

Washington State Health Benefit Exchange: Potential Role and Responsibilities of Navigators

Summary

As the State of Washington builds its Health Benefit Exchange, identifying the role of Navigators is a central question. The following brief outlines the federal requirements for Navigators, reviews research conducted for the Health Care Authority to explore consumer and stakeholder opinions about the role of Navigators, and offers recommendations on (1) the ideal qualities or traits for Navigators and (2) the types of entities or organizations that are best suited to act as Navigators.

The recommendations are informed by key findings from a recent statewide survey on Washington residents and interviews with stakeholders from community organizations, health care associations, brokers, insurance carriers and consumer advocacy organizations.

Background

Finding health insurance can be a complex undertaking for individuals, families and small businesses. There are several options available and they differ significantly with respect to benefits and cost sharing, coverage standards, participating provider networks, eligibility requirements and more. Provisions in the 2010 Patient Protection and Affordable Care Act (ACA) seek to make the decision-making, eligibility and enrollment process streamlined and consumer friendly, with the ultimate goal of increasing access to quality health care for more Americans.

One cornerstone of the law requires states to develop a health insurance exchange by 2014, which will provide eligible individuals and small business owners a one-stop shop to more easily evaluate and purchase health care plans. The law also mandates states create a Navigator program, which would involve an array of entities charged with assisting the process.

Navigators will be critical to the success of the Exchange, and while the ACA outlines numerous functions and responsibilities, states have significant flexibility in establishing Navigator programs. This brief outlines the recommended traits and characteristics for Washington's Navigators and the types of organizations that are best suited to act as Navigators.

What is a Navigator?

Section 1311(i) of the ACA¹ requires that all health insurance exchanges establish a Navigator program that provides grants to entities that assist consumers as they seek services from an exchange. The ACA lists responsibilities of potential Navigators, a variety of groups that could serve the functions of Navigators and outlines certain eligibility requirements and standards including:

¹ Patient Protection and Affordable Care Act § 1311 (i): Navigators

Navigators will be **responsible** for:

- Conducting public education activities to raise awareness of plans provided on the exchange;
- Providing complete, fair, and impartial information during enrollment, including availability of tax credits;
- Facilitating health plan enrollment;
- Providing referrals for enrollees who have grievances, complaints, or questions regarding enrollment or coverage; and
- Providing information in a culturally and linguistically appropriate manner.

Eligible entities must have an existing relationship or the ability to easily create a relationship with potential users of the exchange, including employers, employees, consumers or self-employed individuals; and may include trade, industry and professional associations; organizations involved in fishing, farming and ranching industries; consumer-focused nonprofits; chambers of commerce; unions; Small Business Administration resource partners; and licensed insurance agencies and brokers. Other entities can be considered if they are deemed to be capable of such duties and meet all standards.

In order to **meet standards**, entities:

- Shall not be a health insurance issuer;
- Shall not receive any compensation from a health insurance issuer in connection with enrolling individuals or small business owners in certain plans; and
- Shall adhere to any forthcoming standards as set by the Secretary of Health and Human Services.

Recommendations and Key Findings

In addition to the guidelines and requirements detailed in the ACA, recent research conducted among Washington residents and a diverse group of stakeholders provides a number of insights that should be kept in mind as the Navigator program is developed and individual Navigators are selected. The findings are based on the following:

- A statewide online survey conducted among 570 adults, 18 and older, with varying incomes; and
- Stakeholder interviews with 16 representatives from several sectors, including community organizations, health care associations, brokers, insurance carriers and consumer advocacy organizations.

Please refer to Appendix A and B for a complete summary of findings from the online survey and stakeholder interviews.

The following are Navigator recommendations based on the research:

- **Ensure Navigators are knowledgeable about all aspects of the Exchange, including the benefits and costs of all plans offered and eligibility requirements for tax credits,**

subsidies, and Medicaid. Because Navigators will be in the position of helping consumers and small businesses compare plans and make the optimal choice based on personal circumstances, they will need a deep understanding of the benefits and costs of all plans offered through the Exchange, as well as the available tax credits and subsidies, and Medicaid. “Knowledgeable” was the top testing quality for Navigators in the survey of residents and was among the most frequently cited by stakeholders in the one-on-one interviews. Consistent, ongoing training will be key to ensuring Navigators are able to provide the most relevant and current information to individuals and small businesses. In the stakeholder interviews, brokers also cited the importance of requiring licensing, or some form of certification, to ensure Navigators begin with a minimum level of knowledge and maintain it over time.

- **Washington residents and small businesses are looking for clear, simple explanations and guidance.** Choosing health coverage can be a complex undertaking and many users of the Exchange will be signing up for insurance for the first time. It will be important for the Navigator system to be easy to access. Individual Navigators will need to be able to explain options in simple, lay-person terms and communicate in a way that is compassionate, non-judgmental and appropriate to the communities they serve. This applies across all audiences, including people from low-income or ethnic backgrounds and small business owners and employees. In fact, “clear, simple” explanations tested second in importance only to “knowledgeable” in the online survey.
- **Navigators must be viewed as trustworthy sources of impartial information.** Respondents uniformly cited the importance of Navigators being trusted and credible. In part, this is about familiarity and comfort. For example, stakeholders representing small businesses indicated that their constituents are used to working with brokers or representatives from their professional associations to find insurance. Similarly, consumer advocates noted that people from low-income and cross cultural backgrounds will likely want support from entities they currently come in contact with on health matters, like community health centers and community-based organizations.

In addition, many consumers are wary of sharing the personal information required to enroll such as salary, social security number, and proof of residency. Navigators must be viewed as honest and reliable to overcome this barrier. Similarly, consumers want reassurance that Navigators have no financial stake in the insurance option they choose. Finally, many consumers and stakeholders, representing small business in particular, are wary of the Exchange being perceived as a government takeover of health care. Consequently, it is important that Navigators maintain and project independence from government control.

- **Navigators will need to offer support in a variety of ways and be easily accessible to the communities they serve during and after the enrollment process.** Consumers have varying levels of comfort with and access to technology and will want support in ways that are familiar to them. Nearly as many survey respondents indicated that they prefer receiving assistance online (38 percent), by telephone (31 percent), or in-person (30 percent). Accordingly, Navigators should not limit their availability to just one medium.

Further, Navigators should be conveniently located where people live and work and be available both during and after business hours.

- **A diverse array of Navigators will be necessary to serve the diverse array of consumers. Additionally, building on existing networks will be key to success.** The individuals and small businesses eligible to purchase insurance through the Exchange in 2014 will represent varying income, education and ethnic/cultural backgrounds. Some people will be familiar with the private insurance market or Medicaid, and some will be engaging for the first time. In order to engender trust and drive enrollment, Navigators will need to be as diverse as the people they serve.

There are many organizations currently providing information and guidance to individuals and small businesses in an effective manner, and these existing networks should not be overlooked. Involving these entities in the Navigator program will ensure the benefit of past experience and leverage existing, trusted relationships.

Recommended types of entities that many say will be well-suited to serve as Navigators include:

- Community-based organizations (i.e., organizations that work with different ethnicities or specific populations)
 - Tribal councils/clinics
 - Insurance brokers
 - Local health departments
 - Community health centers
 - Nonprofit organizations that have successful outreach programs, such as those reaching diverse audiences
 - Health coalitions or associations
 - Chambers of commerce
 - Labor unions
- **Navigators must reach patients and consumers in settings where or when health care is top of mind.** Residents reported an interest in getting help from a navigator in places in which they receive their health care, such as a doctor's office or clinic, or directly from a health insurance plan. Navigators will need to be accessible in health-related locations and work in conjunction with providers to ensure some accessibility in non-emergency health care settings.

APPENDIX A

Findings from Statewide Online Survey

Lake Research Partners (LRP) conducted an online survey among Washington adults on issues related to Exchange Navigators. The purpose of the survey was to gain a better understanding of who residents want as Navigators, as well as what traits and characteristics are important in someone who would help them enroll in coverage.

The survey was conducted among 570 adults, 18 and older, statewide in Washington from November 9 through 12, 2011. The margin of sampling error is ± 4.1 percentage points.

The following are key findings from the poll:

- **The residents most likely to need help from Navigators include those with lower incomes, those with less education, and people 40 to 64 years old.** The following residents are most likely to say they are unwilling to apply for health insurance online:
 - Those under 400% of FPL (31% vs. 19%);
 - Ages 40 to 64 (26%) versus 18-39 year olds (15%);
 - Those with a high school degree or less (33%) or some college (26%), versus a college degree (16%); and
 - Those who infrequently use the Internet to email friends or family (35%).
- **Residents are split on whether they want help with the Exchange online, by telephone, or in person.** Nearly four in ten (38%) residents say that they would want to get help online if they needed assistance comparing plans or signing up for a plan. Of those who prefer online help, 42% say they would want the online help to be real-time chat compared to 29% who would want to email and 28% who would want to seek help from a Frequently Asked Questions (FAQ) page. The individuals most likely to want online help include adults under 40 years old and those with a college degree or at least some college.

Close to three in ten (31%) would want help via telephone, and 30% would want help in person. Adults at or above 400% of FPL, ages 40 to 64, and women are more likely than their counterparts to want to get help by phone. Adults below 400% of FPL and those with less than a college degree are most likely to want to get help in person.

- **Residents are most interested in getting help from a navigator at a doctor's office/clinic or from a health insurance plan.** When asked how interested they would be in getting help from several potential navigator figures, "someone at a doctor's office or clinic" and "someone from a health insurance plan" receive the highest marks with mean ratings of 5.9 and 5.8, respectively, on a scale from 1 (not at all interested) to 10 (extremely interested). "Someone at a local organization in your community" and "a private health insurance agent or broker" are runners up with respective means of 5.6 and 5.5. The potential navigator receiving the least interest is "someone at your local

emergency room” with a mean interest score of 4.2. These preferences do not vary across demographic groups.

- **Residents place high importance on Navigators’ accessibility and availability.** The vast majority – 86% – say it is important for Navigators to be available by phone. Another 78% say it is important for them to be available by email, and 68% say being available in person is important.

There are some interesting differences by education. As education level increases, less importance is placed on in-person availability and more importance is placed on email availability.

- **Out of a list of potential navigator traits and characteristics, being knowledgeable and able to explain things clearly top the list in terms of importance to residents.** Respondents were asked to rate how important it would be for a navigator to have a variety of traits and characteristics on a scale from 1 (not important) to 10 (extremely important). The navigator characteristics receiving the highest mean importance scores are “knowledgeable” and “explains things clearly and simply” with 9.2 and 9.0, respectively. “Patient,” “problem solver,” and “non-judgmental” are also highly rated in terms of importance with mean scores of 8.2 each.
- **Concerns about sharing Social Security numbers with Navigators may be a potential barrier.** While a majority (58%) says they are comfortable sharing their Social Security number with a navigator, 42% say they are not comfortable with this idea. Individuals below 400% of FPL are less likely to be comfortable with this idea than those at or above 400% of FPL (52% vs. 65%). Also, adults under age of 65 are less likely to be comfortable with this idea than those 65 and older.

APPENDIX B

Findings from Stakeholder Interviews

To supplement the consumer survey, interviews were conducted with stakeholders in Washington who are invested in the Exchange and health reform at large. More than 20 stakeholders from various sectors were contacted, including community organizations, health care associations, brokers, insurance carriers and consumer advocacy organizations. GMMB, the Exchange's communication consultant, conducted the interviews from November 9 to 22, 2011. The questions addressed a variety of topics, including what the ideal qualities for Navigators are and what entities should be included in the program.

GMMB completed interviews with a total of 17 stakeholders. Based on these conversations, the following themes emerged:

- Many stakeholders strongly felt that Navigators will need a **deep understanding of the way both public and private insurance markets operate**, as well as the specific plans and tax credits offered through the Exchange. They should be able to **provide guidance** in comparing the different plans in terms of coverage and cost, as well as **understand all components of the Exchange and law requirements**.
- The majority of respondents expressed the need for Navigators to have **formal trainings and/or certification**. A few stakeholders noted that requiring a license would be the best way to ensure adequate training. Because the Exchange will be a complex, ever-evolving system, many felt Navigators should be required to undergo consistent, in-depth training before advising consumers and small businesses. In addition to initial training, a few stakeholders felt that continuing education was important since there will likely be changes in processes along the way.
- A few stakeholders felt that Navigators should not only listen to what consumers are looking for, but they should also be able to **effectively communicate the difficult-to-understand intricacies of insurance plans in a clear and concise way**. Further, the Navigator program at large should include entities that can effectively communicate with diverse audiences, including but not limited to:
 - Individuals of different ethnicities and/or language (cultural competency)
 - Individuals from low-income backgrounds
 - Small businesses
- Some stakeholders mentioned the sensitivities around buying health insurance, which requires people to provide personal information, including salary, social security number, and proof of residency. **Therefore, Navigators would need to be trustworthy sources.**
- Consistent with the ACA guidelines for Navigators, a few stakeholders noted that Navigators need to be able to **provide impartial information about the plans to consumers** – not receiving incentives in any way for guidance to a specific plan. In

particular, consumer advocates were adamant about the need for impartiality – ensuring there are no conflicts of interest for those who serve as Navigators.

- Most stakeholders expressed that the **Navigator program needs to include individuals/entities that offer help in a variety of ways – with personal assistance online, over the phone and in-person.** The process needs to be convenient, not cumbersome. There will be varying comfort levels among consumers with technology and comparing plans, so it is important to have options to suit different needs. Going online to buy insurance is not ideal for some individuals. For example, those who are less proficient with technology and have less access to the internet (often those from lower income and/or education backgrounds) may prefer more direct support. Similarly, **urban/suburban and rural businesses may have different navigator assistance preferences.** Urban and suburban businesses may have more advanced technology and thus may be more comfortable with online enrollment.
- The vast majority of stakeholders felt that **support would be necessary both during and after enrollment.** Inevitably, consumers will have questions about their coverage or need to understand how it could be adjusted if they have significant life or business changes, such as:
 - Becoming pregnant and needing health insurance for a future child,
 - Getting or losing a job and understanding how that affects what tax credits they qualify for,
 - Having a major health issue and understanding how their plan covers them, or
 - On the small business side, significant staffing changes.
- Several stakeholders noted that the **Exchange should build on existing networks.** Many consumers are already comfortable working with specific entities around health issues and the Exchange should leverage these existing relationships. For example, many small businesses are used to working with brokers and will continue to want to do so. Similarly, many individuals already have trusted relationships with community health centers and community-based organizations. Stakeholders suggested the Exchange should meet people where they already are.
- Stakeholders volunteered **many different types of organizations** when asked who would be best suited to serve as Navigators, including community organizations, insurance brokers, local nonprofits, local health departments, community health centers, health coalitions or associations, chambers of commerce and labor unions. **Several stakeholders noted that it would be important to have a range of organizations serve as Navigators in order to meet the needs of the diverse audiences.**
 - Most consumer advocates noted that, since there will be such a wide array of organizations serving as Navigators, there should be some sort of **central coordination to create statewide efficiencies and ensure that all are following the same rules.**