

**South Dakota Health Insurance Exchange Task Force
Outreach and Communication Subcommittee
June 21, 2011**

Subcommittee Members Present:

Joan Adam	Kim Malsam-Rysdon	Joseph Sluka
Emily Currey	Bob O'Connell	Susan Sporrer
Cecelia Fire Thunder	Kim Olson	Beverly Wilson
Sarah Folsland	Elaine Roberts	Sam Wilson
Denise Luckhurst	Merle Scheiber	Rita Wishard

Subcommittee Members Absent:

Terry Dosch	Representative Spencer Hawley
Randy Hanson	Doneen Hollingsworth

Kim Malsam-Rysdon gave a brief recap of the charge of the subcommittee. There are a lot of questions about the number of people who will be eligible for the Exchange. The Outreach and Communication subcommittee must be focused on how to communicate with those who are eligible, in particular people who are currently uninsured.

Introduction to Navigators

Merle Scheiber reviewed the federal legislation related to Navigators and indicated that since the federal Department of Health and Human Services (HHS) has not issued any further guidance, a lot is still up in the air. While the federal legislation does not provide a specific definition of Navigators, it does outline the general role of Navigators to provide information, counseling, and enrollment assistance for both the private insurance market and public programs including the Exchange. The federal legislation does require Navigators to demonstrate they have a relationship (or could easily establish a relationship) with entities and individuals likely to be eligible for the Exchange.

Merle also reviewed state statute related to licensure of insurance agents. With some exceptions, SDCL 58-30-143 requires a person selling, soliciting, or negotiating insurance in South Dakota for any line of insurance to be licensed for that line of authority. PPACA does not clearly distinguish between the roles Navigators and producers will play in facilitating exchange enrollment – that is left to states to determine. Merle indicated that the National Association of Insurance Commissioners (NAIC) will likely come out with guidelines for legislation once HHS issues further regulations sometime this summer.

Navigator Models in Other States

Bev Wilson with DSS provided an overview of Navigator models in other states and highlighted a couple of areas that other states are looking at. States are looking at all existing consumer touch points, resources currently available in the state and determining if there are any existing services that can be leveraged or built upon. States are looking at existing state laws to determine the role of a Navigator in comparison to an agent or broker and discussing whether a Navigator should be licensed and who should license them. They are also looking at what training and expertise should be required of a Navigator and who should conduct the training. Finally they are looking at whether different markets and populations require Navigators with different qualifications or skills.

Since there has been little guidance from HHS regarding Navigator, it is difficult for states to begin to develop state-specific guidelines and regulations. Rhode Island, Washington and Indiana have received Level One Establishment Grants. Their approach to the grant application was as an interim funding source

to get to the Request for Proposal process so they can do a detailed gap analysis, starting with an inventory of existing state efforts to ensure coordination.

Maryland and Tennessee are looking at the possibility of a “two type” Navigator Program. For example Maryland is looking at expert Navigators who would have knowledge in both the public and private insurance market and general Navigators who would have general knowledge about the Exchange and could help direct the consumer to the Exchange website or call center for answers. Tennessee is also looking at Medicaid and basic health plan Navigators and private insurance/premium tax credit navigators. Kansas is considering having different types of Navigators for different parts of the state (i.e., using the Farm Bureau for rural areas and agricultural customers). They know insurance agents will be part of the system, but have not yet determined the role. Kansas is also looking at using existing Medicaid eligibility staff stationed in low-income clinics as Navigators.

Other states have talked about only using a “one type” Navigator program with the navigator trained in all aspects of the exchange – both public and private. Massachusetts found that most small employers outsourced human resource needs to a broker so did not require a Navigator.

Senior Health Insurance Information and Education (SHIINE)

Marilyn Kinsman, Director of the Division of Adult Services and Aging in the Department of Social Services provided an overview of the SHIINE program. SHIINE is a state-based program that offers one-on-one counseling and assistance to people on Medicare and their families to understand and take advantage of benefits and programs in Medicare, including prescription drug coverage. DSS receives approximately \$299,000 in federal funding to operate the program and contracts with three agencies to provide training, outreach activities, education, and other services. There are approximately 300 SHIINE volunteers statewide. While there has been some concern expressed as to how SHIINE volunteers function within the state’s regulatory structure for licensing of insurance agents, the Division of Insurance has not substantiated any of the concerns. Marilyn provided a demonstration of the Medicare Plan Finder website for subcommittee members.

Kim Malsam-Rysdon indicated that while the SHIINE model may provide some help when talking about Exchange Navigators, she cautioned that it is not a model that could be replicated for the Exchange. SHIINE volunteers are specifically focused on Medicare and work with those individuals 65 and older. Navigators will have to have a much broader understanding of health care industry (i.e., assistance programs, eligibility requirements, insurance policies, tax premiums) and be able to work with a diverse group of people from lower incomes, those who speak other languages and those who have not purchased health insurance before.

Review of Smart Chart Communication Plan Draft

Emily Currey reviewed the draft communication plan which is designed to help entities make sure communications are effective and reach the intended population(s). Using the results of the insurance survey being conducted, the subcommittee will spend time at the next meeting identifying those populations that need to be targeted for outreach and education efforts regarding the Exchange and how best to reach them using the Smart Chart Communication Plan as a guide.

Committee Discussion

Without specific guidelines and regulations from HHS regarding the Exchange and Navigators, the subcommittee discussed some high-level recommendations for the Navigator system in South Dakota.

- Navigator services will be acquired through an RFP process;
- Navigators must have the ability to communicate with the target populations;

- Navigators must be competent in using technology since one of the main portals into the Exchange will be a web-based system;
- Navigators must receive ongoing, quality training to ensure competency and should be either certified or registered by the Exchange, not state licensed;
- Key performance measures need to be established to assure quality of Navigator services and the attainment of benchmarks;
- The state needs to address potential liability concerns related to services provided by Navigators;
- The state needs to define how Navigators will work outside of the Exchange; and
- The state may want to explore the possibility of multiple levels of Navigators (general vs. specialized).

Next Meeting

The next subcommittee meeting will be July 19th following the Task Force meeting. The contractor conducting the insurance survey will be presenting data from the survey.