

State Partnership Consumer Assistance Guidance Summary

Guidance Released January 3, 2013

State responsibilities:

- day-to-day management of the Exchange Navigators including ongoing monitoring of Navigator activities and providing technical assistance to Navigators (Navigators will engage in locally-focused work. Navigator grantees could include individuals and organizations that often target their outreach to specific ethnic, geographic, or other communities.);
- state will ensure that Navigators are adhering to FFE standards related to conflict of interest, cultural and linguistic competency, privacy and security standards, develop additional training modules that states want Navigators to take, notify HHS of any concerns or problems about Navigators.
- development and management of a separate and distinct in-person assistance program, and;
- operate and support the in person assister program in a manner that ensures coordination with the Navigator program in order to avoid duplication of effort,
- can choose to be responsible for outreach and educational activities.

HHS will:

- establishment and maintenance of the Exchange Internet website,
- operate the call center,
- funding and award of Navigator grants, and;
- establish conflict of interest, cultural and linguistic competency, privacy and security standards and training standards that will apply to Navigators in FFEs and State Consumer Partnership Exchanges.
- It is legally required that HHS retain ultimate authority over the Navigator grant process, including selecting Navigator grantees and awarding Navigator grants, and the approval of grantee activities and budgets.

- work closely with states participating in the State Consumer Partnership Exchange to provide updates on its outreach and education plans as they are developed, to avoid duplication of efforts for planning and outreach purposes within the state,
- review the activities of the state.

Training:

The same training standards and training program that apply to Navigators will also apply to in-person assistance programs. As with Navigator training, states with a State Consumer Partnership Exchange will be able to supplement the HHS-developed training with state-specific modules for their in-person assistance programs.

Interaction with Agents and Brokers:

- States can determine whether to permit agents and brokers to enroll consumers in QHPs through the Exchange. The State of Arkansas has chosen to allow brokers and agents to participate as long as they are not compensated for enrolling individuals into either QHPs or other non-QHP health insurance or health plans,
- states will continue to set standards for the agent and broker industry and to play their traditional role in licensing and overseeing agents and brokers,
- HHS is planning to release further guidance on agents and brokers in the coming months.

Outreach and Education:

- HHS allows states the opportunity to conduct outreach and education.
- States may develop and execute, with HHS approval, activities to promote the FFE as well as brand and promote in-person assistance programs, including Navigators

Outreach activities:

- CCIIO recommends that in-person activities begin in the summer of 2013,
- Once open enrollment begins, in-person consumer assistance will become a combination of both public education and enrollment assistance
- CCIIO encourages States to engage local stakeholders in the role of information intermediaries, including coordination with other health and human service programs within the state to extend and broaden outreach. Examples include:
 - providing referral information on applicant or enrollee notices, emails, websites, and through call center assistance.

Materials:

- States can develop their own and/or use materials developed by HHS
- Materials should be culturally and linguistically appropriate based upon the state’s expertise with such populations. This includes making materials accessible to persons with limited English proficiency and those with disabilities.

Branding:

- States are encouraged to brand consumer assistance programs, including Consumer Assistance Programs and Navigators,
- use these programs as a primary outreach channel in motivating consumers to seek in-person assistance.
- States may promote and brand the Navigator and in-person assistance programs within their states through communication channels such as:
 - in-person assistance websites,
 - earned and paid media, and;
 - outreach to eligible consumers.

Promotion of FFE website

Although the same FFE infrastructure will be used in all states, States will have some limited capability to customize their own states. States can:

- include state-specific icons (such as a flag or seal) on state-specific sections of the FFE website,
- States could provide tailored search capabilities on any branded in-person assistance websites.

Deliverable from State to HHS in connection with a State Consumer Partnership Exchange	Timeline
Outreach and Education Plan with high-level timeline of strategies and execution dates	March 29, 2013
Paid and Earned Media Plan	June 15, 2013

Outreach and education plan must include:

- Consumer-focused content that clearly explains all consumer eligibility and enrollment options, program information, benefits, and services available.
- Content written in plain language, free of jargon and using active task-based labels whenever possible.
- Culturally and linguistically appropriate outreach methods:
 - a. If paid media is utilized, an overview including timing and channels (for example, television, radio, print, out-of-home, and online)
 - b. A clear call to action referencing the FFE website.
- Education about:
 - a. Eligibility and enrollment
 - b. Program information
 - c. Benefits and services available through the Exchange and other insurance affordability options
- Outreach and education targeted to various stakeholders.
- Performance metrics for tracking results
- Content development plans should include consumer testing, including testing among persons with limited English proficiency and persons with disabilities, to make sure content and language resonate with target audiences and should identify the types of auxiliary aids and services available and any language assistance services.

Funding:

Year 1:

- Section 1311 grant funding – received by the State of Arkansas

Year 2:

- HHS has told States that other funding will be available for year 2, although the funding source has not yet been identified.