infrastructure:** The Navigator program should leverage existing infrastructure and current relationships while also seeking to fill significant “gaps” in the current system.
- 4) **Services:** Because of their existing relationships with populations that experience health disparities, Navigator services should include those available in community-based organizations such as, but not limited to, neighborhood and ethnic organizations, faith-based organizations, community health clinics, community mental health care centers, Indian health care centers, consumer advocacy groups, and culturally-specific human service providers.
- 5) **Customer Service Integration:** The Navigator program should ensure that consumers are seamlessly transitioned between different Navigator roles, if needed, to prevent gaps in service delivery. The HIX will serve a diverse group of consumers in different eligibility groups and insurance markets such as Medicaid, the individual market (with and without premium tax credits), and the small group market. Some individuals may shift eligibility between Medicaid, the individual market (with or without premium tax credits), and the small group market. Navigators should provide services that support individuals whose circumstances and eligibility may change over time. Due to the unique needs of consumers, employers, and communities using the HIX, the Navigator program should utilize Navigators with the expertise to meet the needs of each group and ensure a seamless experience to ensure no one falls through the cracks.

¹ 2.6 ExchTaskForceHealthRec_Jan_2012.pdf

² 2.6 ExhNavBrokerAgentGroupslides.pdf

- 6) **Compensation:** Compensation levels for Navigators should align with the different types of services being offered within each Navigator role and provide flexibility for performance based compensation models.
- 7) **Funding/Compensation:** Funding decisions for the Navigator program should be made in a timely manner to allow for an evaluation of the amount of resources available and the appropriate allocation of those funds to meet program priorities.
- 8) **Levels of Service:** The Navigator program should be consumer focused and determine program priorities based on the needs of consumers, including those who are most likely to face barriers to successful enrollment.
- 9) **Conflict of Interest:** The Navigator program must be developed to ensure that Navigators do not directly or indirectly benefit from enrolling individuals or small employers in one insurer over another.
- 10) **Levels of Service:** Outreach is a critical function of Navigators, and development of a Navigator program should be undertaken in close concert with planning for outreach and marketing.

Minnesota Consumer Assistance / Navigator Program Design

Because final policy decisions for Minnesota’s HIX will not be made until early in the 2013 legislative session, the Navigator, Agent, and Broker Work Group has focused on developing options and general recommendations. The following section supports this approach by not assuming a single structure for providing consumer assistance. As required, Minnesota’s HIX will create a federally approved Navigator program and also recognizes the critical role agents and brokers will play in the HIX assisting individuals and small businesses. In addition, Minnesota is considering options through the In-Person Assister Program. As such, we don’t focus solely on the Navigator Program requirements, but use the term “Consumer Assistance” to address more broadly the navigators, agents/brokers and in-person assister roles. This terminology allows Minnesota and the Navigator, Agent, and Broker Work Group to speak to broader recommendations for consumer assistance in Minnesota.

Duties of the Consumer Assistance / Navigator Program^{3,4}

Consumer assistance will require outreach, education, application and enrollment assistance and plan selection guidance for a broad spectrum of populations in Minnesota including the uninsured and underinsured. In addition to a Navigator Program, federal guidelines permit other assisters to operate within the HIX – including Agents and Brokers and “In-Person Assisters”.

The following recommended levels of service areas identify the core consumer needs and may be adjusted pending legislative action in 2013 or to meet any identified gaps in consumer assistance moving forward.

³ 2.6 Navigator_Agent_Brokers_8_28_2012_Final.doc

⁴ NAB_LOS_and_Training_Final_10232012.doc

1. **OUTREACH, INREACH, EDUCATION and ASSESSMENT**

The public education responsibilities of Minnesota's State Consumer Assistance / Navigator Program include:

- Conduct outreach to consumers typically in group settings, focusing on broad topics related to health insurance and coverage options.
- Educate public, particularly the uninsured, on the benefits of health insurance and what health insurance provides for the individual.
- Inform consumers of health insurance options (Inreach) and advise consumers regarding the value of coverage, in addition to explaining insurance options available through the HIX.
- Define health insurance terms by aiding consumers in understanding the difference between a premium, deductible and co-insurance.
- Explain the HIX and its governance structure.
- Provide materials and explanations about Essential Health Benefits.
- Inform consumers of the expanded and changed coverage as a result of the ACA, including: premium tax credits, insurance rescission rules, lifetime limit changes, preventive screening changes, pre-existing exclusion, etc.

The individual / family guidance responsibilities of the State's Consumer Assistance / Navigator Program include:

- Inform individuals of application processes, required documentation, mandated requirements and any exemption criteria.
- Explain program eligibility rules for advance premium tax credits, cost-sharing reductions, Medicaid, or CHIP.
- Inform consumers of specific benefits available to American Indians.
- Address questions regarding access to any of the enrollment methods and the submission of enrollment documentation to the HIX; explain the enrollment criteria for purchasing insurance through the HIX, from public programs to QHPs.
- Describe the methods of purchase and the different means available to purchase and enroll in a QHP: HIX web portal, HIX call-in center, walk-in centers, participating small employers, kiosks located in community service centers, and state agencies, mail in applications and fax applications.
- Provide the consumer with documentation regarding the available plans, enrollment letters stating the date coverage will start, etc.
- Provide information and referrals to small employers on enrollment in the Small Business Health Options Program (SHOP) and any tax provisions, including credits and penalties, potentially affecting small employer.

The assessment responsibilities of the State’s Consumer Assistance / Navigator Program include:

- Administer tools to assess needs for all individuals, including all persons who reside in a household and identify possible eligibility for various HIX insurance options.
- Gauge eligibility for the HIX and provide referrals to appropriate support services/ programs for further assistance (i.e. free health clinics, Tribal organizations, Agents and/or Brokers, etc.).
- Provide non-medical referrals to the appropriate State agency or agencies;
- Gather information and data for verification and statistical reporting.

The responsibility of the Consumer Assistance / Navigator Program to support access to the HIX include:

- Distribute fair and impartial information concerning enrollment in QHP’s, the availability of premium tax credits and cost-sharing reductions in accordance with federal tax laws, and enrollment in public programs.
- Provide culturally and linguistically appropriate health insurance education.
- Aid the consumer to find avenues to resolve disputes, such as directing them to the Division of Commerce, a public program Ombudsman, or to the HIX.
- Provide access to locations or mobile computing centers with the ability to print and mail hard copies of enrollment documents to the HIX processing center.

2. APPLICATION ASSISTANCE / FACILITATE ENROLLMENT

- Provide application assistance for Medicaid, CHIP, premium tax credits, cost-sharing reductions.
- Assist with completion of enrollment form (application and verification) and possibly collect initial premium payment.
- Enter, assist with the entry, or oversee the entry of information into enrollment tools and resources, including final submission of information. (“Enrolling” is intended to focus activity on the physical mechanics of enrolling individuals, including properly utilizing the appropriate tools, resources and data to perform this function).
- Advise individuals, families, and small employers enrolled through the HIX on the impact of changes in household income on the amount of any affordability assistance program.
- Advise American Indians on benefits such as cost sharing reductions, income exclusions, special open enrollment periods, and exemption from minimum health care coverage mandate.
- Address questions regarding the submission of enrollment documentation to the HIX (documentation necessary for verification – i.e. pregnancy, income, etc.).
- Facilitate collection of individual information required to determine eligibility for a Qualified Health Plan subsidies or Medicaid/CHIP.

- Facilitate referrals to Agents and/or Brokers for individuals/families enrolling in Qualified Health Plans through the HIX and requesting additional plan enrollment assistance.
- Facilitate referrals to Agents and/or Brokers for small employers requesting additional assistance in the SHOP.
- Facilitate referrals to community organizations, counties, or other appropriate non-profit or public entities when individuals and families require technical expertise and assistance beyond the scope of the HIX Navigator, Agent and/or Broker, and In-Person Assister program.
- Address questions regarding post enrollment and renewal activities, including following up at prescribed intervals to ensure successful enrollment, determine utilization status, identify barriers and assist with dispute resolution.
- Assist individuals and families insured through the HIX with the renewal of their coverage, or updating eligibility information.
- Understand the basics of the HIX's web portal, Advanced Premium Tax Credits, structure of the Small Business Health Options Program (SHOP) HIX, Medicaid enrollment and where to direct individuals who require social services from programs such as Supplemental Nutrition Assistance Program (SNAP; formerly food stamps) and Temporary Assistance for Needy Families (TANF).

3. PLAN SELECTION SUPPORT

- Provide awareness of and assistance with utilization of decision tools available within the HIX.
- Dispense QHP information (including buyers' guides, coverage selection forms, and other similar forms) regarding specific plan details including benefit and cost sharing variations, i.e. plan deductibles, co-insurance, copays and out-of-pocket maximums.
- Assist consumers in gathering required documentation.
- Explain, discuss, and interpret coverage and policies with consumer to facilitate plan selection. Assist with plan comparison based upon individual priorities, including but not limited to Metal Tier levels, quality ranges, providers, (i.e. specialty care, pharmaceutical, dental and eye care, etc.) and total cost estimation including utilization and health status.
- Facilitate initial premium payments on behalf of the HIX.

Consumer Assistance / Navigator Program - Training and Certification Requirements⁵

The Navigator, Agent, and Broker Work Group recommends organizations and individuals providing consumer assistance for Minnesota's HIX complete specific levels of training to be certified to operate within the HIX. Under the final federal Exchange regulations, states are required to create training standards for Navigators that cover, at a minimum, the following topics:

⁵ 2.6 NAB_LOS_and_Training_Final_10232012.doc

Minnesota Health Insurance Exchange Blueprint Application Documentation

- Needs of underserved and vulnerable populations;
- Eligibility and enrollment rules and procedures;
- Range of QHP options and insurance affordability programs;
- Exchange privacy and security standards; and
- Proper handling of tax and other personal data.

The following recommended training requirements apply broadly to HIX consumer assistance, with an understanding that some content areas may only be required for specific types of assisters, as appropriate. This is not a recommendation that all HIX consumer assistance organizations receive all recommended training, yet the goal is to ensure that each type of consumer assistance entity receive applicable training to appropriately serve HIX consumers. This document does not account for the depth of each content area required for different types of consumer assistance.

Note: HHS model training standards have not yet been issued to states. Therefore, these recommendations will remain flexible to account for anticipated training regulations from HHS. In addition, HHS has not yet released their “conflict of interest” standards which will directly impact Content Area 8 (conflict of interest) content. The following recommended training requirements may be adjusted pending legislative action in 2013 or to meet any identified gaps moving forward.

Assister Training Program Outline

| Content Area | Module / Activity | Duration |
|--------------|--|----------|
| 1 | Affordable Care Act [^] | TBD |
| 2 | Minnesota Health Insurance Exchange 101 [^] | TBD |
| 3 | Needs of underserved and vulnerable populations* [^] | TBD |
| 4 | Cultural and linguistically appropriate approaches and materials [^] | TBD |
| 5 | Qualified Health Plans and Insurance Affordability Programs* [^] | TBD |
| 6 | Eligibility and Enrollment Rules and Procedures* [^] | TBD |
| 7 | Means of appeal and dispute resolution | TBD |
| 8 | Conflict of Interest* [^] | TBD |
| 9 | Exchange Privacy and Security Policies and Requirements / Standards* [^] | TBD |
| 10 | Consumer Assistance Support | TBD |
| 11 | Coverage Renewal | TBD |
| 12 | Proficiency/Competency Assessment or “Minimum Standards” / Continuing Education / Re-certification | TBD |
| 13 | Outreach and Education | TBD |
| 14 | Small Business Health Options Program (SHOP) Specific | TBD |
| 15 | Licensure Requirements | TBD |

*Required Navigator Training Standards per ACA (§155.210 (b) (2))

[^]Recommended “Core Curriculum” components.

Training Contingencies⁶

The Navigator, Agent and Broker Work Group continues to study, evaluate and develop options regarding training models, certification, re-certification, continuing education approaches, duration of training content areas, training modality, and specific requirements based on consumer assistance roles. According to initial environmental scans, other States' training programs are recommending 16 to 24 hours of initial required training. At this time, the work group has not come to consensus on recommended durations of training. Duration of each content area is dependent upon the finalized curriculum and content. Ultimately, the goal is to ensure a quality and highly efficient and effective consumer assistance training program. The work group also recognized that some of the individual content areas could be merged based on future analysis.

The following topic areas are not specifically addressed in this document, but will be addressed within the scope of the operational development and implementation of HIX Consumer Assistance / Navigator Program following policy decisions early in the 2013 legislative session:

- Leveraging existing consumer assistance infrastructure in Minnesota – both training capacity and current competencies/capacity. There is potential for some consumer assistance entities to be “grandfathered” into the HIX Consumer Assistance / Navigator Program
- Budget, financing, and compensation structures
- Differentiating between ‘core’ content areas and content area geared toward specific roles or services provided by a broader HIX Consumer Assistance / Navigator Program, including potential opportunities to merge identified content areas into specific curriculum
- Differentiating between initial and on-going training needs
- Frequency: Initial and on-going (relative to certification), re-training due to poor performance, annual re-training requirements, etc.
- Modality and supporting materials
- Duration of content areas
- Proficiency/Competency assessment or “Minimum Standards”
- Program/Procedure Update Training, Continuing Education, and Performance Measurement
- Regulation: Will certain consumer assistance organizations require certification and/or training by Department of Commerce (e.g. licensure) and/or Department of Human Services (e.g. MAGI Medicaid Eligibility Requirements) in partnership with the HIX?
- Training needs for HIX support and technical assistance for HIX Assisters

Consumer Assistance / Navigator Program Roles and Responsibilities⁷

A single entity/individual cannot provide the full scope of HIX consumer assistance. To address this, the process to define who can be an assister must be flexible enough to allow new types of assisters to develop as needed. Based upon current federal regulations regarding the qualifications and duties of Navigators, as well as the populations they will serve, further consideration is needed to determine if the Minnesota Consumer Assistance / Navigator Program should propose creating separate and distinct

⁶ 2.6 NAB_LOS_and_Training_Final_10232012.doc

⁷ 2.6 NAB_LOS_and_Training_Final_10232012.doc

roles in order to ensure access to the right resources, at the right time, to meet consumers' unique needs.

As the Navigator, Agent and Broker Work Group continues to refine training recommendations, specific roles and resources within the HIX have begun to emerge. The work group has begun to discuss what these roles may be and to some extent, what level of training may be required as potential compensation models are being developed and reviewed. The work group intends to provide recommendations regarding compensation as well as potential roles within the Consumer Assistance / Navigator Program to the MN HIX Advisory Task Force in December 2012.

Minnesota is evaluating multiple options for consumer assistance roles within the HIX as we seek to serve Minnesotans via as many channels as possible. Agents and brokers provide valuable education and enrollment services to individuals and small employers. In Minnesota, it will be imperative to develop a mechanism to ensure coordination between agents/brokers and other assisters. In supporting the "no wrong door" policy when engaging individuals, all assisters need to be equipped to ensure consumers have access to the right resources, at the right time, to help meet their unique needs. A system which facilitates a streamlined and secure exchange of information amongst all types of certified consumer assisters, and provides the right incentives for active participation will be critical. As above, these roles and responsibilities will be ascertained and presented as recommendations to the MN HIX Advisory Task Force in December 2012.

Consumer Assistance / Navigator Program Compensation⁸

Per Minnesota's recommendation and decision making processes, compensation has not been directly addressed by the Navigator, Agent and Broker Work Group. Along with roles, a recommendation will be made on compensation to the Minnesota Health Insurance Task Force in December 2012. Minnesota is considering many compensation options, and is evaluating other approaches being developed in other states.

Consumer Assistance / Navigator Program - Conflict of Interest Standards / Privacy and Security Standards

Assisters cannot have conflicts of interest, financial or otherwise, and will need to comply with the HIX's privacy and security standards. Specifically, assisters must not directly or indirectly benefit from enrolling individual or small employer in one plan over another, e.g. cannot receive any consideration, financial or otherwise, from carriers.

Minnesota is awaiting HHS guidance on conflicts of interest. The HIX will develop a set of conflict of interest standards that adhere to 45 CFR §155.210(b)(1), §155.220 (e) and ensure the appropriate integrity of all Assisters. In addition, the MN HIX will ensure compliance with the regulations stipulated in MN State Statute 62J.71, Subdivision 1, section (2) and Minnesota Rule 1230.0750 (1) a - c.

⁸ 2.6 NAB_LOS_and_Training_Final_10232012.doc

Minnesota will ensure all entities or individuals that serve within the Consumer Assistance / Navigator Program comply to robust privacy and security written policies and procedures and technical safeguards for the HIX that meets state and federal requirements. The Blueprint Certification Application (Section 10.0 Privacy and Security)⁹ iterates the work plan for further developing these policies and procedures in relation to the Consumer Assistance / Navigator Program.

With respect to all organizations and individuals that operate within the Consumer Assistance / Navigator Program, the MN HIX recognizes that conflicts of interest arise when an individual has a private or personal interest sufficient to influence, or appear to influence, the objective exercise of his or her official duties. As such, the HIX is in the process of crafting conflict of interest standards that may address areas such as:

- Financial considerations;
- Non-financial considerations;
- The impact of a family member's employment or activities with other potentially conflicted entities;
- Disclosures regarding existing financial and non-financial relationships of Navigator-sponsoring organizations;
- Navigator disclosures regarding existing financial and non-financial relationships with other entities;
- HIX monitoring of Navigator-based enrollment patterns;

Note: HHS has not yet released their "conflict of interest" standards which will directly impact Training Module 8 (conflict of interest) content.

Consumer Assistance / Navigator Program Performance Metrics

Performance metrics for those organizations and individuals serving within the MN HIX will be specific and measurable, reflect Minnesota's goals for the Consumer Assistance / Navigator Program, and provide incentives to ensure the Consumer Assistance / Navigator Program's (and the HIX's) success. Assisters will be charged with conducting outreach and education as well as providing eligibility and enrollment assistance and plan selection advice. The metrics will reflect all these activities and will correspond to defined roles.

Minnesota is considering performance measures as an aspect of the Assister compensation solution as recommended by the Exchange Advisory Task Force.

In establishing metrics for Minnesota's HIX assisters the focus will be on a manageable number of performance measures. The Navigator, Agent, and Broker Work Group may consider the following performance measures across a range of potential Assisters, including: application assistance, enrollment, renewal, customer service and quality, outreach activities, reconciliation, complaints, compliance, reaching the uninsured and those experiencing the worse coverage disparities, and encouraging enrollment in high value (high quality/low cost) plans.

⁹ 10.0 Privacy and Security-cover page.doc

SHOP Specific Considerations

Minnesota is planning to provide a robust experience for Minnesota’s small business employers and employees. Agents and Brokers will have a role to play in the consumer assistance aspect of this book of business. The Small Business Health Options Program (SHOP) will be a value added channel for licensed agents and brokers to utilize in serving their clients.

Technical Infrastructure Contract

As Minnesota continues to further develop and test functionality of the HIX, the Minnesota HIX will leverage the IT Master Contract to assist with evaluating, analyzing and bringing the business and operational functionality of the Consumer Assistance / Navigator Program to a level of operational readiness. This will include leveraging and integrating existing certification mechanisms to the extent possible for entities and organizations.

Specific to the Consumer Assistance / Navigator Program, the areas within the IT Contract referenced for this area are:

Exhibit A – Business Functional Requirements¹⁰

| | |
|---|---|
| <p><i>Page 4, Section III, a, 4</i> <i>Page 5, Section III,b,2,B</i> <i>Page 5, Section III,c,2,E,(ii)</i> <i>Page 6, Section III,c,2,H,(ii)</i> <i>Page 6, Section III,c,A</i> <i>Page 7, Section III,d,6(B)</i> <i>Page 8, Section III,d,14</i> <i>Page 10, Section III,e,4</i> <i>Page 13, Section III,f,1-2</i> <i>Page 14, Section III,f,3(E)</i> <i>Page 14, Section III,f,6,8-13</i></p> <p><i>Page 15, Section IV, a,2(B)</i> <i>Page 16, Section IV,b,5</i></p> <p><i>Page 18, Section V,b,9 (A)</i> <i>Page 18, Section V,b,10 (A)</i> <i>Page 20, Section V,c,9</i> <i>Page 21, Section V,10 (G)</i></p> | <p><i>Page 21-26, Section VI, a-d</i></p> <p><i>Page 32, Section VIII,b,F</i> <i>Page 33, Section VIII,c,G</i> <i>Page 33, Section VIII,c,2</i> <i>Page 34, Section VIII,d 1 – 8</i> <i>Page 35, Section VIII,e,3</i></p> <p><i>Page 36, Section IX, b,1(B)</i> <i>Page 37, Section IX, b,4</i> <i>Page 37, Section IX, c,2 and 4</i> <i>Page 38, Section f,4</i></p> |
|---|---|

In addition, a Solution Development process has been developed with the vendor and the State of Minnesota as a process in defining requirements, design and development of the Exchange.

The Solution Development Process diagram identifies all the processes or tasks that occur in each development sprint cycle.¹¹ In general, each process corresponds to a single task in each development

¹⁰ ExchContractIT-MaximusA.pdf

¹¹ Solution Planning Document v2.0, Section 1.3

sprint defined in the Project Schedule. There are currently six development sprints defined in the Project Schedule, so each of these tasks will occur six times. Each process in the diagram is numbered and then explained in the Solution Development Process Definitions Table. The description describes the work accomplished in each task, the team or roles responsible for completing the task, and the inputs and outputs of the task.

In preparation for these sprints, Minnesota engaged in extensive efforts with the vendor and sub-vendors to document a full high-level exchange process map identifying integration points in addition to more detailed functionality sets. See submitted process models as additional reference for Eligibility and Enrollment functions and those of the entities and/or individuals serving within the Consumer Assistance / Navigator Program.

The Project Schedule details the iterative development sprint cycle and related analysis, testing and implementation activities supporting the implementation of the Exchange, including components for the Consumer Assistance / Navigator program.¹²

Technical Requirements related to the Consumer Assistance / Navigator Program and associated accountabilities are identified in Exhibit B of the IT Contract (Exhibit B – Technical Requirements), Areas within this Exhibit referenced for this area are:

Exhibit B – Technical Requirements and Module Definition and Scope¹³

Page 8, Section II, f, 2
Page 16, Section II, k, 10

The MN HIX will ensure all data sharing agreements meet state and federal requirements and link / connect to the IT Vendor tool solution as outlined in Exhibit D of the IT Contract.¹⁴

Operational Integration

The Consumer Assistance / Navigator Program will ensure that consumers are seamlessly transitioned between different assister roles, if needed, to prevent gaps in service delivery. The HIX will serve a diverse group of consumers in different eligibility groups and insurance markets including uninsured, MAGI Medicaid/CHIP, the individual market (with and without subsidies), and the small group market. Minnesota anticipates many individuals and families shifting eligibility between MAGI-Medicaid and the individual market with premium tax credits. Assisters will need to provide services that support individuals and families who transition between eligibility categories. Due to the unique needs of consumers, employers, and communities using the HIX, the Consumer Assistance / Navigator Program will need to utilize Assisters that can ensure a seamless experience to ensure no one falls through the cracks. As the MIN HIX continues to develop operational functionality and further define business

¹² MNHIX-ProjectScheduleBaselineV1.1.pdf

¹³ ExchContractIT-MaximusB.pdf

¹⁴ ExchContractIT-MaximusD.pdf

processes, the Consumer Assistance / Navigator Program will work closely with the Call Center / Customer Service solution as it is being developed to identify how and when transitions may occur between entities and/or individuals serving as assisters to ensure “no wrong door” key guidance is supported.

As outlined in section 2.4 of the Blueprint Certification Application, Minnesota is considering its options for an HIX call center. The call center solution will be a primary point of entry for consumers, in addition to the HIX website. As such, Minnesota’s Consumer Assistance / Navigator Program must be operationally integrated with this aspect of the HIX. Likewise, all marketing efforts will be closely aligned to HIX Consumer Assistance / Navigator Program efforts.

Funding

Funding for consumer assistance in Minnesota may come from a variety of sources. MN HIX continues to explore funding options for the various consumer assistance roles under consideration. For the Navigator Program, Minnesota continues to research revenue options beyond operational revenues. For an In-Person Assister program, MN HIX will be utilizing federal grant funds in first year of operations of 2014. For agents or brokers functioning in MN HIX, the state is evaluating various options including utilizing the option provided in 155.220 for direct payment from carriers, to a model which provides payment from the HIX, or a combination of the two. At this time no specific options have been recommended by the Navigator, Agent, and Broker Work Group on any option. Also, as with other open policy issues, MN HIX awaits action early in the 2013 legislative session on this topic. For additional information on HIX funding topics refer to section 8.0 of Minnesota’s Blueprint Application.

Milestones / Next Steps¹⁵

| Milestone | Status |
|---|-------------|
| ▪ Create Navigator, Agent/Broker Work Group | Complete |
| ▪ Conduct Navigator, Agent/Broker Work Group Meetings | Ongoing |
| ▪ Provide Levels of Service Recommendation to Task Force | Complete |
| ▪ Provide Training, Certification and Licensure Requirements Recommendation to Task Force | Complete |
| ▪ Provide Compensation and Funding Recommendation to Task Force | In progress |
| ▪ Define specific roles for levels of service | In progress |
| ▪ Identify appropriate policy options to control Conflict of Interest and ensure the Minnesota Consumer Assistance / Navigator Program complies with privacy and security standards and recommend to the Task Force | In progress |
| ▪ Identify potential organizations in Minnesota who could qualify as Assistors to help further inform and define potential Consumer Assistance / Navigator Program Workforce | In progress |

¹⁵ MNHIX ProgramNAB_workplan_11012012.pdf

| Milestone | Status |
|--|-------------|
| ▪ Develop draft Consumer Assistance / Navigator Program Standards and Design – identifying those open areas with options | In progress |
| ▪ Participate in Sprints – integrate vendor solution with business case studies | TBD |
| ▪ IT Contract: Integration Testing | TBD |
| ▪ IT Contract: UAT Testing | TBD |
| ▪ Finalize Consumer Assistance / Navigator Program Policies and Procedures | TBD |
| ▪ Market Consumer Assistance / Navigator Program | TBD |
| ▪ Complete Training Program | TBD |
| ▪ Recruit Navigators, Agents/Brokers and In-person Assisters | TBD |
| ▪ Advertise and Schedule Training | TBD |
| ▪ Train Assisters / Navigators | TBD |
| ▪ Establish business relationships/contracts with Assisters | TBD |

Open Policies

Minnesota has identified options around several policy issues, but no final decision has been made at this time. We will continue to evaluate and document possible approaches which can be utilized upon final policy decisions being determined early in the 2013 legislative session. While recommendations have been made on several of the following policy issue (see attached documentation), no final decision has been made.

- Levels of service
- Training, Certification and Licensure requirements associated with specific levels of service and roles.
- Consumer Assistance / Navigator / Agent broker Program Funding.
- Compensation methods and amounts for organizations and/or individuals within the Consumer Assistance / Navigator Program, including navigators, in-person assisters and agents / brokers.
- Role and duties of Navigators, In-person assisters and agents / brokers within the MN HIX.
- Strategy for agents / brokers in regard to Small Business Health Options Program and Individual Market.
- Full end to end operational design of the Consumer Assistance / Navigator Program.
- Conflict of Interest standards.
- Detailed timeline for operationalizing a functional MN HIX and Consumer Assistance / Navigator Program.

Next Steps / Stakeholder Involvement

Minnesota HIX staff members are reviewing, analyzing and documenting possible options to be considered. This includes performing an ongoing review of other solutions identified on the national

landscape. We will continue to work with our stakeholder work groups to present options and review possible benefits and risks to specific approaches.

Minnesota is approaching the development of our Consumer Assistance / Navigator program in light of the timelines for the HIX. We will identify the necessary functions and capacity to support the needs of our consumers at initial launch, but in conjunction be focusing on the next immediate stage to continue to enhance our customer support through Navigators, agents and brokers and In-person assisters.

We recognize that the recommendations to date are not operational decisions and are contingent upon future policy and governance structures. However, once final policy decisions have been made, these options will allow us to quickly progress and operationalize a robust consumer assistance network for Minnesota's HIX. Our focus is on operationalizing a program within six months following policy decisions early in the 2013 legislative session and continually improving/enhancing support for consumers.