



	Navigators	Certified Application Counselors	CHC Outreach & Enrollment
General Requirements	Required for Federally-Facilitated, State-Based and Partnership Exchanges	Required for Federally-Facilitated, State-Based and Partnership Exchanges	Requires that health centers establish “services designed to assist health center patients in establishing eligibility for and gaining access to Federal, State, and local programs that provide or financially support the provision of medical, social, housing, educational or other related services.” Funds are for health centers to expand current outreach and enrollment assistance activities and facilitate enrollment of eligible health center patients and service area residents into affordable health insurance coverage through the Health Insurance Marketplaces, Medicaid, or CHIP.
Eligibility Criteria	<ul style="list-style-type: none"> • Must be capable of carrying out the duties of a Navigator • Demonstrate to the Exchange that the entities has existing relationships or could readily establish relationships with: <ul style="list-style-type: none"> ○ employers and employees, ○ consumers (including uninsured and underinsured consumers) ○ self-employed 	<p>The Exchange must certify an individual to become an application counselor if:</p> <ol style="list-style-type: none"> 1) Registers with the Exchange 2) Is trained regarding AHP options, insurance affordability programs, eligibility, and benefits rules and regulations governing all insurance affordability programs operated in the state, as implemented in the state, prior to functioning as an 	<p>To receive funds, a health center must:</p> <ol style="list-style-type: none"> 1) Increase the health center’s current outreach and enrollment assistance capacity- by expanding the hours of existing outreach and eligibility/enrollment assistance workers and/or by hiring new outreach and enrollment assistance workers 2) A minimum of at least

	<p>individuals likely to be eligible for enrollment in a QHP</p> <ul style="list-style-type: none"> • Meet any licensing certification or other standards prescribed by the State or Exchange, if applicable • Not have a conflict of interest during the term as Navigator • Comply with the privacy and security standards adopted by the Exchange as required 	<p>application counselor</p> <ol style="list-style-type: none"> 3) Discloses to the Exchange an potential applicants any relationships the application assister or sponsoring agency has with QHPs or insurance affordability programs, or other potential conflicts of interest 4) Complies with the Exchange’s privacy and security standards adopted consistent with 45 CFR 155.260, and applicable authentication and data security standards 5) Agrees to act in the best interest of the applicants assisted 6) Complies with applicable state law related to application counselors, including but not limited to state law related to conflicts of interest 7) Provides information with reasonable accommodations for those with disabilities, as defined by the Americans with Disabilities Act, if providing in-person assistance; and 8) Enters into an agreement with the Exchange regarding compliance with the standards specified in this paragraph. <p><i>(c) Withdrawal of certification.</i> The Exchange must establish procedures to withdraw certification from individual</p>	<p>1 full-time equivalent must be added to the health center’s current outreach and enrollment assistance capacity. (Encouraged to consider hiring qualified veterans for open positions)</p> <ol style="list-style-type: none"> 3) Health Center Outreach and Enrollment assistance workers supported by this funding must: <ul style="list-style-type: none"> ○ Demonstrate and maintain expertise in eligibility and enrollment rules and procedures, ○ the range of qualified health plan options and insurance affordability programs, ○ the needs of underserved and vulnerable populations and ○ privacy and security standards 4) Perform the following required duties <ul style="list-style-type: none"> • Conduct public education activities to raise awareness about coverage options available under Medicaid, CHIP and the Marketplace • Help individuals understand and access affordability options • Provide information and assistance in a fair, accurate, and impartial manner • Provide information and assistance in a manner that is culturally and linguistically
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		<p>application counselors, or from all application counselors associated with a particular organization, when it finds noncompliance with the terms and conditions of the application counselor agreement.</p>	<p>appropriate to diverse communities and accessible to individuals with disabilities; and</p> <ul style="list-style-type: none"> • Provide referrals to any applicable office of health insurance consumer assistance or ombudsman established under Section 2793 of the PHS Act to address consumer grievances, complaints or questions about their health plan, coverage or a determination <p>5) Demonstrate the capacity to conduct “in reach” with currently uninsured health center patients and “outreach” to non-health center patients in their approved service area.</p> <p>6) Describe how they will collaborate with other health centers and providers in their service area to ensure that outreach and enrollment assistance activities are coordinated with other local, regional, and/or state-wide outreach and enrollment assistance efforts and training requirements</p>
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Types of Eligible Entities	<ul style="list-style-type: none"> • 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 • Licensed agents and brokers • Other public or private entities or individuals that meet the requirements of the Navigator program • Other entities may include but are not limited to: <ul style="list-style-type: none"> ○ Indian tribes ○ Tribal organizations ○ Urban Indian organizations • State or local human service agencies 	Staff and volunteers of Exchange designated organizations and organizations designated by state Medicaid and CHIP agencies pursuant to 42 CFR 435.908.	Existing Health Center Program Grantees
Duties	<ol style="list-style-type: none"> 1) Maintain expertise in eligibility, enrollment, and program specifications and conduct public education activities to raise awareness about the Exchange 2) Provide information and services in a fair, accurate and impartial manner. Such information must acknowledge other health programs 	<ol style="list-style-type: none"> 1) Provide information about insurance affordability programs and coverage options 2) Assist individuals and employees to apply for coverage in a QHP through the Exchange and for insurance affordability programs 3) Help to facilitate enrollment of eligible individuals in QHPs and insurance affordability programs 	<ol style="list-style-type: none"> 1) Conduct public education activities to raise awareness about coverage options available under Medicaid, CHIP and the Marketplace 2) Help individuals understand and access affordability options 3) Provide information and assistance in a fair, accurate, and impartial manner 4) Provide information and assistance in a

	<p>3) Facilitate selection of a QHP</p> <p>4) Provide referrals to any applicable office of health insurance consumer assistance or health insurance ombudsman established under section 2793 of the PHS Act, or any other appropriate State agency or agencies, for any enrollee with a grievance, complaint, or question regarding their health plan, coverage, or a determination under such plan or coverage; and</p> <p>5) Provide information in a manner that is culturally and linguistically appropriate to the needs of the population being served by the Exchange, including individuals with limited English proficiency, and ensure accessibility of usability of Navigator tools and functions for individuals with disabilities in accordance with the Americans with Disabilities Act and section 504 of the Rehabilitation Act.</p>		<p>manner that is culturally and linguistically appropriate to diverse communities and accessible to individuals with disabilities; and</p> <p>5) Provide referrals to any applicable office of health insurance consumer assistance or ombudsman established under Section 2793 of the PHS Act to address consumer grievances, complaints or questions about their health plan, coverage or a determination</p>
Prohibition on Conduct	<p>The Exchange must ensure that a Navigator must not:</p> <p>1) Be a health insurance issuer</p>	<p>Will meet the same training and conflict of interest standards</p>	

	<ul style="list-style-type: none"> 2) Be a subsidiary of a health insurance issuer 3) Be an association that includes members of, or lobbies on behalf of, the insurance industry 4) Receive 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 		
Certification and Training	Required CMS training- 30 hours	Required	Required- will be similar to that provided to Navigators
Funding	Funding for Navigator grants may not be from Federal funds received by the State to establish the Exchange	No Funding.	Supplemental FY2013 Funding for existing Health Center Program grantees based on the following formula: -A base amount of \$50,000 -An additional \$5,000 for initial one-time expenditures (e.g. supplies) - An additional amount allocated by the grantees' proportion of uninsured patients as reported in calendar year 2012 Health Center Program Uniform Data System.

Resources

[CMS Cooperative Agreement to Support Navigators in Federally-facilitated and State Partnership Exchanges](#)

[CMS Cooperative Agreement Application FAQs](#)

[CHC Outreach and Enrollment Assistance](#)

[NACHC Issue Brief on CHCs and Consumer Assistance Programs](#)