Access Health CT Navigator & In-Person Assistor Training Course

Course Name   Access Health CT Certified Navigator and In-Person Assister Training

Prepared by   Denise O. Smith, Navigator and In-Person Assistor Training Coordinator

Course Location   Online and In Person

Course Duration   33 Hours

Course Exam   Multiple Choice Exam (150 questions)

Course Relevance   Access Health CT, the Connecticut Health Insurance Exchange, works in partnership with the Office of the Healthcare Advocate to administer the Connecticut Navigator and In-Person Assistor Programs (NIPA). The NIPA Programs are key initiatives to engage, educate and enroll historically un-served or underserved CT residents in health insurance coverage. The Navigator program is a required component of the Patient Protection and Affordable Care Act (ACA) coordinated in conjunction with the In-Person Assistor program to strengthen community based partnerships, outreach and engagement. This innovative partnership is the first of its kind in the nation, lauded by the Center for Consumer Information and Insurance Oversight (CCIIO) as a potential model for other states in establishing their NIPA programs.

Course Description   The Access Health CT Navigator and In-Person Assistor Training will prepare participants to apply knowledge and skills to complete the duties of an Access Health CT Navigator or In-Person Assister. This training program meets Federally Proposed guidelines for Navigator and In-Person Assistor training:

Federally Proposed Training for Navigator, Assister, Agent and Broker (ACA 155.210(b) (2))

- •   Affordable Care Act
- •   Needs of Underserved Populations
- •   Qualified Health Plans and Insurance Affordability Program
- •   Eligibility and Enrollment Rules and Procedures
- •   Conflict of Interest
- •   Exchange Privacy and Security Policies and Requirements / Standards

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Scope of Work   The Access Health CT Navigator and In-Person Assistor Training prepares the participants to demonstrate knowledge and skills to meet or exceed the ACA Defined Navigator duties as expressed in the Federal Register / Vol. 78, No. 66 / Friday, April 5, 2013 / Proposed Rules:

- Maintain expertise in eligibility, enrollment and program specifications
- Conduct public education activities to raise awareness about the Exchange
- Provide information and services in a confidential, fair, accurate and impartial manner, including information that acknowledges other health programs such as Medicaid and CHIP
- Facilitate a selection of a Qualified Health Plan
- Provide referrals for consumers with questions, complaints, or grievances to any applicable office of health insurance ombudsman or any appropriate state agency or agencies
- Provide information in a culturally and linguistically appropriate manner, including to person with limited English Proficiency
- Ensure accessibility and usability of Navigator tools and functions for persons with disabilities

Learning Outcomes   The goal of the Navigator and In-Person Assistor Training Program is to incorporate the following learning outcomes and competencies into each module:

- Communication skills
- Critical thinking, problem solving and analytical skills
- Interpersonal skills
- Multi-cultural awareness and respect
- Knowledge of underserved communities in Connecticut
- Occupational skills
- Knowledge of ethical and legal consumer engagement
- Ability to use CRM Database technology to enter data and generate reports
- Ability to use Access Health CT Consumer Enrollment technology (phone, computer, internet and paper) to facilitate enrollment
- Ability to facilitate access to consumer grievance and appeals services and supports

Course Audience   This training is required for all NIPA Program grant funded Navigators and In-Person Assistors who conduct outreach, education, enrollment and consumer assistance activities on behalf of Access Health CT. Navigators and In-Person Assistors are individuals from community or faith based organizations, non-profits and small businesses selected through an Request for Proposal process. All Navigators and Assistor organizations must comply with Access Health CT related HIPPA, privacy, conflict of interest and impartiality agreements.

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Course Materials   Participants will use a combination of online and printed materials

Course Attendance   Participants are required to complete three (3) online training modules and three (3) in person training sessions within the required course schedule

Course Vehicle   The Course is administered using a combination of online modules and in person sessions. Online modules will require internet access and Microsoft windows based system.

Course Schedule   Training modules are disseminated in Three Phases: Phase One (July), Phase Two (August) and Phase Three (September). *Each Phase contains one online module and one in-person session.* Each online module will take approximately four (4) hours to complete. Each in-person session is scheduled for one full day (8 hours with one hour for lunch). See schedule below:

- **Phase One: July 2013** – One online module (4 hrs) and one in-person session (7 hrs)
- **Phase Two: August 2013** – One online module (4 hrs) and one in-person session (7 hrs)
- **Phase Three: September 2013** – One online module (4 hrs) and one in-person session (7 hrs)

Course Attendance   The Navigator and In-Person Assistor Training Course policy requires full participation in and completion of all online modules and in-person training sessions. Participants will be required to complete the online module for each Phase *before attending the In-Person training session based on course schedule.* Participants will submit one printed copy of their online module certificate of completion at the time of each in-person training session.

Course Certification   This course prepares participants to complete a 150 question multiple choice exam. Participants must pass this exam to become an Access Health CT Certified Navigator or In-Person Assistor. This course administers a computer based exams constructed to ensure that each participant receives a distribution of required course topics from 10 major categories: ACA 101, Access Health CT Eligibility and Enrollment, Achieving Health Equity in CT, Health Insurance Literacy, Cultural and Linguistic Appropriate Access, Ethical Guidelines for Community Engagement, Outreach and Education, Access Health CT Consumer Web Portal, CRM Database, Consumer Appeals, Grievances and Access to Care.

The Navigator and In-Person Assistor Course examination is developed to measure the important aspects of outreach, education and enrollment into Access Health CT for un-served and underserved populations. Exam questions correspond with tasks identified in the scope of work. The functional tasks

and ethical guidelines that limit the scope of work are based upon Federally Proposed Rules, for Navigator and Assistor Training, CLAS Standards and the American Public Health Association Community Health Workers.

Course Content Access Health CT has defined the NIPA Training Program course syllabus for Assistors and Navigators based on HHS proposed regulations, CT health disparity data and best practice among community health worker and patient navigator training programs including evidence based strategies for health literacy promotion, cultural and linguistic access to services, outreach, capacity building, and care coordination support. The training program will also provide technical knowledge and skills required to manage and monitor program activities through data collection, exchange portal accounts management and evaluation of consumer satisfaction.

Course Syllabus

The Navigator and In-Person Assistor Training Program include twelve (12) modules. Each module listed below includes a subset of learning objectives. Each learning objective is preceded by its corresponding Knowledge Dimension or Cognitive Process Dimension classification.

1. **ACA 101**:
   a. **Factual / Understanding**: Summarize the Patient Protection and Affordable Care Act (ACA) healthcare law;
   b. **Conceptual / Remembering**: Recognize key health insurance and health care reforms included in the ACA;
   c. **Factual / Remembering**: List key benefits and protections comprised in the ACA for individuals and small businesses;
   d. **Procedural / Remembering:** Recall the specific functions and services provided by the CT Health Exchange;
   e. **Metacognitive / Remembering:** Identify strategies for retaining the information you have learned;

2. **Myths about the Affordable Care Act**:
   a. **Procedural / Understanding**: Classify commonly held beliefs about the ACA as accurate or inaccurate;
   b. **Metacognitive / Understanding:** Predict the impact of these messages on underserved and un-served populations;
   c. **Metacognitive / Remembering:** Identify strategies for responding to ACA myths held by consumers;

3. **Navigator and In-Person Assistor (NIPA) Program Overview**:
   a. **Factual / Understanding:** Summarize the mission, goals and services of the NIPA program;

b. **Procedural / Understanding:** Clarify how the NIPA program supports ACA and Access Health CT implementation in CT;

c. **Procedural / Understanding:** Clarify the scope of work of the Navigators and Assistors

d. **Factual / Analysis:** Select the essential components of the community engagement training, outreach and enrollment initiatives;

e. **Procedural / Analysis:** Differentiate between the NIPA scope of work in the exchange at that of the brokers/agents and call centers

4. **Achieving Health Equity in CT**:
   a. **Conceptual / Understanding**: Define the term social determinants of health;
   b. **Conceptual / Evaluation:** Determine the impact of the social determinants of health on CT's uninsured, underinsured and vulnerable populations;
   c. **Procedural / Understanding:** Clarify how the Navigators and In-Person Assistor Program can improve health access and coverage goals;
   d. Outline key principles of community capacity building;

5. **Health Insurance Literacy (Benefits of Having and Using Health Insurance):**
   a. **Conceptual / Remembering**: Recognize the essential benefits of having health insurance;
   b. **Conceptual / Understanding**: Classify key terms used in health insurance (copay, premium, deductible, etc.);
   c. **Factual / Understanding**: Summarize how consumers can use health insurance to access healthcare and find a medical home;
   d. **Conceptual / Analysis**: Differentiate the costs versus benefits of having or not having health insurance;
   e. **Procedural / Remembering**: Clarify the appropriate usage of the Summary of Coverage and Benefits Tool
   f. **Factual / Analysis**: Select the appropriate tool to use based on given consumer engagement scenarios

6. **Access Health CT 101:**
   a. **Conceptual / Remembering**: Recognize key elements of the new CT Health Insurance marketplace governance and structure;
   b. **Procedural / Understanding**: Classify the insurance options, eligibility and subsidies available to individuals and small business (Qualified Health Plans, Medicaid, CHIP, Modified Adjusted Gross Income);
   c. **Procedural / Remembering**: Recall the basic steps to enrollment for consumers based on given scenarios

    d. **Factual / Remembering:** List the appropriate tools used for shopping and applying for health insurance;

    e. **Conceptual / Understanding**: Classify the appropriate enrollment tool to use based on a given consumer engagement scenarios

    f. **Procedural / Application**: Carry out the steps necessary to enroll a consumer based on a given scenario

    g. **Metacognitive / Remembering:** Identify strategies for retaining the information

7. **Cultural and Linguistic Appropriate Access:**

    a. **Factual / Remembering**: Summarize the definition of the Culturally and Linguistically Appropriate Services Standards;

    b. **Factual / Analysis**: Select relevant policies and/or procedures that demonstrate an organization's compliance with CLAS

    c. **Conceptual / Remembering**: Recognize various forms of literacy

    d. **Metacognitive / Remembering:** Predict the potential barriers to consumers caused by various forms limited or low literacy in given scenarios;

    e. **Procedural / Remembering**: Recall the process to assess potential literacy barriers;

    f. **Metacognitive / Application**: Use the appropriate tool to address literacy barriers in given scenarios;

    g. **Metacognitive / Remembering**: Identify appropriate methods to improve health literacy among consumers

    h. **Metacognitive / Evaluation:** Deconstruct one's own cultural biases that may impact your interaction with consumers

8. **Ethical Guidelines for Community Engagement:**

    a. **Procedural / Remembering**: Recall ACA and AHCT legal requirements to provide confidential, impartial, conflict of interest free and plain language services and referrals;

    b. **Conceptual / Understanding**: Clarify scope of work scenarios in which HIPPA, proper handling of tax information and PII must be applied;

    c. **Procedural / Evaluation**: Integrate appropriate AHCT legal requirements for consumer engagement with given scope of work scenarios

    d. **Metacognitive / Evaluation**: Reflect on communication tools and processes to ensure effective communication across the scope of work;

9. **Outreach, Education and Enrollment:**

    a. **Conceptual / Remembering**: Recognize uninsured and underinsured population segments through data analysis;

  b. **Procedural / Analysis**: Integrate evidenced based health promotion and health education models to specific population segments;

  c. **Factual / Analysis**: Select appropriate tools and processes used to explain eligibility criteria for Medicaid, Medicare, CHIP, advanced tax credit or subsidies;

  d. **Conceptual / Understanding**: Classify appropriate tools and processes used to enroll various population segments

  e. **Factual / Understanding**: Summarize the process of enrollment in plain language;

  f. **Factual / Remembering**: List the steps for web-based and paper enrollment;

  g. **Metacognitive / Remembering:** Identify strategies for retaining the information

10. **Access Health CT Web Portal:**

  a. **Factual / Remembering**: List basic Access Health CT Web Portal functions and services for consumer shopping;

  b. **Procedural / Remembering**: Recall steps for filing a consumer grievance, appeals or referral based on scope of work scenarios;

  c. **Factual / Understanding**: Summarize steps for online eligibility screening and enrollment;

  d. **Procedural / Application**: Carry out basic consumer portal navigation actions based on scope of work scenarios;

  e. **Procedural / Application**: Carry out basic private portal navigation actions based on scope of work scenarios;

  f. **Metacognitive / Remembering**: Predict barriers to portal enrollment based on scope of work scenarios

  g. **Factual / Application**: Respond to portal enrollment barriers using appropriate enrollment resources based on scope of work scenarios

11. **CRM Database:**

  a. **Factual / Remembering**: List basic Access Health CT CRM Database functions and services;

  b. **Procedural / Remembering**: Recall steps for documenting outreach and education activities based on scope of work scenarios;

  c. **Factual / Understanding**: Summarize policies and procedures related to CRM database usage;

  d. **Procedural / Application**: Carry out basic CRM database activities based on scope of work scenarios;

  e. **Metacognitive / Remembering**: Predict barriers to CRM data entry based on scope of work scenarios

  f. **Factual / Application**: Respond to CRM data entry barriers using appropriate resources based on scope of work scenarios

12. **Monitoring**:
    a. **Conceptual / Remembering**: Recognize key elements of consumer assistance federal guidelines;
    b. **Factual / Analysis**: Select appropriate tools to facilitate linkage to DSS Medicaid and CHIP access to care systems;
    c. **Factual / Analysis:** Select appropriate tools to use for consumer education on DSS plan and benefit questions, provider networks, claims and care management processes;
    d. **Procedural / Remembering**: Recall the steps for filing a Consumer Appeals and/or Grievance;
    e. **Factual / Remembering**: List essential documentation required for an initial consumer grievance or appeal filing;
    f. **Factual / Understanding**: Summarize basic legal policies and procedures for filing a consumer grievance or appeal;

Course Teaching Strategies   Teaching strategies are grounded in learner centered and adult education recommendations from the CT State Department of Education including respect for and incorporation of prior knowledge, opportunities for small group study, independent research, web-based and project-based learning. Instruction is provided by professional educators, allied health care providers and experienced Community Health Workers.

Course Development Sources (Excerpt only)

Strengthening Non Profits: A Capacity Builder's Resource Library- Delivering Training and Technical Assistance (US Department of Health and Human Services)

Training Community Health Workers: Using Technology and Distance Education (HRSA 2006)

Foundations for Community Health Workers – Tim Berthold; 2009 John Wiley and Sons, Inc. San Francisco, CA

Center for Medicaid and Medicare Services, National Training Program

APHA Policy and Practice – Alternatives to Didactic/Pedantic methods, including participatory liberation education and popular education methods 2007;

Center for Health Improvement, Karen K. Shore, PhD; 2011 Key Elements of Health Reform

Small Business Administration Feb 2013

Robert Wood Johnson Foundation, 2012

Healthy People 2020

CT Multicultural Health Partnership: Faces of Disparity

National Center for Cultural Competence

ThinkCulturalHealth.hhs.gov

SAMHSA Technical Assistance Partnership Cultural and Linguistic Community of Practice

Center for Health Care Strategies, Inc. Health Literacy Implications of the Affordable Care Act

The New York State Community Health Worker Initiative: October 2011 Summary Report

CT State Department of Education Effective Teaching Strategies (Nine Essential Components, Lesson Plan Template; 2008 Resource Packet)