

Centers for Medicare & Medicaid Services  
Webinar: Health Insurance Marketplace Navigators and Certified Application Counselors  
(CACs) Kickoff Event  
Friday, October 22, 2021  
2:00 P.M. ET

Webinar link:

[https://cms.zoomgov.com/rec/share/5Fp\\_LbK\\_IYnuzXsN8vTYxDBcfzaOMBGTAm8hcIzVQL-RvPf9YfWCX96dcNroSuLa.UBUI-xOipUq4W6CW](https://cms.zoomgov.com/rec/share/5Fp_LbK_IYnuzXsN8vTYxDBcfzaOMBGTAm8hcIzVQL-RvPf9YfWCX96dcNroSuLa.UBUI-xOipUq4W6CW)

>> BETH LYNK: Hello and welcome. We are going to get started very shortly. We are waiting for everyone to join us in the room here. We will get started in about one minute. (Standing by).

Welcome, as folks are joining. We are going to get started in one moment. As folks are joining I would note that we are going to be recording this call so you will see a notice pop up that we are recording. If you have any concerns about that, you can feel free to disconnect or put a note in the chat to follow up with our team. But we are going to get started in one moment.

>> OPERATOR: Recording in progress.

>> BETH LYNK: Welcome, everyone. And thank you so much for joining us for this kickoff for the 9th marketplace open enrollment for the Navigator network. We are super excited to have everyone here today. As was noted on the call we are recording this. And for anyone who needs closed captioning support you can see a link to the closed caption resources in the chat and we welcome folks to utilize that.

The other thing is we will have an opportunity for questions and answers at the end of this call. And we invite folks to use the Q&A feature in the Zoom to ask those questions.

So first and foremost, thank you so much for joining us here today for this kickoff of the Navigator program for marketplace open enrollment. My name is Beth Lynk, I'm the director of the office of communications here at CMS and we are excited to talk about the investment by the Biden Harris administration in getting folks covered in this open enrollment period. Some of the elements of our robust campaign and outreach efforts. And some of the resources that are available to people and consumers across the country to get help and to take advantage of the record-low prices thanks to the American rescue plan. To kick us off I'm going to turn it to our fearless leader and CMS administrate Chiquita to give off this great presentation.

>> CHIQUITA BROOKS-LaSURE: Thanks, Beth. Good afternoon if you're on the east coast. Good morning if you're further to the west. I'm the CMS administrator, Chiquita Brooks-LaSure, and it's a thrill to be on the phone with you today. As I think about the last couple of years and the beginning of the affordable care act and where we have come. And it is because of so many of the people -- so many of you, the people on this call. And we are just at record levels of Navigator and certified counselor and assistants to getting people covered in the affordable care Act. So thank you, thank you, for joining us today, for your past support and your continuing support of our collective goal to breakdown barriers to health care and

increasing access to the affordable coverage options for the under insured or the uninsured.

When the president ran, he promised to build on the affordable care act and bring down the cost of health care and it's clear president Biden has delivered. Thanks to the affordable care act and the American rescue plan and the 21 special enrollment period he opened earlier this year, 2.8 million people gained access to affordable health care on [healthcare.gov](https://www.healthcare.gov) and state-based marketplaces. With the gains made during the special enrollment period there are now a record-breaking 12.2 million people enrolled in the federal and state marketplaces.

So many of you played a role in this progress. Of course we still have more work to do. And I truly appreciate you joining us to help enroll as many people as possible in health coverage during the open enrollment period that begins on November 1st. I'm excited for this opportunity today to share with you part of my strategic vision of a health care system and our core messages for this upcoming open enrollment period. I'm honored to lead an organization that is at the forefront not only in the fight against COVID-19, but one that also works tirelessly to ensure that the more than 140 million people with coverage under the three Ms, Medicare, Medicaid and CHIP and marketplace coverage, know that they will be able to get the care they will need and the care they deserve.

Our vision at CMS is to serve the public as a trusted partner and steward dedicating to advancing health equity, expanding coverage, and improving health outcomes.

We will achieve this vision through dedicated work of thousands of individuals and organizations like you, and by improving people's lives through public policy aimed at making the U.S. health care system work better for everyone.

In the short time that I've been CMS administrator, we have already focused our efforts on improving health equity and access to coverage to move us closer to our destination of helping ensure better health, better health care and better health coverage for all people.

But we cannot do this alone and we need you. Every one of you. Our trusted partners, our health insurance navigators and certified application counselors to continue the momentum that's why we invited you here today to integrate you and engage you in this strategic vision to continue to provide quality health care to individuals and families through the marketplaces.

I can promise you that our team of more than 6,000 people will work tirelessly with you to enroll under insured, uninsured, and those with health disparities into comprehensive health care that is more equitable, accessible and more affordable. Our core message for this year's open enrollment are, first, that we have a new law thanks to the American rescue plan, quality health coverage is more affordable and accessible than ever. Two, we have lower prices. 4 and 5 customers were able to find health coverage for \$10 or less per month. And three, more people qualify. So whether you're uninsured, don't get insurance through your job or looking to find health coverage at a lower cost, this open enrollment period is for you.

With these core messages at the forefront of what we do, I'm so hopeful that we can enroll even more people in the health insurance marketplace than we have before and continue to break enrollment records while reaching people in the most need of care and those that have the most barriers to care.

This is our opportunity to break down barriers to health care and help provide access to affordable quality and accessible health care. Health care is a right, not a privilege. Let me end just as I began by saying thank you. You are all champions for coverage and your work is making a real difference in people's lives.

Dr. King reminded us that injustice in health is the most inhuman form of inequality. That's

because health care is more about mending bones and healing bodies. It's about giving people access to peace of mind to economic security to a brighter future. I want to convey my thanks to the work you do to help consumers obtain the security of health insurance. Without you we couldn't be where we are today. And with that I say thank you. I'm now going to turn it back over to Beth who will introduce our next speaker.

>> BETH LYNK: Thank you so much and thank you for joining us. I'm going to turn the call now to Gian Johnson who folks very likely know who runs the Navigator program. Gian?

>> GIAN JOHNSON: Thank you, Beth, welcome everyone and thank you for joining us. I'm Gian Johnson here with CMS. My team runs the Navigator program as well as the certified application counselor program. I've been working on the program the Navigator program since its inception in 2013. Like I are you I'm very excited for a nice open enrollment that's coming up in a matter of days. And we are so excited to share with you kind of a deep dive into what we are painting around outreach and education.

So to really the meat of the presentation and why I know you all are here today, I'm going to turn it back over to Beth Lynk who is going to talk about previewing our enroll men campaign as well as our partner engagement plan that we have coming up. Beth?

>> BETH LYNK: Thank you so much, Gian. And I see in the chat and love to see it looks like we have got Arizona on the line, we have San Antonio, Texas, we have Florida. Great to see that our presentation from all the cross the country. I do want to note I'm seeing there are some folk whose are having audio issues. That has since been resolved but if you are still having issues I invite folks to file in. It seems to be solving some of these issues for folks, if you are.

So just to reiterate what the administrator said and Gian, we are really excited to be with you and preview this upcoming open enrollment period and outreach engagement activitys we have ahead. Let me just say that our approach to this open enroll mend period is anchored in the administrators vision and orientation and direction to the CMS team, and that is that health equity should be central to the work that we are doing and should be the first question we are asking, not the last.

So what that is meant for open enrollment period is we know barriers to access and coverage are not equal. So you'll see that expressed through how we have developed our plans of outreach and our engagement.

I want to start us out and I'm going to share the screen here with a few kind of basic top lines about the open enrollment period. As everyone knows open enrollment begins on November 1st so we are about a week out from the start of open enrollment. The Biden Harris administration extended it to have a month to end January 15th. I'm going to talk about how we are breaking up that open enrollment period in terms of our strategies for outreach and engagement in a bit but that's the full 10-week open enrollment period that folks will have to get covered.

We are engaging folks across the country and a lot of what the presentation today is going to focus on is the 33 FFM states, the states that use [healthcare.gov](https://www.healthcare.gov) for sign up and engagement but there's a number of states in the remaining 17 that are served by their own state-run marketplaces.

And I did want to note that anyone is eligible if you are -- if you have lawfully present status, citizenship should not be a barrier to accessing health coverage and want to reiterate that. Folks are eligible for coverage if you are uninsured, if you don't get insurance through your

job, but in some cases if you are looking for a lower cost plan folks can explore their options on [healthcare.gov](https://www.healthcare.gov) and you'll see that expressed through our outreach. Reiterating those points is something that we saw in our message research is really helpful for consumers and we invite folks to do that.

I'm going to let -- we are going to have Ben walker who is the lead for [healthcare.gov](https://www.healthcare.gov) talk through how folks can enroll a little bit more. We will share more on that shortly. So as the administrator mentioned we are really going to be emphasizing three core messages through the open enrollment period. And these will be echoed in the advertising campaign. Those bolded lines are or tag line for the advertising campaign. So we have a new law, the prices are lower thanks to the American rescue plan, and more people qualify. We -- these were messages that were tested based off of what performed well during the special enrollment period, and what we have been hearing from consumers year over year as well.

And so reiterating that things have changed, there's a new law, and [healthcare.gov](https://www.healthcare.gov) invites a second look is always helpful. Affordability, core message, in terms of persuasion and engaging folks to sign up for coverage. Really critical. Again, just illustrating that point that more people qualify for affordable plans than of before.

And that's because of some of the advancements under the American rescue plan.

So I'm going to talk about some of the upcoming phases of engagement and how we are orienting around the open enrollment period at large. I do want to note on that call are navigators and certified application counselors but you're not alone in terms of this outreach. We are also and have reinvigorated our champions for coverage program where we have about 2,000 local and national organizations across the country that are eager to engage their community members and partners in getting them connected to coverage as well.

So we are elevating the Navigator resource and the local help that's available for that network so you may be hearing from those champions for coverage as well.

In addition, we are also engaging with our partners across government and across HHS to plan around different ways to encourage folks to sign up for coverage and to reach specific populations. I'll talk a little bit more about that but just know this is a whole of government investment on the part of the Biden Harris administration and we are engaging and expressing that through our HHS team and with others across government.

So let me get into the campaign. So phase one we are in it right now, this is pre- open enrollment. We are really trying to raise awareness among consumers that open enrollment is coming, preparing stakeholders about open enrollment and engage local and national media around the open enrollment period. We want to remind people that open enrollment starts November 1st. And that we are really invested in the most robust open enrollment outreach campaign we have ever done. A couple key moments we have already started our get ready message via our ad campaign that started October 15th. We are engaging all of you here and we will be kicking off with the champions for coverage network on Monday. We will begin our radio media tours next week. Then it's come up fast and furiously, we are going to move into phase two. Phase two is really our kind of the bulk of really driving people towards that December 15th deadline to sign up for coverage that will start January 1st.

Our focus in this phase of the campaign is going to be on the historically under and uninsured communities, and we will have a number of opportunities which I'll detail on the next slide to engage those specific groups in -- those specific communities in elevating this opportunity for coverage and we invite all of you to think about specific events that track into

those weeks of action.

And we are going to provide for you talking points related to these different communities as well as potential outreach suggestions and opportunities to collaborate.

Our message themes during this period are going to be signing up by December 15th, elevating affordability and lower prices, and really crystalizing those lower prices by elevating the stories of real people. Chris Koepke is going to talk more about what that is going to look like in the ads but just know lifting up real trusted voices, real people, is central to our work. And a core part of the campaign.

A couple key moments, we will be launching on November 1st, we are going to be doing weekly partner engagement calls on messages of the week, key data, key highlights every Thursday, and then we'll also be releasing data snapshots on Thursdays, as well. And then we'll have a number of weeks of action.

So we are, again, focusing on those historically un and underinsured communities and we will be having a series of weeks of action that we invite folks to participate in.

As you'll see we are kind of -- there's a number of communities that will be engaged multiple communities that will be engaged week over week but we really do want to collaborate with you, want to lift up the events that you already have planned and so we'll look forward to working with you on all of that.

The third phase of the campaign is going to be our final push. As I mentioned at the top, we are going to be -- we extended the open enrollment period by four weeks so it will end January 15th. Anyone who signs up during this final period will get coverage starting February 1st so this is going to be a last-chance message signing up for coverage starting February 1st. Don't miss out. And really continuing to push that affordable message. We will continue our weekly data,

Snapshots and there will be a number of weeks of action that we invite collaboration with all of you on that as well. With that I'll turn it over to Chris Koepke on the advertising campaign. Chris, I think you're on mute.

>> CHRISTOPHER KOEPKE: At least I remembered to turn the camera on. Hello, everyone. I want to say that my responsibility here is the advertising campaign. And I'm extremely excited because I realized that advertising can play a role to get people coverage who are looking for coverage, people who have not had coverage for a long time or in a short period of time. But I also greatly realize that the amount of outreach that's needed in the community where people actually live is incredibly valuable and important part of finding people coverage. When Beth mentioned seeing people and everybody started throwing in their town where they're from into the chat, it really warms my heart and got me excited to do my job so thank you so much.

I'm going to go over a little bit of the marketing and advertising quickly before I pass it onto other folks. The goal and the strategy of the advertising is to motivate uninsured people to go to [healthcare.gov](https://healthcare.gov) and to get insurance. We will also in some cases try to motivate people to find local help and find people in the communities that can help them or direct them to some navigators. There's another piece which is currently in release. I heard the administrator talking about 1.2 million people. We know if they come back every year and compare plans and look for plans in what we call actively shop, we know two things: A, they can find a better deal t plans change every year and they can find a better deal for themselves by doing that so it's important for their own personal finances but also that they are more likely to stay

active, pay their plan premiums and stay active in the marketplace throughout the year which is just good for their own health, their own finances, as well as for the marketplace.

Our strategy is to drive home that message that Beth was just talking about. New law, lower prices, more people qualify. And that's due to the -- one of the first laws this year which did make APT seem more valuable for a lot more people as well as CSR as well. We are going to use testimonials as Beth said. We know from research testimonials are important, we are going to have special advertising to African Americans, Vietnamese, Tagalog, Cantonese, mandarin, Korean. We are going to have advertising that enforces itself across all these groups and in language when necessary. We are going to promote the navigators for people who want to seek that out. We use traditional -- a mix of traditional advertising, television, radio, what have you, and digital outreach, ads on Facebook, YouTube, and what have you. We also have a direct response. Direct response is e-mail, texting, auto dial directly to people who want to us reach out to them.

We have research groups and this drives a lot of what we choose to do. So at the end of the SEP we knew of all the uninsured in this country now there was a new law with lower prices. We realized we can build on that number and we want to. The other thing and we have seen this for the entire time since the affordable care act has passed that people do want health insurance and do want to be covered. 80% want coverage but there's some beliefs that just because they want it doesn't mean they're take the action to move forward on it. There's beliefs that work against taking that action such as 56% report they can find health care even without coverage. And that's still 50% believe that there's an affordable plan that's available to them at [healthcare.gov](http://healthcare.gov) but that means there's another 50% that still doesn't understand that there's affordability for them.

And we also do a lot of focus groups, that's from surveys. We know there are testimonials that came out in the focus groups. They really said they want to see diversity. They want to see somebody that looks like them, their neighbors, and friends so they understand this is for everyone. When we just say the \$10 amount a lot of people get skeptical and say that is true but what about me? So by having testimonials that people are paying different amounts they can see oh there are different amounts and you can get coverage.

Because they do think when we only say low cost there's a segment of people who think that means the plans aren't that good.

So we also talk a lot about the fact that the plans cover prescription drugs, hospitalizations, doctor visits, preventive care. When people hear that they go oh, it is a good plan. So that speaks to the messaging then. Now open. People don't know when open enrollment is. You think they would but they don't and they expect to be told every year. Now we are open. The affordability messages we talked about, we don't say it's affordable because when the government says something is affordable, people go is that boloney so we have to give them real examples. Deadline messages are key. People, even myself, I put things off to the last minute. That's normal. We see enrollment sky contact the last four days and we drive the messages to those people and they get a lot of interaction to remind people to come back. Coverage is important, helps you stay healthy. The plans are comprehensive, the doctor visits and everything I mentioned before.

So just a little bit of our advertising strategy. We start broad. We have national multi-cultural outreach on national television broadcast stations. Then digitally we are able to narrow that down to the specific 33 states and then the local markets where we see higher

percentage of people who could get APTC who are uninsured in different language groups or different ethnic groups. We really double down with additional outreach and advertising in those markets. And even that includes local markets and local towns.

This is an example of an ad. So we are working on this. It will be finished in the next few days. These are people who are testimonials, these people are really covered, these are their stories, and we are building it out. We shall building out several like this, this is just one. We have a couple who is pregnant, they're really excited they're able to find a plan for \$29. We have another gentleman that work part-time, he has a plan for zero dollars. We have a family who is excited to have a plan for \$179. We have another woman who found a plan for \$52. We are making this with a variety -- diverse set of people. We are doing it in Spanish as well the nice things about the Spanish one when they talk about how much they pay we will have it on the screen as well. We will mention they are real people to drive home the point that they are telling their story.

We did look at a variety of forms of testimonial and in the end people want to know the price. So we call it the price point testimonial and we have the price for the people fairly often.

We are doing it in Spanish. In AAPI languages we are doing something slightly different than testimonials to start. We are pretty much speaking to the importance of family and to importance of people's health, and with the four out of five can find a plan for under \$10 a month or less which by the way during SEP in our digital ads, those ads got a lot of interaction in our testing. That testing does extremely well. So we are doubling down on that message here. We are providing places where they can go where they can get in-language health. As you probably know the 800 line does have translation. We will try to work in some Navigator promotion where people are able to help in had Vietnamese, in various Chinese languages and Korean as it is available to target the ads that closely in these neighborhoods. The AAPI outreach will includes posters in traditional grocery stores, local out of home in neighborhoods as well as digital and there will be video ads on TV stations that are in language.

By the way, this is the first time we have done AAPI outreach to this extent in the history of [healthcare.gov](https://www.healthcare.gov). And this is just an example of what it would look like in some digital ads we are doing n digital ads, Facebook has been a good partner with us. Especially getting people's information to contact them. These are just a handful of ads that we will be running during open enrollment. There will be many, many different ones as we compare how they are doing. We target them in terms of diverse audiences and we also as an ad gets tired and doesn't get good interaction we pop in another one. We have something we call the digital lake with dozens of ads that we pull out of with different messaging. Four out of five, there's a new law you can get covered. While I was able to do it, it's not that hard, some of the major messages that you were pulling out in these ads. So thank you for the opportunity to talk to you today and mostly for seeing all the towns that you're working in in the chat. I cannot double down on how much that warm mice heart and excited me. I'm happy to turn this over to the guy who I've been -- to the guy who I consider the expert on [healthcare.gov](https://www.healthcare.gov) and all things enrollment and how this whole tool and website works and program works. And that is Ben walker. Thank you, very much. Ben?

>> BEN WALKER: Thanks, Chris. Every time I hear what we have planned for outreach and marketing this year I get excited. I saw one of those Facebook ads yesterday and it got my fired up. Hopefully those of you out in field have seen those as well. I'm Ben walker. I'm preparing the process for open enrollment here across all the teams at CMS. It's great to be

here with all of you. It's exciting to feel all the positive energy coming through the Zoom today. You've heard from the administrator, our communications and marketing team. I'm going to spend a few minutes talking about how we are thinking about open enrollment in terms of our core operations and technology.

So to go back to the basics for just a moment. Open enrollment starts Monday November 1st and extends through January 15th. As Beth noted earlier, December 15th is still an incredibly important date because that's the cutoff for most consumers to make a plan selection for January 1st coverage, full year coverage which we know many consumers want. You should expect to see and hear a lot of marketing and communications that highlights that December 15th deadline. We are going to kneel your help making sure that folks understand the importance of that deadline and avoid kind of the confusion between December 15th and January 15th that could be possible. After December 15th you'll see the messaging, website, shift to January 15th. And in general and that was noted as well consumers making plan selections during that final month will have coverage starting February 1st.

Consistent with last year we will be using 5:00 a.m. eastern time as our deadline. So it's 5:00 a.m. December 16th. And January 15th so that becomes 5:00 a.m. January 16th. That ensures they have the whole final days to complete that process. That 5:00 a.m. represents midnight in our Alaska and Hawaii regions. During open enrollment we are focused on getting new folks in and getting as many existing enrollees as possible to come back. All the great work you did during 2021 we have more current enrollees ever and we will continue to stress to them with your help that it's important for them to actively reenroll and make sure they have the right plan based on their needs.

We will have continued to have an auto reenrollment process for current enrollees who don't make an active plan selection for January 1st to make sure they have continuous coverage. What this year has been around for us is making enhanced and expanded text credit under the American rescue plan available, getting the 2021 SEP going. When you get all consumers to come in they can get what they need and they can get on with their days and nights and everything else they have going on in their busy lives.

Another focus area this year has been in making sure we are ready for more traffic so we anticipate that because of this success of the 2021 SEP, the enhanced financial assistance available and the investments we are making together we may end up with a lot more consumers at our virtual door this year so we spent a lot of time in testing and solidifying our operations to get ready to the higher demand that we think is out there. For those familiar with the look and feel of our streamline application and plan and compare tools, those will largely look and feel the same as last year so you don't to have worry about needing to learn something new at the same time as you're dealing with all in new demand.

Now when we think about our ingredients for success, getting the consumers to the door and with the right help is the first step. Making sure the operations in technology is the second step. A third critical step is making sure we have plans that meet consumer needs at prices that work. As in previous years very soon we will be making available the plan and premium information the upcoming year so you can start looking at it to get ready. I think we have a really strong set of offerings that will pair with AARP subsidies. I want to thank the other speakers and I'm thrilled to have you in communities ready to help consumers get and keep the security of health insurance.

Add we go through open enrollment we will count on you not only to be out this working

with consumers but to be providing feedback to let us know how things are going so that we can make sure to use the eyes that you have on the ground to understand areas in which we can continue making improvements to strengthen the marketplace and make it easier for consumers to get health insurance year over year.

Now I will reintroduce Gian Johnson.

>> GIAN JOHNSON: Thank you, Ben. You heard wonderful information about the CMS resources being made available for this open enrollment period. Before we dive into our question and answer portion of this because I know there's a lot of good questions we want to try to get to, I want to take a minute and highlight some of the resources we have planned for navigators and CAC. Next week we have two things that are going to be rolling out first is a new update to find local health. You might be familiar with the years of service badges that they have or have had for (?). Those are going to be added for navigators and CACs as well. I know many of you have been with us for years now since these marketplaces started in 2014, and this is we thought a great way to recognize all the years of knowledge that you have to offer your communities.

So you'll be getting (?) the other are thing that many of you who might be familiar with is our sister line that we usually have. It's the line for the call center. You can use this code to access kind of a separate line. It's really helpful when you need a password re-set or something only the call center can provide. You'll be getting information. Navigators will get it from their project officers. For CAC organizations we are going to be sending that out to our CAC listserv. Please keep an eye out early next week. You'll get the phone number and the code.

The other resources I just want to remind folks about in case you're new to this, we have a listserv. And this -- I'll put the actual address in the chat instead of spelling it's out. But if you're not part of our sister listserv we encourage to you send an e-mail and to become part of it because it's how we send out any time we have information, guidance, updates. It's also invitations to our sister webinars, how they come out. During this time we have webinars focused on open enrollment and the information you need to help consumers.

So get on that listserv, if you're not.

The other great resources are marketplace website. I'll pull that link in the chat. We have a lot of job aids up there. We have a lot of great resources on there so I encourage to you check that out and I have the page bookmarked. And then as you all know, your points of contact may vary but we are all working together whether you have an actual project officer on the team communicate through our CAC inbox and we have our colleague and partners in the CMS regional offices who are going to working closely with you this year coordinating events and promoting the work you're doing in your communities. I saved time so that we can maybe do some questions. I will turn it over to Beth who I think it's going to help us moderate those.

>> BETH LYNK: Yes, thank you so much. Gian, you can come back on screen with Ben and Chris and the team because I know I think I'm tapped to moderate the Q&A because you are the ones with the answers. I'm going to thank everyone for all the questions in the chat. One, we are going to send the slides and the recording to everyone after this call so rest assured you're going to get all this information. We want to arm you with everything you need. There are -- I think as was mentioned earlier, there are 1500 navigators that are -- that will be active this open enrollment period and even more certified application counselors but Navigator numbers are four fold increase so we are excited about that. The first question we have got is from Connie and Gian, I think I'm going to turn to you. Though others feel free to chime in.

How long and how can folks request products to ordering and how long until folks should expect to receive materials they have requested?

>> GIAN JOHNSON: Yes, I'm not sure Chris, if we even have the right people on this. I know part of OC runs the marketing website and I don't know, Chris, if you know anything in terms of timing that you can share. We might have to take the question back.

>> CHRISTOPHER KOEPKE: I'm so sorry if we were in the office it's the mom with the office next to me I can pound on the wall but at the moment I'm working from home so we can take that back to them. Sorry.

>> BETH LYNK: So we will circle back with folks on how long that fulfillment takes and we will circle back there.

Folks are asking the new C to C booklet is available from download. This is also going to be available to order? This question is from Cynthia. We might follow up with you on that, too.

>> CHRISTOPHER KOEPKE: Coverage to care does come out of the office of minority health and we can totally follow up with that. Yeah.

>> BETH LYNK: Great. I did want to elevate, we had a couple questions about social media toolkits and other materials. So just to reiterate that we are going to be communicating and sharing resources with you all early and often. The social media toolkit was dropped in the chat and that's ready for your use now. I think we are looking at as we mentioned regular cadence on communications, sharing those weekly messages, and those resources with all of you as we get going during the open enrollment period.

Gian, anything on kind of regular -- there's a couple questions about what regular communication with the teams look like and what additional resources folks can expect?

>> GIAN JOHNSON: Sure. So for navigators your officer probably has you on a weekly cadence for your scheduled calls right now. We are also working closely with our regional office colleagues and by region depending on where you are. We don't have a steady cadence in terms of when the messages come out but as we get new information or new resources we are trying to get them out to you all too as soon as we can.

>> BETH LYNK: Great. I think we have a couple of questions about when the landscape of plans will be available. I think we can say imminently. But Ben, anything you want to know about what folks can expect in terms of landscape and some of these resources?

>> BEN WALKER: Yeah. We appreciate, we are excited to get it out so the answer is yes, very soon. You can expect a similar set of products that were out there in the past. We will have our window shopping tool which is available and folks can use it for real or simulated scenarios to look in various areas and see what plans are available that will continue to have integration with provider directory and formulary, drug formulary information. And in direction to all of that sort of a broader set of materials for researchers and folks wanting to analyze the data set. We are putting finishing touches on that. You should have it very soon.

>> BETH LYNK: Great. I might kick this next one to you, a question from Scott. Will the savings that the American rescue plan savings or the advanced premium tax credits that were include there had carry on into next year?

>> BEN WALKER: Yeah, that's a really great question. We have the new law, the American rescue plan this year. It had two provisions regarding affected tax credits. One of those provisions, the one that eliminated the 400% threshold so folks over that can get APCG, that provision in law remains in effect until 2022. There's a second provision specific to people who had received unemployment for 2021. That provision by law was only for 2021. So it can

get a little bit nuanced but that's why the most important and the best thing for consumers to do is to come in and actively reenroll, use that window shopping tool and go through the application and actively reenroll during this open enrollment to make sure they're getting the most appropriate leveled of savings. That first provision is a huge factor in continuing availability of affordable plans we saw in 2021 so the biggest most basic answer is yes, the affordability gains that we made will begin into 2022. And the best way for consumers to make sure they are getting the full benefit of that law is to come back during open enrollment and update their information even if they done have any updates to make, flip flew the application and pick the plan that is right for them for the upcoming year.

>> BETH LYNK: Thank you, Ben. Just a question as a followup that just came in is is unemployment counted as income. And anything you can say about folk whose have not reconciled or are still working through their taxes for the last year in terms of what that documentation is?

>> BEN WALKER: Sure. So there hasn't been a change to income counting rules so what you know if you've been doing this for a little while, those income counting rules remain the same. They are defined by the IRS. The short answer is yes, unemployment counts as income for purposes of marketplace eligibility so as you go flew the application and your selecting those data sources, one of those is unemployment compensation. We want everybody to report all their unemployment compensation they think they're going to get and we will take care of the calculations in the background to make sure eligibility is determined appropriately. The question about tax filing. So we know so historically and it continues that when you receive a tax credit on an advanced basis so when a tax credit is made the consumer agrees to file and reconcile. So file that form with the IRS and says here's what I got and true it up. We also know and IRS acknowledged, IRS has been backed up for the last while as a result of public health emergency and the many provisions that needed to be implemented as part of the ARP. We announced earlier this summer we are not going to be removing folks APTC if the IRS does not have a record that they filed for previous year because we know there are people who have filed and reconciled and the IRS has not gotten through the pile of mail yet. It's not something we are sending notices about or will be denying. Consumers still should be getting an APTC we want you to file and reconcile. It's important to do because consumers can get more help when they file their taxes at the end of the year. But for this year we are not going to be removing APTC because of that record indicating that they have not complied with that yet for the prior year. (No sound).

>> BETH LYNK: I was on mute. Thank you, Ben. We have a number of questions in the chat about the training process and if folks are having any difficulty going through the training process or having any technical difficulties. Can you just reiterate that process and any -- if folks are having specific technical difficulties how they can work to resolve it?

>> GIAN JOHNSON: Yes. So I will start by first apologizing, I know there's been a lot of different issues, some which we can't entirely control. There's folks to can't get through. If you're a navigator please reach out. We can help troubleshoot and figure out where you're getting stuck and make sure you're getting credit for the exams you're taking. I think that's the worst, we don't want folks to have to take the same exam multiple times.

I also put in the chat where all the troubleshooting tools can be found. We hear a lot about popup blocker issues and that walks you through how to disable those and make sure your system can get you through the training a little smoother, too.

>> BETH LYNK: Great. Thank you so much. So then the next -- I think that covers a number of the questions in this portal. The next question is a number of questions about how folks can update their information on [healthcare.gov](https://healthcare.gov) whether they're CAC or a Navigator.

>> GIAN JOHNSON: Yes. If you go to the find local help link at the bottom of [healthcare.gov](https://healthcare.gov) there's the update tool and that's how you'll update your organizations. We encourage folks to do this throughout the year as we know hours change. But that's where you can submit those questions if you're a Navigator or CAC.

>> BETH LYNK: Great, thank you so much. So the next question we are seeing is about outreach and can folks share with local partners or small businesses and the answers resoundingly yes and we hope you do. As we mentioned we will have social media toolkits, messages, talking points and resources available so we will hope that folks do share that with your networks.

And I will note as we are mentioning some of these resources with a big thanks to Lisa Carr who is in our partner relations group. You're going to see some of these links in the chat. So one question from Kristin, how long is the expected wait time to hear back on a manual identity verification and noting that there have been some folks been waiting?

>> GIAN JOHNSON: Yes. This is unfortunately (?) but I think we are typically hearing about a week. It really depends. It's a case by case depending on what information you submit. Make sure you follow the guidelines about what information needs to be included and make sure your names match, the names on the documents, the name on the portal and the name associated with the ID. That's the main place where folks are getting tripped up.

>> BETH LYNK: Great. And then I'm also just tracking a few questions here related to our ways of staying engaged. So Mary thank you for your suggestion about reinvigorating the in the loop group. That's -- it's a very interesting idea and we can take that. If folks have other ideas for engagement. As we mentioned we will be sharing those weekly messages and resources, and having regular calls. Any feedback and engagement is appreciated. Folks will be hearing from our local team called opal who are going to be engaging around local events and activities, as well.

I am going to I think we have covered most of the questions. And if folks do have any additional questions, we will certainly follow up with folks. And provide any additional follow up.

I want to thank folks who have -- a number of questions have been responded to in the chat, as well.

So with that, I think Gian, I think I'll turn to you and Ben in case we have any final calls to action and closing remarks.

>> GIAN JOHNSON: Great. I just want to thank you all again for your continued partnership. I know we are excited to have so many of you turnout for today's call, the participation was amazing. We are really just thankful for your continued work these past couple years. It's been wonderful to see how invigorated everyone is. We are hoping to make this our best open enrollment yet and we couldn't do that without your support and hard work. A huge thank you. Ben I'm not sure if you have anything else to say. If not, I will close this out.

>> BEN WALKER: Let's do it.

>> GIAN JOHNSON: Okay. Have a great weekend, everyone. And thank you.

>> OPERATOR: Recording stopped.

(Event concluded at 3:00 p.m. ET)

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