

## Summary

This document records the Navigators, Agents, and Brokers Workgroup’s recommended training for individuals operating as assisters for Minnesota’s Health Insurance Exchange. Under the final federal Exchange regulations, states are required to create training standards for Navigators that cover, at a minimum, the following topics:

- Needs of underserved and vulnerable populations;
- Eligibility and enrollment rules and procedures;
- Range of QHP options and insurance affordability programs;
- Exchange privacy and security standards; and
- Proper handling of tax and other personal data.

In addition to a Navigator program, federal guidelines permit other assisters to operate within the Exchange market—including “In-Person Assistors” and Agents/Brokers. These recommended training requirements apply to all potential Exchange assisters, as appropriate. This document does not account for the depth of each module required for different types of Assistors.

## Training Contingencies

The Navigator, Agent and Broker Workgroup continues to study, evaluate and develop options regarding the duration of each training module, the modality of such training and what different levels of training for corresponding defined roles may need to be developed. According to initial environmental scans, other States’ training programs are recommending 16 to 24 hours of initial required training. At this time, the workgroup has not come to consensus on recommended durations of training. Duration of each training module is dependent upon the finalized curriculum and content. Ultimately, the goal is to ensure a quality and highly efficient and effective assister training program.

## Roles and Responsibilities

As the workgroup continues to refine training recommendations, specific roles and resources within the Exchange have begun to emerge. As such, the workgroup has begun to discuss what these roles may be and to some extent, what level of training may be required. However, the workgroup has no specific recommendations on roles and responsibilities at this time.

*Note: CMS model training standards have not yet been issued to states. Therefore, these recommendations will remain flexible to account for anticipated training regulations from CMS. In addition, CMS has not yet released their “conflict of interest” standards which will directly impact Module 8 (conflict of interest) content.*

## Considerations outside the scope of this document

The following topic areas were recognized as needing to be addressed, but due to time constraints were not addressed in this initial document. These items will need to be addressed within the scope of the operational development and implementation.

- Content /Curriculum: the difference between ‘core’ curriculums and modules geared toward specific roles or services provided by a broader HIX Assister Program.
- Difference between initial and on-going training needs.
- Frequency: Initial and on-going (relative to certification), re-training due to poor performance, annual re-training requirements, etc.
- Modality & Supporting materials.
- Duration of modules.
- Proficiency/Competency assessment or “Minimum Standards”.
- Program/Procedure Update Training, Continuing Education, and Performance Measurement.
- Regulation: Will certain assisters require certification and training by Department of Commerce in partnership with the Exchange?

## Recommended Training Modules and Curriculum

### Assistor Training Program Outline

Module	Module / Activity	Duration
1	Affordable Care Act <sup>^</sup>	TBD
2	Minnesota Health Insurance Exchange 101 <sup>^</sup>	TBD
3	Needs of underserved and vulnerable populations* <sup>^</sup>	TBD
4	Cultural and linguistically appropriate approaches and materials <sup>^</sup>	TBD
5	Qualified Health Plans and Insurance Affordability Programs* <sup>^</sup>	TBD
6	Eligibility and Enrollment Rules and Procedures* <sup>^</sup>	TBD
7	Means of appeal and dispute resolution	TBD
8	Conflict of Interest* <sup>^</sup>	TBD
9	Exchange Privacy and Security Policies and Requirements / Standards* <sup>^</sup>	TBD
10	Consumer Assistance Support	TBD
11	Coverage Renewal	TBD
12	Proficiency/Competency Assessment or “Minimum Standards” / Continuing Education / Re-certification	TBD
13	Outreach and Education	TBD
14	Small Business Health Options Program (SHOP) Specific	TBD
15	Licensure Requirements	TBD

\*Required Navigator Training Standards per ACA (§155.210 (b) (2))

<sup>^</sup>Recommended “Core Curriculum” components.

<b>Module 1</b>	<b>Affordable Care Act^</b>	
Duration:	Modalities:	
	<ul style="list-style-type: none"> <li>▪ Coverage available under the ACA</li> <li>▪ Rights and Protections</li> <li>▪ Guarantee Issue</li> <li>▪ Coverage requirement</li> <li>▪ Tax credits for individuals and families</li> <li>▪ Require coverage of preventative services and immunizations</li> <li>▪ Extend dependent coverage up to 26</li> <li>▪ Essential Health Benefits</li> <li>▪ The expectations of the roles of Navigator, Broker &amp; IPA</li> </ul>	<ul style="list-style-type: none"> <li>▪ Information within this module may be different, depending on audience (role).</li> <li>▪ This may be a first year only requirement.</li> <li>▪ Recommendation to have same curriculum for all roles – providing a basic overview and understanding of “all” covered through the MN HIX.</li> <li>▪ The suggestion was to move SHOP specific information to the SHOP module. Understood, however would it be beneficial to at least include in this module as “information only” for the purpose of raising awareness?</li> </ul>
<b>Module 2</b>	<b>Minnesota Health Insurance Exchange 101^</b>	
Duration:	Modalities:	
	<ul style="list-style-type: none"> <li>▪ Exchange Governance and Structure</li> <li>▪ Role of the Navigator Program</li> <li>▪ Initial Assessment Tool: individual &amp; household eligibility</li> <li>▪ Consumer Website Navigation <ul style="list-style-type: none"> <li>○ How consumers will use the Exchange web site</li> <li>○ Tools for the Consumer</li> </ul> </li> <li>▪ Navigator Website Navigation <ul style="list-style-type: none"> <li>○ How Navigators will use the Exchange web site</li> <li>○ Tools for the Navigator</li> </ul> </li> <li>▪ Technical Issues – HIX FAQ</li> </ul>	<ul style="list-style-type: none"> <li>▪ Different for SHOP.</li> <li>▪ Option: suggestion to address either in the ACA module or possibly here.</li> </ul>
<b>Module 3</b>	<b>Needs of underserved and vulnerable populations*^</b>	
Duration:	Modalities:	
	<ul style="list-style-type: none"> <li>▪ Ensure knowledgeable about the populations they are most</li> </ul>	<ul style="list-style-type: none"> <li>▪ Many organizations will</li> </ul>

	<p>likely to serve</p> <ul style="list-style-type: none"> <li>– Underserved:</li> <li>– Vulnerable populations:</li> <li>– Specific populations in Minnesota (use scan):</li> </ul> <ul style="list-style-type: none"> <li>▪ Best practices in reaching the underserved and vulnerable</li> <li>▪ Referrals <ul style="list-style-type: none"> <li>○ Public Programs</li> <li>○ Community/Nonprofits</li> <li>○ FQHCs / Free Services</li> <li>○ Bridge to Benefits</li> </ul> </li> </ul>	<p>already have this competency.</p> <ul style="list-style-type: none"> <li>▪ Information within this module may be different, depending on audience (role).</li> <li>▪ Differences between breadth and depth, depending on role.</li> </ul>
<b>Module 4</b>	<b>Cultural and linguistically appropriate approaches and materials^</b>	
Duration:	Modalities:	
	<ul style="list-style-type: none"> <li>▪ Best practices</li> <li>▪ Resources</li> <li>▪ Templates</li> <li>▪ Models / Case Studies</li> <li>▪ Community Health Workers (CHWs)</li> <li>▪ Community/Nonprofit Organizations (MNCAAs)</li> </ul>	<ul style="list-style-type: none"> <li>▪ There is a lot of work to be done around this module.</li> <li>▪ Can we rely on organizational competencies? Not in order to avoid this particular training – all should take; can always continue to learn and grow, especially in the MN landscape.</li> <li>▪ 155.220 = not required for B/A</li> <li>▪ Recommendation to include this in the core curriculum (regardless if not required for B/A)</li> </ul>
<b>Module 5</b>	<b>Qualified Health Plans and Insurance Affordability Programs*^</b>	
Duration:	Modalities:	
	<ul style="list-style-type: none"> <li>▪ Actuarial values – Metal Tiers</li> <li>▪ Co-insurance, co-pays, deductibles</li> <li>▪ How to assist consumers to compare health plans (e.g. cost, quality, benefits)</li> <li>▪ Overview of MN Insurance Code requirements and coverage options available through the individual Exchange, including the tax implications of low-income subsidies;</li> <li>▪ Health Insurance Terminology (materials to utilize)</li> </ul>	<ul style="list-style-type: none"> <li>▪ There is a thin line here between HIX roles and licensable producer activities.</li> </ul>
QHP	<ul style="list-style-type: none"> <li>▪ Basic requirements that determine a QHP</li> <li>▪ Insurance carriers, co-ops (?)</li> <li>▪ Public Programs</li> </ul>	

Plans	<ul style="list-style-type: none"> <li>▪ Participating plans in the Exchange</li> </ul>	
Insurance Affordability Programs	<ul style="list-style-type: none"> <li>▪ Overview – Advance Premium Tax Credits (APTC) / Cost Sharing Reductions (CSRs)</li> <li>▪ Documentation /Verification</li> <li>▪ Federal Role</li> <li>▪ Tax Credits 101</li> </ul>	
<b>Module 6</b>	<b>Eligibility and Enrollment Rules and Procedures*^</b>	
Duration:	Modalities:	
	<ul style="list-style-type: none"> <li>▪ Eligibility and enrollment info related to the Exchange and Medicaid as well as procedures to support eligibility and enrollment including use of the new exchange portal and other eligibility systems: <ul style="list-style-type: none"> <li>○ Processes</li> <li>○ Mandated requirements – including documentation</li> <li>○ Exemption criteria</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>▪ Further discussion needed on transition/churn needs.</li> </ul>
Exchange Eligibility	<ul style="list-style-type: none"> <li>▪ Individuals / Families</li> </ul>	
Plan Eligibility	<ul style="list-style-type: none"> <li>▪ What is someone eligible for and when?</li> <li>▪ Options for individuals, families</li> <li>▪ Eligibility based on financials and employment status</li> </ul>	
Public Program Eligibility	<ul style="list-style-type: none"> <li>▪ MAGI Policy</li> <li>▪ Non-MAGI Policy and Procedures <ul style="list-style-type: none"> <li>○ Verifications</li> </ul> </li> <li>▪ Application Training <ul style="list-style-type: none"> <li>○ Income</li> <li>○ Assets</li> <li>○ Identity</li> <li>○ Cit/ID</li> <li>○ Pregnancy</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• Model after MNCAA Orientation training</li> <li>• Differences between breadth and depth, depending on role.</li> </ul>
Enrollment rules and procedures	<ul style="list-style-type: none"> <li>▪ Facilitation of QHP selection</li> <li>▪ Review of Navigator rules and procedures: enrolling on someone’s behalf and signatures</li> </ul>	
<b>Module 7</b>	<b>Means of appeal and dispute resolution</b>	
Duration:	Modalities:	
	<ul style="list-style-type: none"> <li>▪ Eligibility Determination Appeals, Medicaid</li> <li>▪ Eligibility Determination Appeals, Exchange</li> <li>▪ QHP Enrollment Dispute Resolution</li> <li>▪ APTC/CSR Appeal and Dispute Resolution</li> <li>▪ Appeals: Department of Commerce, Department of Health</li> </ul>	
<b>Module 8</b>	<b>Conflict of Interest*^</b>	
Duration:	Modalities:	
	<ul style="list-style-type: none"> <li>▪ COI Standards for HIX Assistors</li> <li>▪ Case Studies (hypothetical)</li> </ul>	<ul style="list-style-type: none"> <li>▪ CCIIO must approve</li> </ul>

<b>Module 9</b> Duration:	<b>Exchange Privacy and Security Policies and Requirements / Standards*^</b>	
	Modalities:	
	<ul style="list-style-type: none"> <li>▪ Exchange specific privacy and security requirements</li> <li>▪ Proper handling of tax and other personal data*</li> <li>▪ HIPAA , HITECH, MN Data Privacy Statute</li> <li>▪ Methods for protecting the consumer information</li> <li>▪ <i>Collection of premiums (?)</i></li> </ul>	<ul style="list-style-type: none"> <li>▪ DHS Data Privacy Course (Boost technical data privacy.)</li> <li>▪ Legislative/Political consideration</li> </ul>
<b>Module 10</b> Duration:	<b>Consumer Assistance Support</b>	
	Modalities:	
	<ul style="list-style-type: none"> <li>▪ Provide info about post-enrollment support activities; (Assist with issues related to their health plan, provider billing questions, etc.);</li> <li>▪ Info regarding referrals to appropriate resources (e.g. state consumer assistance or ombudsman programs, free clinics)</li> <li>▪ Alternative methods available for purchasing and enrolling: <ul style="list-style-type: none"> <li>○ Walk-in centers</li> <li>○ Community Centers</li> <li>○ Kiosks</li> </ul> </li> </ul>	
<b>Module 11</b> Duration:	<b>Coverage Renewal</b>	
	Modalities	
	<ul style="list-style-type: none"> <li>▪ Renewal process for Exchange and Medicaid coverage</li> </ul>	<ul style="list-style-type: none"> <li>▪ This will vary widely, depending on program.</li> <li>▪ Occur near open enrollment</li> </ul>
<b>Module 12</b> Duration:	<b>Proficiency/Competency Assessment or “Minimum Standards” / Continuing Education / Re-certification</b>	
	Modalities	
	<ul style="list-style-type: none"> <li>▪ Process and requirements for on-going education (CE)</li> <li>▪ Re-certification requirements</li> <li>▪ Remedial and/or voluntary</li> <li>▪ Schedule for training and certification</li> <li>▪ Optional, special topic meetings (policy changes, HIX updates, etc.)</li> <li>▪ Quarterly Community of Practice Meetings</li> <li>▪ Case studies</li> </ul>	<ul style="list-style-type: none"> <li>▪ Different for different roles</li> <li>▪ Competencies based on Levels of Service</li> <li>▪ Don’t turn this into professionalization</li> <li>▪ Capacity to “grandfather” certain organizations and professionals</li> </ul>
<b>Module 13</b> Duration:	<b>Outreach and Education</b>	
	Modalities	
	<ul style="list-style-type: none"> <li>▪ Goals of the Navigator’s role in outreach and education</li> <li>▪ Key dates for “pushes”</li> <li>▪ Best practices</li> </ul>	<ul style="list-style-type: none"> <li>▪ Utilizing HIX created materials, will this module focus on</li> </ul>

	<ul style="list-style-type: none"> <li>▪ Identify and review resources available in the community (libraries, municipal buildings, etc.)</li> <li>▪ Tracking and reporting of outreach and education</li> </ul>	<p>community specific practices?</p> <ul style="list-style-type: none"> <li>▪ Dependent on Marketing Work Group – identify cross-over with Outreach &amp; Marketing tools used in marketing campaign.</li> <li>▪ Where does this intersect with roles?</li> </ul>
<b>Module 14</b>	<b>SHOP</b>	
Duration:	Modalities	
	<ul style="list-style-type: none"> <li>▪ Employer Requirements and Needs <ul style="list-style-type: none"> <li>○ Employer web portal</li> </ul> </li> <li>▪ Employee Requirements and Needs <ul style="list-style-type: none"> <li>○ Employee web portal</li> </ul> </li> <li>▪ Understand SHOP product features &amp; comparison tools (networks, quality, benefit information, etc.)</li> <li>▪ Analyze defined contribution verses defined benefit</li> <li>▪ Employees in transition support</li> <li>▪ Employer Application</li> <li>▪ Tax credits for small businesses</li> <li>▪ Explain Benefits laws &amp; updates specific to small groups under the ACA and products sold in the SHOP exchange</li> </ul>	<ul style="list-style-type: none"> <li>▪ Consider different requirements for B/A's dealing in the individual and SHOP exchange. Should / do all agents need SHOP training?</li> <li>▪ This training should be more focused on the info available to <b>assist</b> in the analysis in the new SHOP world versus <b>how</b> the analysis is done.</li> <li>▪ Employer application: add?...unless part of the web portal.</li> <li>▪ Agent training (initial licensing and CE) covers selling of products....thus list deleted and not necessary to cover during this training module – Dental may be an exception.</li> </ul>
<b>Module 15</b>	<b>Licensure specific training / certification coursework</b>	
Duration:	Modalities	
	<ol style="list-style-type: none"> <li>1. Licensing: <ol style="list-style-type: none"> <li>a. 20 hr general course</li> <li>b. Must pass exam</li> <li>c. Apply for license</li> <li>d. 24 hrs/two years recertification training, with at least 3 of the 24 hours from a class or classes in ethics, and at least half of the 24 hours from non-company courses.</li> </ol> </li> <li>2. Minnesota Statutes, i.e. 72 A <ol style="list-style-type: none"> <li>a. Ten (10) subdivisions for agents to adhere to</li> </ol> </li> <li>3. Regulations issues by Department of Commerce, Rule 2795 <ol style="list-style-type: none"> <li>a. Fourteen (14) regulations for agents to adhere to</li> </ol> </li> <li>4. Minnesota Court rulings <ul style="list-style-type: none"> <li>Fiduciary duties under Employee Retirement Income Security</li> </ul> </li> </ol>	

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