TO: MNsure Board of Directors
FROM: MNsure Consumer and Small Employer Advisory Committee
DATE: April XX, 2014
RE: Comments and Recommendations to the MNsure Navigator and Consumer Assistor Program

SITUATION: MNsure Navigator and Consumer Assistor Program is a critical and successful piece of MNsure’s implementation. However, system designs, processes/ procedures, no representation and lack of support resources hinders the program’s ability to serve clients to its full potential.

BACKGROUND:

According to 2013 Minnesota Statutes 62V.05, Subd. 4 The navigator program is intended to “…ensure that all entities and individuals carrying out navigator and in-person assister functions have training in the needs of underserved and vulnerable populations; eligibility and enrollment rules and procedures; the range of available public health care programs and qualified health plan options offered through MNsure; and privacy and security standards.”

Navigators are critical to ensuring new, low-income and underserved communities facing the greatest health disparities have access to MNsure and health insurance coverage that best fits them. Navigators have taken on this work with commitment and dedication. They have also seen their roles and duties expand well beyond the work originally described to them and agreed to. Expanded duties include, income and tax calculation, case management/ follow up, immigration status interpretation, liaising with MNsure and counties, IT trouble-shooting, etc. In kind, navigators have accepted these new duties to better serve their clients, but they have not seen training or support follow suit and expand to include these added duties.

In addition to the added duties to carry out the work, navigators are the first, and sometimes only point of contact, many communities have with MNsure. In essence, they have become the face of MNsure to the thousands of individuals they bring information to in outreach and assist with enrollment.

In these many roles, navigators contributed greatly to the successes of MNsure’s roll out and first Open Enrollment.

ASSESSMENT: Understanding MNsure’s implementation is a growing and dynamic process, we have concerns with the following:

- the current design of the Navigator and Consumer Assister program, (level of training and support resources)
- how this program may interact with other parts of the MNsure and health insurance system, by design (system access, processes, partnerships, data)
- lack of representation of navigators in decisions and policy changes (navigator representation)
- communication modes and timeliness (communication)
RECOMMENDATIONS: (in bold)

Current design of the Navigator and Consumer Assister program
(training, certification and support resources)

- Enhance training on navigating the web application portal of MNsure
- Create a MNsure “playground” – provide users the ability to explore web application prior to creating an account

- Add technical assistance support to the Navigator Program, including the following areas:
  - tax and income calculation
  - immigration status impact on enrollment
  - Special populations
    - Native Americans
    - Disability
    - Homeless
    - Mixed-status families
  - Information Technology assistance

- Create a MNsure work plan and timeline for supporting/strengthening the Navigator system, with input and feedback from navigator organizations, including the following program areas:
  - Facilitate improvements in the program PRIOR to the open enrollment period. Make sure glitches aren’t being worked out during open enrollment again and should include:
    - How/when are outreach contracts being renewed and/or awarded
    - How/when is the certification system getting overhauled in plenty of time for navigators to be certified before Open Enrollment
    - Establish a process for assessing success of outreach into different populations – e.g. REL groups or by geographic region
      - address deficiencies in navigator availability in underserved areas
      - Establish a budget process enables navigator groups to be geared up by October 2014 to be doing outreach, making appointments, etc.
  - Outreach and Education support/ resources – events sponsoring, evaluating paid interpreter services, limited English documents

- Establish a process for assessing success of outreach into different populations – e.g. REL groups or by geographic region

Program interaction with other parts of the (health care) system, by design
(system access, processes, partnerships, data)

- Develop a data access system – process for collecting, organizing and disseminating enrollment data
- Develop a process/system by which external partners can access data from MNsure system
  - Track case statuses (Navigator portal)
  - Disaggregated demographic data on enrollment
• System access

• Processes

• Partnerships (counties/ MNsure/ navigators/ brokers)
  
  o Broker-navigator relationship –
    ▪ Include navigator training in MA and MinnesotaCare for broker/ agent certification for MNsure
    ▪ Compensate MNsure brokers/ agents for helping individuals enrolling in MA, MNCare and non-appointed insurance products at the same levels as navigators (This is both a customer service and compensation issue)
    ▪ Support partnerships between navigator and broker communities
      • Convene brokers/ agents and navigators working in the same or connected communities
  
  o Develop a standard system for processing MNsure applications across all counties
    ▪ (ideal, but less feasible)
  
  o Charge each county with establishing an outline of their process for processing MNsure applications
    ▪ Information needed for verification
    ▪ Mode of delivery for verification information
    ▪ Interacting with Navigators (key contact person, contact numbers, etc.).
    ▪ Disseminate the document for each county to Navigators
  
  o Host a ‘meet-n-greet’ (convening) for counties and navigators/ assistor partners
    ▪ work with MNsure Director of Navigator Relations
    ▪ make introductions,
    ▪ meet face-to-face,
    ▪ hear about each other’s protocols, concerns, needs
    ▪ exchange contact information
    ▪ problem solve issues together

Lack of representation of navigators in decisions and policy changes (navigator representation)

• Establish a Navigator Advisory Group to MNsure Board of Directors/ MNsure staff
  
  o Work closely with MNsure Director of Navigator Relations and other key staff on policy and operational changes to improved efficacy of MNsure system
  
  o Establish a process for feedback loop from navigators in the field

• Grant MNsure Director of Navigator Relations authority to influence other departments of MNsure impacting the Navigator Program

Communication modes and timeliness (communication)

• Release literature and grant access two months prior to 2015 Open Enrollment (November 15, 2014)
• Offer more flexibility for navigators/partners to use MNsure brand and documents in outreach activities
• Utilized alternative modes of communication and information dissemination
  o Updated posts visible on the MNsure home page
  o Community dialogues (Regional Navigator Calls)
  o Regional Town Hall meetings