

Navigator Stakeholder Group

facilitated by Christina Wessel

- **Date:** January 15, 2015
- **Building:** 81 7th Street, Suite 300
- **Time:** 10:00 to 11:30 am
- **Participants:** Christina Wessel (MNSure), David Van Sant (MNSure), Jackie Edison (MNSure), Alison Griffin (MNSure), Fred Ndip (MNSure), Rebecca Lozano (Portico Healthnet), Maureen O'Connell (Health Access MN), Sandee Lorentz (Native American Community Clinic), Marcel Lynn (North Point), Ibrahim Hassan (Somali Health Solutions), Ruth Sherman (Community Resource Connections), Lauren Piper (Minnesota AIDS Project), Ralonda Mason (Mid-Minnesota Legal Aid), Larry More (ThreeRivers Community Action)

Topics

Program Policy Roadmap and Strategies

Jackie Edison

The MNSure board is responsible for developing permanent policies and procedures for the navigator program. MNSure administrative rules for all consumer assistance programs are combined (navigators, Certified Application Counselors and brokers/agents), so staff is reviewing them as a whole. It is anticipated that staff will present a recommendation for permanent policies and procedures for these programs to the MNSure board in March.

MNSure staff will gather feedback from the Stakeholder Groups to inform recommendations on specific topics during February stakeholder meetings. All stakeholders will also have the opportunity to provide feedback as part of the formal rulemaking process.

Staff shared a [Roadmap for Consumer Assistance Program \(CAP\) Review and Development](#) and a [Consumer Assistance Program Policies and Procedures Outline](#) of potential topics for rule changes. The topics marked with an asterisk will be discussed in detail during the February stakeholder meetings.

The outcome of this process will include a policy statement for approval by the MNSure board, formal proposed rules, and the development of a policy and procedures manual for the navigator, CAC and broker programs. Changes to the programs as a result of this process will not be implemented until July 2016.

In response to a question regarding MNSure's authority to do rulemaking for the navigator program, MNSure staff responded that Minnesota statute gives MNSure the authority to revise rules for the program.

Draft FY 2015 Outreach and Enrollment Grant Program Policy Statement

Christina Wessel

A proposed [FY 2016 Navigator Outreach and Enrollment Grant Program policy statement](#) was presented to participants (an updated version of the statement is [available online](#) to the public). After taking accepting public input, a final statement will be presented to MNSure's Board on February 18 for approval.

The FY 2016 grant program is slated to start July 1, 2015 and end June 30, 2016. The total amount to be awarded is \$4 million. The RFP is expected to be released on March 2, with proposals due April 6. The policy statement reflects a continued focus on serving consumers that have barriers to enrollment and building up networks of skilled navigator organizations. However, MNSure also recognizes that navigators are currently serving many people that they hadn't expected. Grant program aims to support building a long-term infrastructure of skilled navigator organizations, while also funding short-term needs for outreach and enrollment. One gap from last year's grant program that is addressed this year is a space for organizations that do not have strong enrollment capacity, but can make important contributions in outreach and education.

The initial draft proposes four areas of funding (the [updated draft online](#) reflects revisions to this initial proposal):

1. Outreach and Enrollment Regional Pilots, up to 3 grants of \$500,000 each. These grantees would be expected to cover a large region and, if based in the metro, must extend into Greater Minnesota. One agency would coordinate, but multiple agencies would get funding. Outreach and enrollment services are critical. A high level of coordination with MNSure outreach work would be expected. In this category, building geographic networks is the focus.
2. Outreach and Enrollment Coalitions, up to 4 grants of \$250,000 each. These grants would have less of a focus on geographic coverage and more of a focus on the ability to reach populations of interest. However, these grantees would be expected to operate year-round and closely coordinate with MNSure on outreach work.
3. Outreach and Enrollment Mid-level Grants, up to 5 grants of \$100,000 each. These grants are for organizations that focus on populations facing barriers and would support

outreach and enrollment work, with an emphasis on open enrollment. A minimal level of coordination with MNSure would be expected.

4. Outreach and Education Mini Grants, up to 20 grants of \$50,000 each. These grants would support specific outreach activities which connect specific communities to enrollment, focusing on the open enrollment period. An organization could receive multiple grants in this category if they have proposals for serving different populations or reaching different geographic areas.

Organizations can apply to multiple funding areas but would only receive a grant in one area.

Participants asked when grantees would know whether they had received a grant. MNSure anticipates that we will identify proposals moving to the third stage (financial review and contract negotiation) by late May.

Participants also asked where is the program going long-term? This question will be the focus of meetings in February around potential rule changes. The grant program is intended to build long-term enrollment capacity around the state. MNSure recognizes that the role of navigators may evolve over time. In the future we may need somewhat fewer, but more highly skilled navigators that are available year-round. However, it is also important to retain the person-to-person connections that are so important in reaching the uninsured.

Stakeholders raised the concern that proposed changes to the grant program might not be sustainable and may not provide the kind of stability that the program needs. Some argued that there will not be a drop in need for navigator services going forward because of the complexities of the health insurance law, family circumstances and the marketplace.

Stakeholders were also concerned about the emphasis on creating networks to get geographic coverage. Both metro and Greater Minnesota participants recommended that MNSure should focus on supporting organizations that have strong community connections. The requirement in the first funding area to have 50 percent of their work take place outside the seven-county metro area is counter intuitive to the idea of creating a functioning regional network. It would split up the coordination effort. Those in Greater Minnesota also pointed out that it is not effective for an organization that primarily serves the metro area to come in and serve an outstate area. Some organizations are statewide in name, but not practice.

Another concern was that there is not enough focus on enrollment assistance as opposed to funding education and outreach. One suggested that the \$1 million in Mini Grants that support education and outreach should not be part of the \$4 million grant budget, but should come from other areas of MNSure's budget. Frustration was shared about MNSure's current grassroots

contract, suggesting that it was duplicative and methods were sometimes inappropriate for Greater Minnesota – MNSure should do more listening and less pushing. Stakeholders asked whether MNSure would be doing a similar grassroots outreach contract for next open enrollment. Staff responded that it had not been decided.

MNSure was also urged to focus on building enrollment capacity. Not enough organizations are focusing on enrollment assistance. Organizations need long term commitment as grantees because of the skills, expertise and capacity required to be expert navigators that can assist a consumer through the entire process. An organization can't just pick this up for a year and be effective. MNSure staff mentioned the potential need for different levels of navigators. Some stakeholder members agreed that there may need to be different levels. Many times “tough” cases are referred to agencies that have more enrollment assistance experience.

Finally, stakeholders said data should be made available on what is working and not work from MNSure's standpoint on past and current Outreach and Enrollment grants. Current grantees are not getting sufficient feedback from MNSure on their performance. Are they meeting expectations?

Discussion of “Portal” Options for 2016 Open Enrollment

David Van Sant

The federal government recently awarded MNSure a grant adjustment of \$34 million. One of the projects identified as a potential priority for this funding is a consumer assistance “portal.” Staff presented proposed [consumer assistance partner portal options](#). The goal is to identify an option that could be in place by next open enrollment, expected to start October 1, 2015. The reality is that we will not have a fully functioning portal in place by then.

The proposal includes four options, but based on feedback from last week's Joint Stakeholder meeting, the most realistic option to have in place by October 2015 is Option Two. This option would maintain current certification process and online directory, but would implement system access that would include account creation, view-only dashboard and an improved case association process. The portal would be based on the current county worker portal, but would be view-only. It was reported that consensus from the Joint Stakeholder meeting was to focus on providing tools that will allow the assister to provide improved customer service, rather than improving outreach tools (like an improved online directory).

Participants agreed with the Joint Stakeholder consensus that the focus should be on consumer experience from account creation through the enrollment process.

They also recommended other important features that would improve the navigator (and consumer) experience:

- Allow remote enrollment assistance.
- Provide capability for navigators to answer clients' questions through the system.
- Provide ability for navigators to be able to look up clients' information to respond to routine case status questions.
- Provide ability for a consumer to print out completed enrollment application.
- Include webinars/tutorial for clients and navigators.
- Make sure whatever you do is done well.

There are also changes to the application that would improve the customer experience. For example, improving the account creation/identity proofing process.