

NPAF National Patient Advocate Foundation
The Patient's Voice | since 1996

Implication of the 2012 Supreme Court Ruling Upholding the Affordable Care Act on Patient Navigation

A Presentation to the Georgia Society of Clinical Oncology

September 8, 2012

National Patient Advocate Foundation
Established 1996


Mission Statement

National Patient Advocate Foundation (NPAF) is a national, non-profit organization whose mission is to create avenues of improved patient access to health care through public policy reform at the state and federal levels. NPAF is dedicated to working with the Administration, Congress, and all levels of government to overcome challenges and find solutions that will allow for affordable, high-quality health care for all.

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The Navigator Program

The Patient Protection and Affordable Care Act requires state health insurance exchanges to establish a Navigator program




Navigators will act as consultants to potential and current consumers of Qualified Health Plans (QHPs) within the exchanges

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The Navigator Program

Responsibilities

- Informs individuals and small employers about QHP coverage options in the Exchange
- Facilitates enrollment
 - This assistance includes initiating the enrollment process
- Outreach and education efforts on rights and responsibilities
- Assistance in coverage application



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The Navigator Program

Responsibilities (Cont'd)

Refers consumers to any available assistance such as premium credits and cost sharing assistance

- 80% of individuals purchasing through the exchange in 2019 will receive subsidies

Make appropriate cultural and linguistic resources available to those who need them

- New enrollees will be more racially diverse than the current privately insured

Provide referrals to the applicable office for any grievance, complaint or question about a QHP

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The Navigator Program

Benefits to Consumers

Helps exchanges to truly be a 'one stop shop' for health plans

Will help coordinate enrollment between various programs

The potential of Navigator programs has been demonstrated in other settings

- Oncology
- Neighborhood focused programs
- Navigator programs have proven to lead to enhanced clinical outcomes through increased access



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The Navigator Program Eligibility

Entities emphasized to perform Navigator functions include

- Trade, industry, and professional associations
- Commercial fishing industry, ranching, and farming organizations
- Community and consumer-focused nonprofit groups
- Chambers of commerce, Unions, and resource partners of the Small Business Administration
- Licensed agents and brokers (Cannot be paid by the exchange and insurers simultaneously)
- Any group that are capable of fulfilling those duties

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The Navigator Program Eligibility

This a diverse list, but there is good reason

Each has their own constituencies and specialties – Diversity of perspective can be beneficial

i.e. Lay Navigators vs. clinical approach



What's Important:

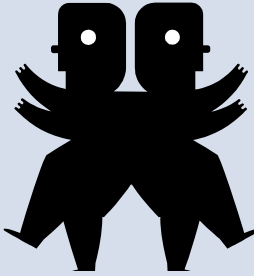
- Ability to perform tasks
- Have existing relationships or ability to form them with exchange consumers

Skills and potential for outreach are more important than degree

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The Navigator Program
Eligibility

Navigators cannot have a conflict of interest



Maintains the integrity of the program

Ensures patients receive the advice that is best for them

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The Navigator Program
Eligibility

Navigator Conflicts of Interest

Navigators cannot be health insurers

Navigators cannot receive compensation (financial or otherwise) from insurers for their QHP enrollment services

- Includes any subsidiary or group that lobbies on an insurer's behalf
- Applies to all staff of a Navigator organization
- Should be strong oversight of this

Exchanges can establish additional standards

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Moving the Programs Forward

Exchanges must first select who will act as Navigators

Determine which type of entities are preferred

Select the Navigators themselves

Ensure there is a sufficient number to meet demand

Select in a timely manner to allow time for training

Exchanges must then draw up contractual agreements



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Moving the Programs Forward

Exchanges must establish training programs, and competency exams to demonstrate

- Knowledge on QHP eligibility
- Knowledge of enrollment procedure
- Knowledge of consumer assistance opportunities such as subsidies, tax credits, and local programs
- Knowledge of any privacy considerations
- Knowledge of Medicaid and CHIP programs and eligibility
 - There will be shifting between the programs



HHS will release its own training model standards and push for ongoing training in some form

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Moving the Programs Forward



Exchanges must establish a Funding Mechanism

PPACA prohibits use of federal funding for the Navigator program with the exception of federal administrative matching for Medicaid and CHIP - Maximizing federal Medicaid funding would help offset costs

HHS did not define a minimum funding level due to the eclectic nature of the states

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Moving the Programs Forward

Exchanges need to establish their own funding mechanism to keep the Navigator program sustainable

Option 1: Grants – Public and Private

- Block grants?
- Performance-based add-on payments?
- Grants are not particularly stable especially in tough economic times
- Grants are also administratively burdensome

Option 2: User fees – Exchanges should be self-sustaining

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Moving the Programs Forward

Exchanges must establish an oversight process and method for consumers to submit complaints

Design specific measurable metrics for assessment

Finally, exchanges must determine when Navigators will officially become operational and available



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How the Supreme Court Decision Impacts the Role of Navigators



The Supreme Court ruling did not have the bombshell impact many pundits predicted

The ruling left most of the law intact, including any direct mention of exchanges and Navigators

However, there remain tangential effects from other portions of the ruling that will influence the job of Navigators


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How the Supreme Court Decision Impacts the Role of Navigators

The Supreme Court ruling made Medicaid Expansion optional


This will put different levels of burden on Navigators in different states to

- 1) Know who is eligible for what programs
- 2) Know what manners of assistance or coverage alternatives are available to people in those states that reject expansion



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How the Supreme Court Decision Impacts the Role of Navigators



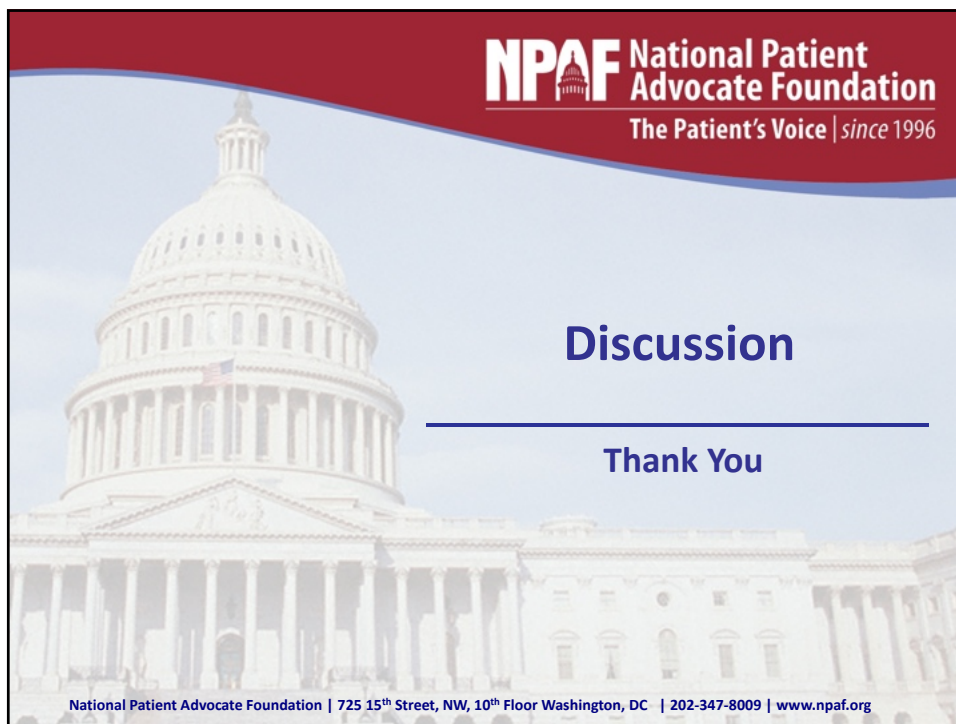
- 1) Know who is eligible for what programs

Is Medicaid the appropriate coverage for a consumer? Is a QHP possible?
- 2) Know what manners of assistance or coverage alternatives are available to people in those states that reject expansion

0-----100% FPL -----133% FPL -----400% FPL

If Medicaid doesn't cover 100-133% of FPL through the expansion, the consumer may be eligible for a subsidy

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Discussion

Thank You

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