

# Health Insurance Exchange Brokers, Agents and Navigators Advisory Committee **MEETING MINUTES**

Location: Legislative Office Building  
300 Capitol Avenue, Room 1E, Hartford, CT  
Date: Thursday, September 13, 2012  
Time: 9:00 a.m.

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## **Members Present**

Mickey Herbert (Co-Chair), Exchange Board Member; Mark Czarnecki (Co-Chair), Douglas Financial Services, Inc.; Antonio Caporale, CT Insurance Department (CID); Barbara Saxton, Hub International, Inc.; Ellen Andrews, CT Health Policy Project; Jay Festa, USI Insurance; John Calkins, CT Benefits Brokers & Chapt. NAHU; Ken Lalime, CT State Medical Society-IPA, Inc. (CSMS-IPA); Matthew Fair, Pierson & Smith; Stephen Glick, Chamber Insurance Trust; Michael Nicasro, Central CT Chambers of Commerce; Phil Boyle, Pierson and Smith

## **Members Absent**

David Guttchen, Office of Policy and Management; Jeanette Ziegler, Mohegan Tribe of Indians of Connecticut

## **Other Participants**

Jason Madrak, Health Insurance Exchange (HIX); Kevin Counihan, HIX

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### **I. Call to Order and Introductions**

Chairperson Mickey Herbert opened the meeting at 9:10 a.m. Committee members and staff introduced themselves.

### **II. Review and Approval of Minutes**

Chairperson Mickey Herbert requested a motion to approve of the minutes from the previous meeting. John Calkins made the motion. Antonio Caporale seconded the motion. Motion passed unanimously.

### **III. Review Final Roles & Responsibilities Recommendations**

Chairperson Herbert turned the meeting over to Jason Madrak. Mr. Madrak provided an overview of the meeting agenda.

Grant Porter informed the group of recent language that had been released from CMS relating to a new category of "In-Person Assistors". Mr. Porter provided a brief explanation of what the Blueprint is and explained that the original Blueprint from CCIIO did not include language around the program at all. The second version of the Blueprint included section 2.7:

*Section 2.7: If applicable: The Exchange has established an in-person assistance program distinct from the Navigator program and has a process in place to operate the program consistent with the applicable requirements of 45 CFR 155.20(c), (d), and (e).*

Mr. Porter stated that there is no other guidance. Mr. Madrak stated that despite all of the clarity in this paragraph, we will still be reaching out to CMS for additional information.

Committee members had been provided with a memo which outlined the Staff's final recommendation based on feedback generated from the previous meeting. Mr. Madrak provided an overview of the final recommendation which maintains the original two-tiered Navigator Program which includes an "Educator" role as well as an "Enroller" role.

Changes to the original recommendation include the following:

1. Eliminates SHOP-specific Navigator Program where instead all Navigators will be educated about SHOP
2. Relaxes prohibitions on advice Navigators can give; Navigators are still prohibited to recommend specific QHP or Carrier
3. Expands upon follow-up activities
4. Simplifies compensation model

Mr. Madrak provided more specific information around the changes made to the original recommendation as pertains to the duties of the Navigator Program, the facilitation of enrollment, as well as navigator compensation. Mickey Herbert raised a question about the relationship between this proposed program and Medicaid, in relation to assisters. Stephen Glick raised a concern that the Committee has not seen a budget and suggested the Committee see a projected budget or overview before voting on the program. Conversation ensued. Ellen Andrews expressed concern with what the relationship with Medicaid will be, requesting clarity with regard to Medicaid facilitation. Discussion took place with regard to the role of the Navigators in following up with their cases. Ellen Andrews asked how we will stop individuals from falling through the cracks when it comes to Navigators maintaining consistent follow-up. Members discussed handing off, and emphasized the importance of a well-planned and executed structure for tracking cases, ensuring follow-up, and managing hand-offs between agencies.

**Ellen Andrews and Kevin Counihan dismissed themselves from the meeting at 9:30 a.m.**

Barbara Saxton asked that the committee further discuss specifics around how the Exchange can ensure enrollment assistance quality among assisters and navigator organizations. Comprehensive dialogue took place with regard to managing and monitoring hand-offs and referrals. . Barbara Saxton asked how many entities can apply for this funding and asked if there is a defined number for the budget, how is it allocated, and what is the timeline.

John Calkins initiated a discussion of the certification process by CID, and also made the recommendation of requiring errors & omissions coverage. Mr. Madrak stated that while the ACA does not require licensing of navigators, some states are requiring them to be producers. This is a decision at the state-level. Regarding the E&O, organizations are not required to have it right now but some states are requiring Navigators to obtain it. Mr. Madrak stated that the Exchange team would be in Washington next week and Staff has that question keyed up. Antonio Caporale indicated that up to this point, while the department is in favor of a certification process so there is some accountability by the navigators to the state, there is currently no requirement that the producer be required to hold any license other than a certification. A discussion of educating navigators ensued, to which Mr. Madrak replied that this would be discussed in the next meeting.

Michael Nicastro expressed concern about consistency between the proposed two-tiered structure, especially in relation to the hand-off between Navigators and Brokers and potential financial complications involving commissions. Mr. Madrak discussed the proposed compensation structure around this sort of hand-off. Ken Lalime asked about the role of Providers in this two-tiered system, and if the Exchange is planning to issue and promote standard language as part of the educational plan.

Mr. Herbert raised concerns over funding of this program in later fiscal years, like 2014 and 2015. Mr. Herbert explained that he sits on the Fiscal Committee of the Exchange Board of Directors, and that while they are currently working to finalize an operating budget for FY2013, the question remains about funding in subsequent years. Mr. Herbert stated that the current strategy around generating operating funds would be through charging a certain percentage to carriers as a fee for hosting plans on the Exchange, which he believes could hurt the Carriers in the long-term. Mr. Herbert said he will encourage staff to look further in the future when it comes to budgeting and financial sustainability. Stephen Glick added that in reality, the ACA expands the Medicaid population in Connecticut, so there should be some discussion on how funding contributions will be assessed between these two entities. Mr. Madrak provided some clarification on market rates he had mentioned earlier, as requested by Barbara Saxton, and responded to the previous dialogue by saying that these kinds of discussions are mission-critical, and that affordability and sustainability are still at the center of Exchange planning and development.

#### **IV. Vote on Accepting Recommendations**

Mickey Herbert requested a motion to accept staff recommendations. The motion was made and seconded. Motion passed.

#### **V. Review Recommended Training and Certification Requirements**

Mr. Madrak initiated a discussion on training and certification requirements. Committee members had received documents from CA, MD, IL and WA which illustrate different approaches to training Navigators. The Exchange consulted with CHOICES and the Office of the Healthcare Advocate (OHA) for insight on training for Navigator-like roles and functions. Mr. Madrak provided an overview of the role of the OHA. Among its goals and objectives, the OHA is responsible for communicating with managed care consumers, as well as assisting with managed care selection by providing information, referral and assistance to individuals about means of obtaining health insurance coverage and services.

Mr. Madrak stated that the Exchange has also met with CHOICES (Connecticut's program for Health insurance assistance, Outreach, Information and referral, Counseling, Eligibility Screening). Mr. Madrak described the role of the CHOICES Program which provides information to person age 60 and older and persons with disabilities. CHOICES is comprised of five Area Agencies on Aging which are private, nonprofit planning agencies.

Mr. Madrak provided an overview of the sample training content list and schedule for Navigators (and potentially assisters) created by Exchange staff, which included certification recommendations. Mr. Madrak described the sample training content list which was organized by T1 and T2 categories.

John Calkins recommended the inclusion of consideration for minimum education requirements, background checks, and fingerprinting. Mark Czarnecki stated that he thought the content list was asking too much of T1 individuals. Members discussed the implications around the T1 sample training requirements, with Mr. Herbert adding that 2-day training may not be enough for navigators even if they have a background in insurance and are well-educated. Barbara Saxton asked if individuals would be tested

on their competency for this information. Mr. Madrak confirmed that there would be a competency assessment, and that the Exchange is still looking into options for conducting training. Members discussed at length the requirements of T1 and T2 training and certification requirements.

**Phil Boyle joined the meeting at 10:16 a.m.**

Mr. Madrak moved on to discuss specialization in relation to training. Among other things, additional specialized training allows for abbreviated training modules for those who are already certified to perform navigator-like roles, simplified broker/agent certification, targeted improvement of Navigator skills, and materials for recertification. Barbara Saxton added that in addition to specialization and modified training for those with prior expertise, perhaps we could create a process for testing these individuals separately.

Ken Lalime asked the Committee approximately what percentage of the broker community is well-versed in Medicaid HUSKY arrangements. Mr. Czarnecki responded that they focus on what interests them in their businesses so normally wouldn't gravitate towards those programs, but that there are programs in existence that are designed to educate about things like this. Mr. Lalime asked that knowledge of these types of programs be included as a requirement for competency tests.

**Kevin Counihan returned to the meeting at 10:27 a.m.**

John Calkins asked if there would be a fee required for those taking the training, citing as an example the current situation with agents who pay significant fees to the state and carriers whom they represent. Mr. Calkins wants to know if that same type of fee will apply to Navigators. Kevin Counihan replied that the Exchange will work with the Committee to make that determination as judiciously as possible.

Barbara Saxton made a point of clarification, that brokers cannot become navigators unless they are willing to forego commissions. However, she requested more definitive guidance on rules for enrollment firms. Mr. Counihan explained that enrollment firms would be considered prohibited from becoming navigators unless they forego compensation, and that furthermore most of these firms wouldn't have the competency when it comes to Medicaid enrollment. Ms. Saxton disagreed, and stated that there needs to be more information on 'conflict of interest' guidelines provided to the Committee.

**VI. Next Steps**

Mr. Madrak thanked the committee and indicated that Staff will further explore the assister role that CMS recently defined in a preliminary sense. Staff will also get additional information regarding training, certification, and licensing and will return with a more refined version of the current plan for members to look at. Mr. Madrak finished by saying that among other topics to cover at the next meeting, there will be specific discussion around performance monitoring.

**VII. Public Comment**

Claudia Epright provided a public comment.

**VIII. Adjournment**

Chairperson Mickey Herbert adjourned the meeting at 2:57 p.m.

**Resources:**

[Agenda](#)  
[Presentation](#)

[Proposed Recommendation Memo](#)  
[CA Program Design Options](#)  
[IL Navigator Program Design](#)  
[MD Study of Navigator Program...](#)  
[WA Potential Role Responsibility Navigators](#)