Section 2.0
Consumer and Stakeholder Engagement and Support

2.1
Expected completion date: January 1, 2014, and ongoing

The NM HSD Office of Health Care Reform (OHCR) has held public stakeholder meetings since December 2010. With Establishment Grant funding, OHCR contracted with 13 entities to provide information for development of HIX; these reports are posted on the HSD OHCR website at: http://www.hsd.state.nm.us/nhcr/nhcrlao.htm

HIX Advisory Task Force (ATF), composed of 14 members, and HIX Advisory Work Groups, composed of 12-18 members, have been asked to respond to pertinent questions and to advise and guide HIX decisions [Please see the attached ATF and work group calendar]. The Task Force and Work Groups represent a variety of perspectives, including consumers, tribal representatives, large and small employers, self-employed people, health care providers, hospitals, insurance carriers, brokers, government leaders and agencies, underserved populations, and other community representatives. These members will act in an advisory role to inform and provide recommendations to HSD in HIX design areas, including:

- Essential Health Benefits
- Outreach, Education, Adoption, and Enrollment
- Employer Participation
- Exchange Market Regulation
- Native Americans
- Program Integration
- Financial Sustainability
- Legislative Members

The ATF and Work Groups were launched in June 2012, and are scheduled to operate through May 2013. They will continue to meet as needed throughout HIX design and implementation process. Public attendance is encouraged at every meeting, dial-in phone numbers are provided, and press releases are submitted to newspapers of general circulation and posted on the NM HSD website to encourage participation (see attached Example of Press Releases, and website at http://www.hsd.state.nm.us/nhcr/nhcrlao.htm). An email box, exchange.comments@state.nm.us, has been created to allow public comments and acknowledge requests for information through email.
In addition, HSD has initiated qualitative research and in-depth interviews with state agencies and stakeholders to maximize coordination and integration with entities that will directly interface with the State’s HIX, including insurance carriers, Indian Health Services, CHIP, and Medicaid, among others. This research (Stakeholder Interview Highlights, 10.20.12, and In-depth Interviews with Stakeholders - Summaries) is attached.

2.2
Expected completion date: January 1, 2014, and ongoing

In 2005, Executive Order 2005-004 mandated executive state agencies to adopt pilot tribal consultation plans with input from the 22 federally recognized tribes with New Mexico. In 2007, New Mexico’s five Health and Human Services agencies, including HSD, held tribal consultations to adopt the current New Mexico Health and Human Services Department Tribal Consultation Protocol that formally guides engagement between the state and tribes in New Mexico. In 2009, Senate Bill 196 was signed into law, thus enacting the State-Tribal Collaboration Act (STCA). The STCA is a statutory commitment of New Mexico State to work with Tribes on a government-to-government basis to better collaborate and communicate on issues of mutual concern. In 2009, The HSD Cabinet Secretary signed the HSD Consultation, Collaboration and Communication Policy (“Policy”). The HSD Policy was endorsed and signed by the newly appointed HSD Cabinet Secretary in 2011. The Policy is posted on the HSD website at http://www.hsd.state.nm.us/.

HSD has a Tribal Liaison to assist with the development of HIX. Two of the reports mentioned in 2.1 above provided information specifically about Tribal and Off-Reservation Native Americans. OHCR ATF work groups each include a tribal representative. One work group consists of Native American representatives and focuses on Native American issues. HIA will continue tribal consultation for HIX issues.

2.3
Expected completion date: Third quarter, 2013

Comprehensive outreach and education efforts are being developed to assure the success of the HIX, including coordination of efforts among state agencies, community organizations, insurance carriers, corporate partners, and providers, among others. HIX has identified existing services in state agencies such as the Office of Community Health Workers through the New Mexico Department of Health (“DOH”), schools, churches, hospitals, New Mexico Taxation and Revenue Department, the New Mexico Division of Motor Vehicles (“DMV”), and others. HIX is working with tribal representatives to develop materials and ways to communicate specific to Native Americans, such as engagement with Chapter Houses, public service announcements on radio shows such as Native American Calling, Singing Wire, and through the Native American Radio. Some of this outreach will be contracted through an RFP and subcontracts issued by HIA.

The Outreach, Education, Adoption, Enrollment ATF Work Group made recommendations to the ATF on 09.26.12 (attached), and defined core strategies and target audiences, including primary and secondary audiences, including those in 45 CFR 155.130, which are:

- Educated health care consumers who are enrollees in QHPs;
• Individuals and entities with experience in facilitating enrollment in health coverage;
• Advocates for enrolling hard to reach populations, which include individuals with mental health or substance abuse disorders;
• Small businesses and self-employed individuals;
• State Medicaid and CHIP agencies;
• Federally-recognized Tribes, as defined in the Federally Recognized Indian Tribe List Act of 1994, 25 U.S.C. 479a, in the HIX geographic area;
• Public health experts;
• Health care providers;
• Large employers;
• Health insurance issuers; and
• Agents and brokers.

The HIX will use a variety of tactics to reach and engage these populations, and guide them to the HIX website or a Navigator where they can learn more about their options and enroll. The plan includes the following components:

• Materials development
• Earned media
• Paid media (advertising)
• Social media
• Stakeholder engagement
• Partnerships and grassroots engagement
• State employee communications

Proposed General Public marketing channels (in English and Spanish) include:

1) Print, radio, TV, social media/Facebook, web, health fairs, billboards & other health events.
2) Coordination and engagement with Chambers of Commerce, Nonprofits (Charities), federally qualified health centers, rural clinics, hospitals & emergency rooms, schools, churches, shopping malls, SBA and Medicaid offices.
3) Coordination and engagement with statewide distribution services such as the New Mexico Taxation & Revenue Department, Department of Motor Vehicles, and gas and electric companies (PNM and Gas Co of NM).

Native American marketing channels will include:
1) Print, radio, TV, social media/Facebook, web, health fairs, other events
2) Educational website hotlinks for Native Americans
3) Face to face meeting opportunities such as frequent group meetings in public venues
4) Coordination and engagement of Chapter Houses, senior centers, health fairs and Pow Wows
5) Marketing through Native American Radio: Singing wire & Native American calling and Public Service Announcements
6) Marketing and educational efforts through social and alumni organizations through newsletters
7) Advertising on buses and bus stops

NM HIX is gathering input from agents, brokers, public health experts, health care providers, advocates for people with mental health or substance abuse disorders, among others, as identified
in 45 CFR 130. The Outreach, Education, Adoption, Enrollment ATF Work Group recommended the initial campaign include the following public relations and advertising messages to:

Individuals & the General Public
• Benefits of having coverage
• Increased access, increased choice
• Who can participate, how it will work
• Advance Premium Tax Credits ("APTC") & Cost Sharing Reductions ("CSR")
• Navigator & Agent/Broker Application Assistance
• Premium Calculator

Small employers (targeted to those who currently offer and those who currently do not offer insurance)
• Increased Access, increased choice
• Who can participate, how it will work
• Small Business Tax Credits
• Comparison Tools

Native Americans (members of federally recognized Tribes)
• Increased access on a monthly basis
• Increased choice of providers and facilities
• Strengthen IHS services and access

Navigators, Agents and Brokers
• How HIX can help get their clients covered
• Who can participate, how it will work
• How they are compensated

2.3a
Expected completion date: Third quarter, 2013

HIX will contract for qualified vendor services to create culturally and linguistically appropriate outreach and education materials to comply with 45 CFR 155.205(c). HIX will procure the services of a qualified telephonic translation service to comply with this provision. The HIX website was included in the procurement for HIX IT system through the RFP released 11.02.12 (see Section 3.0, “Eligibility and Enrollment”).

2.3b
Expected completion date: Third quarter, 2013

HIX is developing an outreach plan to populations outlined in 45 CFR 155.130. This includes work through the HSD ATF Outreach Education Adoption Enrollment Work Group, which made recommendations for marketing strategies, navigator and outreach programs, and training programs for a wide spectrum of audiences. The presentation the Outreach, Education, Adoption, Enrollment work group presented to the ATF with its recommendations on 09.26.12 is attached. HIA will expand on this research as it is finalized, as well as monitor progress of the Navigator program developed for FFES.
2.4  
Expected completion date: Third quarter, 2013

HIA will issue an RFP for services that including the operation of a call center to handle customer calls and support enrollments, answer questions regarding eligibility, and provide other types of customer assistance. The RFP will specify that Customer Service Representatives (CSRs) be trained in enrollments, eligibility and SHOP, and calls will be routed to specialists using an interactive voice response system to increase efficiency and optimize customer service. During the vendor procurement process, Service Level Agreement (SLA) metrics will be written into the contract for managing performance. This will include a six-month baseline period to adequately gauge call volume, calibrate the forecasting model and establish 30, 60 and 90-day call volume forecasts and CSR staffing.

The call center will use a translation service such as that currently in use by the NM Medical Assistance Department (“MAD”). HIA plans to provide this service through a contract with a qualified vendor procured through an RFP that is under development.

2.4a  
Expected completion date: Third quarter, 2013

The HIX will provide for the operation of a call center to handle seamless application support through a contract with a qualified vendor procured through an RFP that is under development. The RFP will be issued through HIA.

2.4b  
Expected completion date: Third quarter, 2013

The HIX will provide for translation and oral interpretation services to comply with this requirement through a qualified vendor procured through an RFP that is under development. The RFP will be issued through HIA.

2.4c  
Expected completion date: Third quarter, 2013

The HIX will provide adequate training and resources to operate the call center to comply with this requirement through a qualified vendor procured through an RFP that is under development. The RFP will be issued through HIA.

2.5  
Expected completion date: Third quarter, 2013

The HIX website is included in the procurement for the HIX IT system. A technical requirement is included in the RFP for the website to meet Section 508 requirements and to include English and Spanish language versions. A qualified vendor will be procured through an RFP that was published on 11.02.12 by HIA.
2.5a
Expected completion date: Third quarter, 2013

The HIX website is included in the procurement for the HIX IT system. A technical requirement is included in the RFP for the website to meet Section 508 requirements and to include English and Spanish language versions. A qualified vendor will be procured through an RFP that was published on 11.02.12 by HIA.

2.5b
Expected completion date: Third quarter, 2013

The HIX website is included in the procurement for the HIX IT system. A technical requirement is included in the RFP for the website to meet Section 508 requirements and to include English and Spanish language versions. A qualified vendor will be procured through an RFP that was published on 11.02.12 by HIA.

2.5c
Expected completion date: Third quarter, 2013

The HIX website is included in the procurement for the HIX IT system. A technical requirement is included in the RFP for the website to meet Section 508 requirements and to include English and Spanish language versions. A qualified vendor will be procured through an RFP that was published on 11.02.12 by HIA.

2.6
Expected completion date: Third quarter, 2013

The HIX will establish a process to operate a Navigator program that is consistent with 45 CFR 155.210, and is developing training, conflict of interest, and privacy and security standards. HIA will procure these services with qualified vendors through RFPs and/or subcontracts currently under development. Program development will continue going forward.

HIA will work with the New Mexico Division of Insurance (“DOI”) to establish a program through which eligible public or private entities or individuals will be certified to serve as Navigators. Navigators will be paid through grants. The Navigator program will have a set of standards developed by HIA and DOI to prevent and mitigate conflicting interests to ensure that participating entities and individuals have reliable integrity. HIX will require Navigators to comply with privacy and security standards set forth in 45 CFR 155.260, and any further privacy and security measures adopted by HIX.

Navigator Training.
The training standards required of all entities and individuals participating in the Navigator program will ensure expertise in:
• The needs of underserved and vulnerable populations;
• Eligibility and enrollment rules and procedures within HIX;
• The range of QHP options and insurance affordability programs; and
• The privacy and security standards set forth in 45 CFR 155.260 and as may otherwise be adopted by HIX.
requirements established by DOI for Agents and brokers registered on HIX, pursuant to Section 2.8 of this Blueprint Application

The ATF Outreach, Education, Adoption and Enrollment Work Group has recommended that Navigator training program include the following components:
1) Abbreviated Presumptive Eligibility / Medicaid On-site Application Assistance (PE/MOSAA) Medicaid training
   a. Medicaid Overview (What is Medicaid)
   b. Non-financial eligibility factors (Residency, other insurance policies, SSN, pregnancy)
   c. Determination of the household size
   d. Financial Eligibility
   e. Universal Application Assistance

2) Cultural training:
   a. New Mexico Department of Health Online Training
   b. New Mexico Indian Affairs Department: Classroom Training

3) HIX Training
   a. Eligibility & Enrollment
   b. Qualified Health Plans
   c. APTC and CSR
   d. Premium Calculator
   e. Native American Eligibility
   f. Privacy and Security (HIPAA, Personal Identification Information)
   g. Registration with HIX

4) Insurance Market training
   a. Commercial Market Insurance Basics
   b. HIX Insurance basics for individuals and small employer groups
   c. Income changes and impact on APTC and CSR

Navigator Duties.
HIX will mandate the following duties for all entities or individuals acting as a Navigator:
• Maintain expertise in eligibility, enrollment, and program specifications and conduct public education activities to raise awareness about HIX;
• Provide information and services in a fair, accurate and impartial manner, including the acknowledgement of other health programs;
• Facilitate selection of QHPs;
• 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, for any enrollee with a grievance, complaint, or question regarding their health plan, coverage, or a determination under such plan or coverage; and
• Provide information in a manner that is culturally and linguistically appropriate to the needs of the population being service by HIX, including individuals with limited English proficiency, and ensure accessibility and 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.
Navigator Participants.
HIX will select a community and consumer-focused non-profit group and at least one of the following categories to serve as Navigators:
• Trade, industry, and professional associations;
• Commercial organizations, ranching and farming organizations, with New Mexico-specific industries under consideration.
• Chambers of commerce
• Unions;
• Resource partners of the Small Business Administration; and
• Other eligible public or private entities or individuals, including without limitation, Indian Health Services, Indian tribes, tribal organizations, urban Indian organizations, and State or local human service agencies.

Eligibility Standards. To receive a grant, HIX will require an entity or individual seeking to serve as a Navigator to:
• Be capable of carrying out the duties set forth above;
• Demonstrate existing relationships, or readily available relationships, with employers and employees, consumers (including uninsured and underinsured consumers), or self-employed individuals likely to be eligible for enrollment in a QHP;
• Meet any licensing, certification or other standards prescribed by the State or HIX, if applicable;
• Not have a conflict of interest during the term as a Navigator; and
• Comply with all privacy and security standards set forth in 45 CFR 155.260 and as may otherwise be adopted by HIX.

Navigator Oversight.
1) Department of Insurance
   a. Initial and ongoing Navigator oversight should be the responsibility of the Division of Insurance.
      i. Background checks
      ii. Training completion documentation
         1. Initial & recertification
            a. Medicaid Training
            b. Cultural Training
            c. HIX Training
      iii. Complaint reporting
2) HIX
    a. Consumer/Navigator umbrella organization would be subject to the oversight of HIX.
    i. Any consumer/Navigator organizations contracted with HIX would be charged with field oversight over navigators under their supervision.

Prohibited Conduct. HIX will exercise authority over Navigators to ensure compliance with the program and to prohibit Navigators from:
• Being a health insurance issuer or a subsidiary thereof;
• Being an association that includes members of, or lobbies on behalf of, the insurance industry; or
• Receiving 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.

Navigator Compensation.
Navigator compensation guidelines are under development. Guidelines will assure compliance with ACA requirements. Payments will be through lump sum grants or on a “per-head” basis as determined to be most efficient when Navigators are individuals or entities. Payments will be consistent across markets and products. Accountability standards will be tied to payments, such that organization entities will be accountable to HIX, and navigators will be accountable to their organizational entity.

2.6a
Expected completion date: Third quarter, 2013

HIA will establish a process to operate an HIX Navigator program that is consistent with 45 CFR 155.210 and 45 CFR 155.260, and HIA will procure these services with qualified vendors through subcontracts currently under development. This will include training in meeting the requirements of 26 USC § 6103, the IRS Code.

2.6b
Expected completion date: Third quarter, 2013

HIA is developing an RFP directed to consumer and nonprofit organizations to develop HIX Navigator programs. Initial funding will come through legally appropriate and available grants. Funding after 2014 is under development.

2.6c
Expected completion date: Third quarter, 2013

This process was outlined in the findings and recommendations of the Outreach Education Adoption Enrollment work group (see response and attachment to 2.3 above). Navigators will be required to execute conflict of interest statements that will include compliance with HIPAA and PIA rules, and any other requirements determined to be appropriate. HIX is developing an RFP plans to procure the services of a qualified vendor to provide this service.

2.7
Expected completion date: Third quarter, 2013

Navigator and IPA programs are being designed to eliminate barriers in accessing the application process by providing in person assistance in community-based locations frequented by target populations, at times that are convenient to working families, including evenings and weekends. The two programs will closely mirror each other and it is expected that any entity providing IPA services would also be able to provide Navigator services. The funding for the Navigator and IPA program will come from separate sources. Federal 1311 funds will support the development of training programs for the Navigator program and the IPA Program. The operating activities of the IPA program will be funded with federal 1311 funds, but will be cost-allocated as appropriate for public program assistance.
When the HIX is fully operational, agents and brokers will assist individuals, employers and qualified employees in the comparison and selection of QHPs. The final rule allows HIX to determine the role that agents and brokers play within HIX. The rule allows agents and brokers to help individuals apply for premium tax credits through HIX and enroll in coverage. HIX will determine how best to use these agents and brokers to help consumers access coverage through HIX. While agents and brokers will only be allowed to provide apolitical information that can be found on the web portal, they will be permitted to provide information based on their experience with a QHP, in much the same manner as is done today. Agents and brokers helping individuals enroll in HIX will understand the basics of the premium tax credits and QHPs. Agents and brokers in New Mexico play an important and influential role in the distribution of health insurance. Both individual consumers and businesses rely on agents and brokers to sort through their health insurance options, provide health plan recommendations, and serve as their agents throughout the year in dealings with insurance companies. The ATF Navigator Work Group has recommended to the ATF that agents and brokers act as the primary assistance resource for small employers who wish to purchase plans in the SHOP HIX. Under this arrangement, agents and brokers will continue to receive commissions or PMPM compensation from carriers.

Agents and brokers, including web brokers, who wish to sell HIX products will be required to meet licensing requirements and take additional training on HIX protocols. Agents and brokers will register with HIX as required by rule, receive training on QHP options and other publicly subsidized insurance programs, and comply with HIX privacy and security standards. The Agent Licensing Bureau (“Bureau”) of the DOI has statutory responsibility for licensing and regulating individuals and businesses who conduct insurance business in New Mexico. The Bureau determines the qualifications and eligibility of applicants and processes license applications, company appointments by insurers, renewals, banking of continuing education credits, and approval of pre-licensing and continuing education courses. The Bureau requires applicants to pass the state insurance exam in the line of authority for which the applicant is applying (such as health, property and casualty, life). Individuals applying for a resident license with the Bureau must furnish fingerprints and undergo a criminal history background check. HIX staff will coordinate with the Bureau to create training and licensure requirements that are ACA-compliant. Entities wishing to assist consumers in enrollment will be required to take coursework on:

- underserved and vulnerable populations;
- eligibility and enrollment rules and procedures;
- the range of QHP options and insurance affordability programs;
- privacy and security standards;
- digital literacy and website navigation; financial assistance; and
- conflicts of interest.

A minimum training requirement is under development, as well as a written exam at the end of the training for certification. HIX and consumers will use the producer search function to verify if a license is active:
http://www.nmprc.state.nm.us/insurance/producer-search.html
Agents and Brokers Compensation:
Agents and brokers will receive compensation from carriers for enrollment in HIX, in accordance with the Brokers’ contracts with the carriers. The enrollment system will accept a Broker ID and transmit that data to the carrier so that the Broker can receive the commission.

As in the current small group market, brokers will continue to serve as the primary sales force for small group insurance in NM. However, in the new defined contribution system, brokers’ interaction with employees may increase significantly as they take on a role geared more toward “education and advisement” with respect to purchasing health coverage. HIX technology will enable brokers to be responsive to employer and employee needs. Brokers will be able to use the on-line consumer decision support tools and the side-by-side plan comparison display to assist individual employees with selecting and purchasing a plan that best fits their needs.

The HIX IT RFP specifies that the HIX IT system must be able to interface with web brokers’ sites. The specific method will depend on the vendor’s proposal.

2.8a
Expected completion date: Third quarter, 2013

HIX will use the producer search at http://www.nmprc.state.nm.us/insurance/producer-search.html which shows if a license is active and certified on the HIX. Agents/agents and brokers must meet requirements in order to keep a license active. In addition, the continuing education that has been completed is displayed on the website.

The DOI Bureau is responsible for the licensing and regulation of individuals and businesses who conduct insurance business in the state of New Mexico. The Bureau determines the qualifications and eligibility of applicants and processes license applications, company appointments by insurers, renewals, banking of continuing education credits, and approval of pre-licensing and continuing education courses.

No person shall in this state be, act as or make any representation as being, as to subjects of insurance resident, located or to be performed in this state or elsewhere, unless then licensed as such under the Insurance Code [59A-1-1 NMSA 1978].

Access NMSA 1978 59A-1 et seq, here:
http://www.nmonesource.com/nmpublic/gateway.dll/?f=templates&fn=default.htm

2.9
Expected completion date: Third quarter, 2013

Web brokers will have the same requirements as non-web brokers. They must be licensed and certified in NM and take required training if they wish to sell products from the HIX.

The HIX IT System RFP issued on 11.02.12 (attached) includes a requirement, TR-102, for the system to be able to interface with web brokers.
2.9a
Expected completion date: Third quarter, 2013

HIX will use the producer search at http://www.nmprc.state.nm.us/insurance/producer-search.html which shows if a license is active. Agents and brokers must meet requirements in order to keep a license and certification active. In addition, the continuing education that has been completed is displayed on that website. HIX will be responsible for verifying that the producer has completed the additional HIX training.

2.9b
Expected completion date: Third quarter, 2013

Web brokers will have the same requirements as non-web brokers. They must be licensed and certified in NM and take required training if they wish to sell products from the HIX. HIX will be responsible for verifying that the web broker has completed the additional HIX training.

Supporting documentation:

- Website link for Planning Grant reports and current stakeholder activity: http://www.hsd.state.nm.us/nhcr/nherlao.htm
- ATF and work group calendar
- ATF and work group membership
- Example of Press Releases announcing ATF meetings
- In-depth Interviews with Stakeholders - Summaries
- Stakeholder Interview Highlights, 10.20.12
- Executive Order 2005-004
- SB 196
- HSD State-Tribal Consultation Policy
- Outreach, Education, Adoption, Enrollment work group recommendations to ATF, 09.26.12
- Request for Proposals For Information Technology and Integrated Services, New Mexico Health Insurance Exchange (NMHIX) issued by HIA on 11.02.12 (HIA IT RFP)
- NMSA 1978, 59A-1 et seq.