Covered California

Assisters Program: In-Person Assistance and Navigator Webinar

Date: Thursday, February 7, 2013

Time: 1:30-3:30 PM



Agenda

- 1. California Health Benefit Exchange's Vision, Mission and Values
- 2. Covered California's Target Populations
- 3. Introduction to Assisters Program
- 4. Community Outreach Networks
- 5. Assisters Program Overview
- 6. Projected Assisters Network Capacity
- 7. Partnerships With Retail Stores & Roles As Assisters
- 8. Assisters Recruitment Strategies
- 9. Training, Monitoring and Oversight
- 10. Proposed Timeline
- 11. New Proposed Federal Regulations
- 12. Stakeholder Feedback Requested



California Health Benefit Exchange Vision, Mission and Values

The vision of the California Health Benefit Exchange is to improve the health of all Californians by assuring their access to affordable, high quality care.

The mission of the California Health Benefit Exchange is to increase the number of insured Californians, improve health care quality, lower costs, and reduce health disparities through an innovative, competitive marketplace that empowers consumers to choose the health plan and providers that give them the best value.

The California Health Benefit Exchange is guided by the following values:

- Consumer-focused: At the center of the Exchange's efforts are the people it serves, including patients and their families, and small business owners and their employees. The Exchange will offer a consumer-friendly experience that is accessible to all Californians, recognizing the diverse cultural, language, economic, educational and health status needs of those we serve.
- Affordability: The Exchange will provide affordable health insurance while assuring quality and access.
- Catalyst: The Exchange will be a catalyst for change in California's health care system, using its market role to stimulate new strategies for providing high-quality, affordable health care, promoting prevention and wellness, and reducing health disparities.
- Integrity: The Exchange will earn the public's trust through its commitment to accountability, responsiveness, transparency, speed, agility, reliability, and cooperation.
- Partnership: The Exchange welcomes partnerships, and its efforts will be guided by working with consumers, providers, health plans, employers and other purchasers, government partners, and other stakeholders.
- Results: The impact of the Exchange will be measured by its contributions to expanding coverage and access, improving health care quality, promoting better health and health equity, and lowering costs for all Californians.



California's Subsidy Eligible Population is Spread Throughout the State

California's expanse, diverse geography and mix of rural and urban areas are unique and present outreach challenges.





Source: CalSIM model, Version 1.8

Covered California Target Populations

- Covered California's primary target population reflects 5.3 million California residents projected to be uninsured or eligible for tax credit subsidies in 2014:
 - 2.6 million who qualify for subsidies and are eligible for Covered California qualified health plans; and
 - 2.7 million who do not qualify for subsidies, but now benefit from guaranteed coverage and can enroll inside or outside of Covered California.



Who Are CA's Uninsured Population?



"Aim High" and Plan for Uncertainty



Covered California is seeking to enroll as many Californians as possible. Covered California is working to meet and exceed its goals, while at the same time planning for lower enrollment by developing budgets that can be adjusted and constantly adjusting its marketing, outreach and operations as needed based on new information and operations.



information and experience.

Key Components to Success



Successful Outreach & Education

Smooth Enrollment



Introduction to Assisters Program

The Assisters Program will be comprised of trusted and known organizations that are critical resources in order to build a "culture of coverage" to help millions of Californians enroll into affordable health insurance.

The Assisters Program will engage organizations to help consumers learn, navigate, and apply for qualified health plans offered by Covered California.

The Assisters Program will be implemented statewide and will motivate consumers to take steps to enroll into Covered California.

The Assisters Program will provide one-on-one, in-person assistance to help California's diverse population learn about their health insurance options. Assistance will be provided in culturally and linguistic appropriate manners.



Assisters, Outreach, Education, Marketing & Enrollment Guiding Principles

- Promote **maximum enrollment** of individuals into coverage;
- Build on and leverage existing resources, networks and channels to maximize enrollment into health care coverage, including close collaboration with state and local agencies, community organizations, businesses and other stakeholders with common missions and visions;
- Consider where eligible populations live, work, and play. Select tactics and channels that are based on research and evidence of how different populations can best be reached and encouraged to enroll and, once enrolled, retain coverage;
- Marketing and outreach strategies will reflect and target the mix and diversity of those eligible for coverage;



Assisters, Outreach, Education, Marketing & Enrollment Guiding Principles

- Establish a trusted statewide Assisters Program that reflects the cultural and linguistic diversity of the target audiences and results in successful relationship and partnerships;
- Ensure that Assisters are knowledgeable of both subsidized and non-subsidized health coverage and qualified health plans and that Assisters are equipped with the information and expertise needed to successfully enroll individuals into coverage; and
- Continue to learn and adjust strategies and tactics based on input from our national partners, California stakeholders, on-going research, evaluation and measurement of the programs' impact on awareness and enrollment.



Assisters Additional Guiding Priorities

- **Identify incentive options** that encourage different types of Assisters to conduct activities that result in the successful enrollment of the target audiences into health care coverage.
- Establish quality assurance standards and protocols that:
 - Ensure enrollment goals are met
 - Maintain program integrity
 - Prevent conflicts of interest
 - Ensure a high quality consumer experience
 - Promote a positive public perception of Covered California



Community Outreach Networks

The Community Outreach Network will drive consumers to outreach, education and enrollment activities. Assister Entities can also participate in the Community Outreach Network.





Covered California Network

The Assisters Program will align with and complement the Statewide Marketing Plan and the Outreach and Education Grant Program Strategies.





Covered California Network

Organizations may have multiple roles with Covered California:





Assister Enrollment Entities and Individual Assisters:

Types of Assister Enrollment Entities and Assisters:

- In-Person Assistance
- Navigators
- Collectively referred to as "Assisters Program"

What are Assister Enrollment Entities?

- Entities and organizations eligible to be trained and registered to provide inperson assistance to consumers and help them apply for Covered California programs.
- Entities that have access to Covered California's targeted populations.

Who are Individual Assisters?

- Individuals who are employed, trained, certified, and linked to Assister Enrollment Entities to provide in-person assistance to consumers and help them apply for Covered California programs.
- Individuals who provide assistance in culturally and linguistic appropriate manners to consumers.



Similarities between In-Person Assistance Program and Navigator Program: Roles and responsibilities include:

| Roles & Responsibilities: | In-Person Assistance Program | Navigator Program |
|---|------------------------------------|----------------------|
| 1. Conduct public education activities to raise awareness of the availability of Covered California products | _ | Х |
| 2. Distribute fair and impartial information concerning enrollment into qualified health plans | Х | Х |
| Facilitate enrollment into qualified health plan available through Covered California | Х | Х |
| 4. Provide referrals to Consumer Assistance Programs | Х | Х |
| 5. Provide information that are culturally and linguistically appropriate | Х | Х |



Differences between In-Person Assistance Program (IPA) and Navigator Program:

| | In-Person Assistance Program | Navigator Program |
|----------------------------|---|---|
| Funding Source | Level 2 - Initial Application Operating Costs/Self-Sustainability Funds- Renewals | Operating Costs (e.g., self-sustainability funds) |
| Compensation | Fee-for-enrollment program providing application assistance payment for application resulting in successful Covered California initial enrollment or renewal | Grant –based program performance-based block funding based on grantees' Covered California QHP enrollment targets. |
| Payment Method | "Flat Fee Basis" Per Successful Application (\$58) Per Successful Annual Renewal (\$25) | Grant Program |
| Implementation Timeline | Occurs Before Open Enrollment (pre-October 2013) | Occurs After Open Enrollment (December 2013) * |

*Occurs during the later part of 2013 because health plan fees will not be collected until the first quarter of 2014.

Note: An IPA gap analysis will occur to determine what types of entities should be funded for the Navigator Program. Where gaps are identified (e.g., geographic areas and/or targeted market segments), enrollment grants for the Navigator Program will be awarded to entities to minimize gaps in providing enrollment assistance.



Proposed Entities Eligible to be Assister Enrollment Entities:

| Entity Type | Eligible for Compensation (Yes/No) |
|--|---------------------------------------|
| Agents | Νο |
| American Indian Tribe or Tribal Organizations | Yes |
| Attorneys (e.g., family law attorneys who have clients that are experiencing life transitions) | Yes |
| Chambers of Commerce | Yes |
| City Government Agency | Yes |
| Commercial fishing, industry organizations | Yes |
| Community Clinics | Yes |
| Community Colleges and Universities | Yes |
| County Health Department that provide health care services to consumers | Νο |
| County Social Services Offices (employing eligibility workers) | Yes |



| Proposed Entities Eligible to Be Assister Enrollment Entities (continued): | | |
|--|---------------------------------------|--|
| Entity Type: | Eligible for Compensation (Yes/No) | |
| Faith-Based Organizations | Yes | |
| Hospitals | Νο | |
| Indian Health Services Facilities | Yes | |
| Labor Unions | Yes | |
| Non-Profit Community Organizations | Yes | |
| Partnerships with Retail Stores | Yes | |
| Providers | Νο | |
| Ranching and farming organizations | Yes | |
| School Districts | Yes | |
| Tax Preparers | Yes | |
| Trade, industry, and professional organizations | Yes | |



Assisters Program Compensation:

| Scenarios – Continues to be refined and additions made | New Enrollment* (\$58) | Annual Renewal* (\$25) | No Compensation (\$0) |
|--|------------------------------|------------------------------|-----------------------------|
| Initial enrollment into Covered CA - Open Enrollment | Х | | |
| MAGI Medi-Cal eligibility re-determination results in consumer now qualifying for Covered CA | Х | | |
| Annual renewal into Covered CA | | Х | |
| Annual renewal into Covered CA <u>and</u> adding new dependents | | Х | |
| Initial enrollment into Covered CA – Special Enrollment | Х | | |
| Member currently enrolled in Covered CA and adds new dependent during Special Enrollment | Х | | |
| Individual disenrolls from Covered CA and later re- enrolls back into the program | Х | | |
| Case management (e.g., report income changes, changes to APTC amount taken, plan transfers, referrals to Consumer Assistance Programs, etc.) | | | Х |



* Per successful application

Projected Assisters Network Capacity



Projected Assisters Network Capacity

- Targeting enhanced enrollment goals specifically for Covered California eligible populations
- Recruit entities who serve Covered California targeted populations to assist with Covered California enrollment
- 50% of consumers will need assistance
- 2 individuals applying for coverage per application
- Entities will be required to assist individuals enroll in full array of insurance affordability programs although only compensated for Covered California products
- Data below reflects entire Assisters Network (compensated and non-compensated)

| | Projections |
|----------------------|-------------|
| Assister Entities | Over 3,600 |
| Individual Assisters | Over 21,000 |

Note: Assumes an average of 6 individual Assisters per entity.

Assumes a moderate production of 4 applications (on average) per month that result in successful Covered California enrollment.

Factors for this projection included Assisters not meeting enrollment goals, denied applications, employee turnover, etc.



Partnerships With Retail Stores & Roles As Assisters

KEY FACTORS UNDER CONSIDERATION IN ESTABLISHING PARTNERSHIPS

| Targeted Population Reach | How many people does the retail store reach? |
|---------------------------|--|
| Targeted Composition | What percentage of our targeted population shop at the retail store? Does the retail store reflect and target the mix and diversity of those eligible for Covered California? |
| Mission Alignment | Does the retail store share similar core values as Covered California and will we be proud of our partnership with them? |
| Financial Feasibility | What is the financial investment required? Is it cost effective and will it work within our budget? |
| Depth of Partnership | Level of partnership – what does Covered California hope to gain through our partnership? What types of activities will be provided by the partner? |



Partnerships With Retail Stores & Roles As Assisters

PROPOSED ACTIVITIES PROVIDED UNDER THE PARTNERSHIP

- On-site booth at retail store to engage consumers to learn more about Covered California
- Provide outreach and education activities
- Distribute literature and collateral materials about Covered California
- In-person assistance will be provided by the retail store's employees who will be trained and certified by Covered California
- Permit retail stores to co-brand with Covered California, such as retailer's website, through direct mail, in-store window signage, in-store television, radio commercials, flyers, store bags, and receipts
- Consider Covered California / retail partner joint marketing



Assisters Recruitment Strategies

Assisters Recruitment Strategy:

- *Reflect the mix and diversity of Covered California's eligible populations:*
 - Geographic factors (county level)
 - Non-geographic factors:
 - Ethnicity of eligible population
 - Primary language of eligible population (e.g., limited-English proficiency)
 - Income levels of eligible population (e.g., 138% 250% FPL, 250% 400% FPL, and 400%+ FPL)
 - Employment sectors of eligible populations (including college students)
 - Coordination with paid media and community mobilization activities
- Passive Recruitment (preliminary strategies 1st Quarter 2013):
 - Broad outreach to potentially eligible entities:
 - Outreach & Education Grant Application "Assisters Interest Form"
 - Provide link to "Assisters Interest Form" on Exchange's website
 - Webinars soliciting interest from entities
 - Announce recruitment via Covered California ListServe
 - Promote "Assisters Interest Form" in MRMIB's Enrollment Entity Newsletter and Health-e-App e-mail blast – targeting existing Assisters network



Assisters Recruitment Strategies

Assisters Recruitment Strategy:

- Active Recruitment (preliminary strategies 2nd Quarter 2013):
 - Identify gaps based on entities who have expressed interest
 - Deploy Assister Program Specialists to conduct targeted recruitment in each county (calls and in-person recruitment)
 - Work with organizations to reach entities that have access to targeted population
 - Leverage work of Community Outreach Network to identify and recruit interested entities
 - Advertisements in specific newsletters and ads in relevant publications
 - Letters to existing enrollment entities and organizations whose
 mission align with Covered California
 - Presentation at Conferences



Code of Conduct and Ethics Policies

The Assister Enrollment Entity and its affiliated Assisters shall provide fair and impartial information to consumers. Under no circumstances shall an Assister Enrollment Entity or its affiliated Assister conduct the following:

- Direct or steer a consumer toward a specific health plan or provider, or refer to a specific health plan or provider as superior to its competitors;
- Invite or influence an employee or their dependents to separate from affordable employer-based group health coverage, or arrange for this to occur;
- Intentionally provide false, deceptive, misleading or confusing information in an effort to influence a consumer's enrollment decision;
- Accept any consideration directly or indirectly, cash or in-kind, from a health issuer as compensation or inducement for enrolling qualified individuals or employees into qualified or non-qualified health coverage; or for the referral or procurement of customers for a health plan.



Monitoring Requirements

As a representative of Covered California, the Assister Enrollment Entity shall promote Covered California as a trusted resource for affordable health care coverage by establishing an internal system for monitoring program quality and compliance and adhering to Covered California's monitoring and evaluation requirements. The Assister Enrollment Entity's monitoring shall entail, at a minimum, the following:

- A mechanism(s) through which to evaluate the performance of In-Person Assisters responsible for delivering the services contained within this Agreement, including verifying that activities are delivered as planned, evaluating the accuracy of education messages and information, the quality of enrollment applications submitted, and assessing overall compliance with program standards and guidelines;
- Identification and reporting of instances of non-compliance to the Exchange within 30 days and specifying a plan(s) for corrective action;
- Identification and reporting to the Exchange within 30 days concerns related to conflicts of interest, fraud, or violations of program standards;
- Removal of any employee or affiliated In-Person Assister from assignment to Assister services should Covered California deem them no longer eligible to represent the program.

The Assister Enrollment Entity shall maintain compliance with established program standards, the Affordable Care Act and applicable California laws and statutes.



Additional Policies Under Consideration

Background clearance and finger printing for Individual Assisters to ensure consumer protection and disqualify dishonest individuals from being an Assister. (NOTE: May require legislation)

- Option #1 (recommended approach):
 - Conduct background check and fingerprinting for each Individual Assister
 - Cost for background check and fingerprinting estimated to be \$63 per individual (cost estimate still under review)
 - Cost paid by Assister Enrollment Entity
 - Eligible entities will receive \$58 payment for each successful application enrollment into Covered California –
 ongoing payment exceeds initial cost for background check and fingerprinting
 - Covered California provides free Assisters training
- Option #2:

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- Conduct background check and fingerprinting for each Individual Assister
- Cost for background check and fingerprinting estimated to be \$63 per individual (cost estimate still under review)
- Covered California pays for costs in the 1st year
- After year 1, reassess to determine whether or not Covered California continues to pay for background check and fingerprinting. Or, if cost paid by Assister Enrollment Entity
- Covered California provides free Assisters training

Insurance Requirements for Assister Entities:

- General Liability
- Negligence
- Unintentional errors and omissions



Training Overview

Assisters Program Training

- 2-3 Day Training
- Instructor Lead training available
- Computer Based training available
- Training located at various locations throughout California (TBD)

Currently Identified Training Requirements

- Initial Training
- Refresher Training
- Annual Recertification Training
- Agent Training



| Primary Topic | Sub-Topic |
|------------------------------|--|
| 1. Affordable Care Act (ACA) | ACA Fundamentals Essential Benefits Covered California Overview Introduction to subsidies and non-subsidies available in Covered California Covered California (new marketplace) for health coverage |
| 2. Assister Role | Assisters Program Overview, Guidelines and Responsibilities Monitoring Reporting and Evaluation Procedures Compensation for Enrollment Covered California Marketing and Outreach Program Overview Training, Technical Assistance and Help Desk Resources |



| Primary Topic | Sub-Topic |
|--|--|
| 3. Uninsured Demographics | California's uninsured/underserved: Basic demographics Cultural and linguistic needs Motivations and challenges Implications for education, outreach, and enrollment support Access standards for individuals with disabilities |
| 4. Compliance Standards | Code of Conduct and Ethics Conflict of Interest Fraud, waste and abuse Privacy and Security Standards |
| 5. Handling Personal Health Information (PHI) | Identifying and recognizing PHI HIPAA and confidentiality requirements Proper handling of financial and tax information |



| Primary Topic | Sub-Topic |
|-----------------|--|
| 6. Eligibility | Understanding open enrollment Program overview and eligibility for Medi-Cal programs and Covered California products Subsidy requirements Advance premium tax credits Cost sharing reductions Monthly premiums Native American/Alaska Native Special Populations Non-subsidy requirements Verification process Annual re-determination process Special enrollment Appeals process Information about Consumer Assistance Programs |
| 7. Plan Options | Fundamentals of health insurance How to choose and compare plans Determining the best fit for the family Medi-Cal Program, plans and cost sharing Covered California subsidized and non-subsidized plan overview and benefits |



| Primary Topic | Sub-Topic |
|---|---|
| 8. Enrollment Support | Enrollment process overview Completing the enrollment form How to select a provider CalHEERS program overview |
| 9. Post Enrollment | Renewal and disenrollment Understanding Important documents Exploring other services offered Consumer support |
| 10. Program System Training (CalHEERS) | Assisting consumers apply online Account maintenance Process client application Assister payment information How to access and view reports |

*Upon successful completion of all modules and testing, individual will be certified and receive a unique Assister number which will allow Assister to help consumers apply for coverage.



Outreach and Education Grant Program Lead Generation





Proposed Timeline

| In-Person Assistance Program | Date |
|--|-----------------------|
| Assisters Enrollment Entity & Individual Assisters Application Release | Early-April 2013 |
| Assisters Help Desk Launch | Early-April 2013 |
| IPA Recruitment Begins | Early-May 2013 |
| Assisters Enrollment Entity Training Begins | Early-Mid-August 2013 |
| Individual Assisters Training & Certification Begins | Early-Mid-August 2013 |
| IPAs Begin Enrollment Assistance | October 1, 2013 |

| Navigator Program | Date |
|--|---------------------|
| Navigator Grant Application Release | June 2013 |
| Navigator Application Due | Mid-July 2013 |
| Enrollment Grant Award | Early October-2013 |
| Navigator Grantee Training Begins | Early November-2013 |
| Navigator Certification Begins | Mid-November-2013 |
| Navigators Begin Enrollment Assistance | Early December-2013 |



New Proposed Federal Regulations

The Centers for Medicare and Medicaid Services (CMS) issued proposed regulations on January 22, 2013:

- 45 CFR 155.225, 42 CFR 435.908, 42 CDR 457.340,
- The proposed rules introduce "Application Counselors" as a separate class to ensure that skilled application assistance is available from entities like community health centers and community-based organizations that may not fit in to the other categories.
- Adding 155.225 to establish the standards for Covered California's certification of such application counselors and outline the certification of individuals seeking to become application counselors.



New Proposed Federal Regulations (Continued)

- Complete certification process so that Counselors would have a relationship with Covered California to officially support the process while ensuring privacy and security of personal information.
- Provide community based application assistance capacity and assist lowincome individuals to understand and provide necessary documentation for determining eligibility for health care affordability programs including Medicaid and Children's Health Insurance Program.
- Streamline training received with the overlap in the scope of responsibilities so that states develop a single set of core training for application counselors, Navigators, agents and brokers, and other entities that provide help to consumers.
- Covered California will review and evaluate the proposed regulations, requirements and role of the application counselor.



Stakeholder Feedback Requested

- Seeking feedback on:
 - Whether to require background checks for Assisters (e.g., IPA & Navigator) and requiring Assisters to pay for fees for the background clearance check.
 - What are stakeholders' suggestions regarding Partnerships with Retail Organizations as paid Assisters?
 - Are there additional types of Entities that should be considered as potential Assister Enrollment Entities?
 - Suggested recruitment strategies?
 - Suggestions on training curriculum?
 - Suggestions on steering policies?
 - Suggestions on monitoring standards?
 - Suggestions on Errors & Omissions insurance requirement for Assisters?
 - What are stakeholders' thoughts and opinions relative to the issues and consideration presented today?
 - What additional factors should Covered California consider?



Next Steps: Stakeholder Input



Submit written comments/suggestions to: info@hbex.ca.gov by 5:00pm Friday, February 15, 2013

