



Economic Affairs Interim Committee

63rd Montana Legislature

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Oct. 10, 2013

To: Economic Affairs Committee Members
From: Pat Murdo, Committee Staff
Re: Health Insurance Exchange Update for Navigator/Insurer Panel and Timeline

The opening of the Federally Facilitated Health Insurance Marketplace on Oct. 1 had something to satisfy everyone. For the critics and skeptics, there was the lack of functionality. For the proponents, they cited a lot of interest, which they said helped create the inability of the system to respond to all the interest. The Economic Affairs Committee at its Oct. 22 meeting will have an opportunity to hear from those assigned to help people "navigate" the marketplace or look for health insurance through the marketplace. These people fit into three categories:

- Navigators**, who technically are those people or companies that receive grants from the federal government and undertake the federal and state course work to be certified as navigators. Recipients of navigator grants in Montana are:
 - ▶ **Planned Parenthood**, which received \$295,604 and stated that navigator services would be available by appointment or to customers visiting a Planned Parenthood of Montana health center as well as via a hotline or videoconferencing.
 - ▶ **Montana Primary Care Association, Inc.**, which received \$299,382 and stated that the funds would be used to train staff at 17 affiliated federally qualified community health centers in Montana. These provide primary and preventive health care services to 100,000 Montanans in 20 counties.
 - ▶ **Montana Health Network**, also called Rural Health Development, which received \$143,076 and said it would provide enrollment assistance through member health care providers in rural eastern Montana.

Navigators must submit fingerprints, pass a background check, and take a test after taking 20-30 hours of online federal training and a 2-3 hour online course offered by AD Banker plus a 90-minute webinar offered by the State Auditor's Office. After completing these requirements, the navigator must apply for navigator certification with the State Auditor's Office.

Navigators may not charge for their services or receive commissions or recommend specific insurance products.

- Certified Assistance Counselors (CACs)**, who have completed federal and state training and been certified by the State Auditor's Office. CACs may not recommend specific insurance products. They are not paid by the Exchange or federal grants and only offer enrollment assistance, generally because they work for medical providers, such as hospitals, or community groups. A certified application counselor must complete 5 hours of federal online training, an online course offered by AD Banker, and two 90-

minute webinars offered by the State Auditor's Office. After completing these requirements, the person must apply for CAC certification to the State Auditor's Office before being certified.

- **Licensed health insurance brokers and agents**, who have registered with the federally facilitated exchange. These are called Certified Exchange Producers or CEPS. The Center for Consumer Information and Insurance Oversight, the federal agency overseeing the health insurance exchanges or marketplaces, says an insurance broker or agent may help people access the marketplace in one of two ways:
 - ▶ through the insurance company's own website (or paper documentation) or
 - ▶ through the federally facilitated marketplace.

Possible questions for panelists:

Based on the experience to date, whether you are a navigator, certified assistance counselor, or health insurance broker or agent:

- ▶ What was your experience with the education process at the federal level and the state level for becoming certified or getting the required education?
- ▶ What questions have most people been asking in relation to the marketplace and to health insurance?
- ▶ How much difficulty have you had in enrolling or reviewing information on the marketplace and why do you think that is?
- ▶ For the insurance brokers and agents, are you comfortable with the process of getting commissions if you help a customer sign up through the marketplace?

Timeline regarding the Health Insurance Exchanges or Marketplaces:

Oct. 1, 2013	The health insurance marketplace was to "go live" so that people looking for health insurance can compare insurance policies available through the marketplace, called Qualified Health Plans or QHPs. A calculator also was to be available to help customers determine if they are eligible for subsidies, and if so what type of subsidies (tax credits for premium assistance and for those whose modified adjusted gross income puts their family income between 100% and 250% of the federal poverty level there also are cost-sharing reductions available).
Nov. 1, 2013	Small businesses may be able to buy insurance on the exchange for their employees.
November 2013	Sometime in November the marketplace website will be able to accept payment for insurance.
Dec. 15, 2013	The last day to apply for health insurance through the marketplace with a start date of Jan. 1, 2014.
Jan. 1, 2014	Insurance coverage is to begin for those who have bought insurance on the marketplace.
March 31, 2014	Open enrollment ends for the first year. A person who has bought insurance by March 31, 2014, will not be penalized under the individual mandate to have insurance as provided in the Affordable Care Act (if not exempt from having to purchase insurance). A person with a "qualifying event" -- loss of employer coverage or marriage or adoption, etc. -- can buy a health insurance policy on the exchange for the 2014 year after this date.
Oct. 1, 2014	Enrollment begins for insurance coverage in the 2015 plan year.