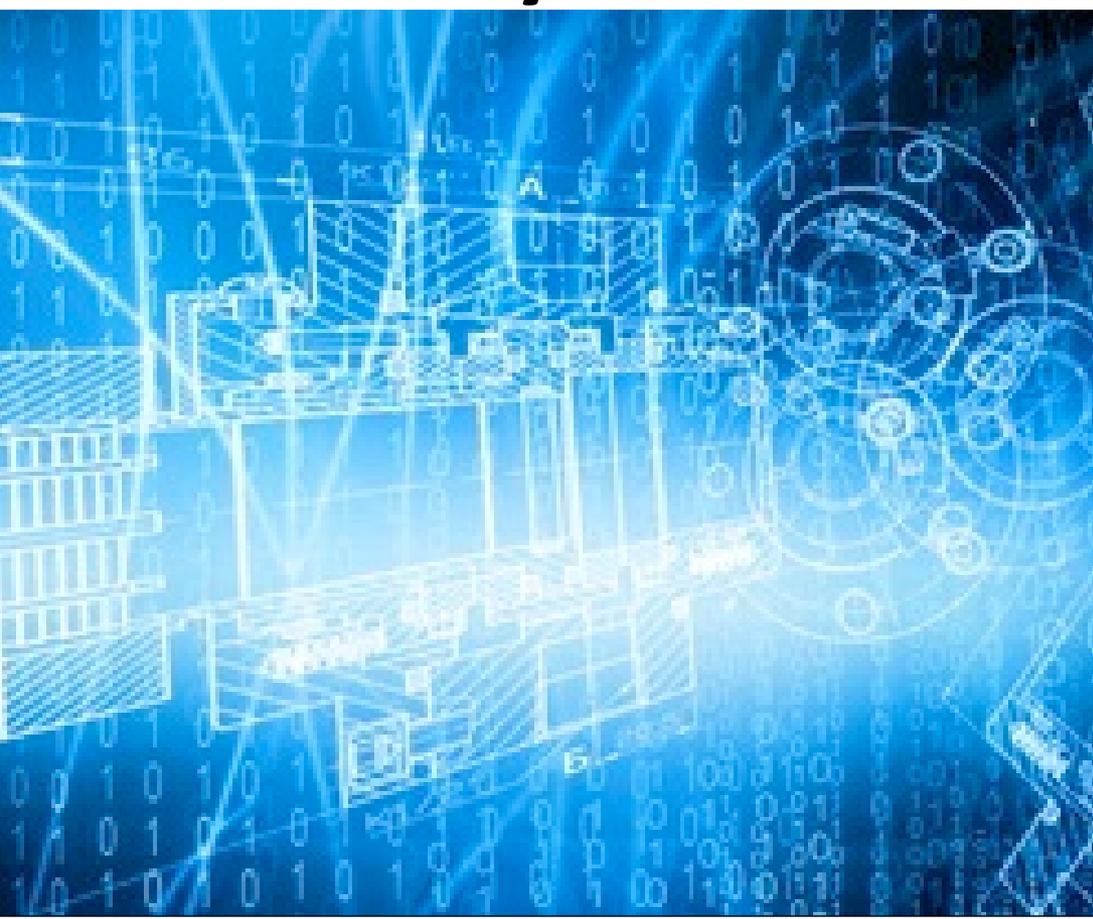




Overview of the Final Notice of Benefit and Payment Parameters for 2017



Overview for Navigators, non-Navigator assistance personnel, and certified application counselors (collectively, “assisters”)

March 2016

Center for Consumer Information and Insurance Oversight (CCIIO)

A Note about this Presentation

- The information provided in this presentation is intended only to be a general informal summary of technical legal standards. It is not intended to take the place of the statutes, regulations, and formal policy guidance that it is based upon. This presentation summarizes current policy and operations as of the date it was presented.
- Links to certain source documents have been provided for your reference. We encourage audience members to refer to the applicable statutes, regulations, and other interpretive materials for complete and current information about the requirements that apply to them.

Agenda

1. Overview of the Final Notice of Benefit and Payment Parameters for 2017
2. Additional Assistance Activities and Other Requirements for Assisters
3. Other Marketplace Provisions

Final Notice of Benefit and Payment Parameters for 2017

- Sets standards for issuers and Health Insurance Marketplaces for plan years beginning on or after January 1, 2017 (although many provisions will take effect earlier or be applicable later, including many provisions applicable to assisters).
 - Generally includes payment parameters that will apply to the 2017 benefit year,
 - Establishes new standards to improve consumers' Marketplace experience,
 - Promotes continuity and stability in the Marketplaces, and
 - Ensures coverage is affordable and accessible.

Assister Provisions: Post-enrollment and Other Assistance

- A Marketplace may require or authorize its Navigators to provide information and assistance with specific post-enrollment and other topics.
 - **In Federally-facilitated Marketplaces:**
 - Navigators will be required to provide assistance with all of the specified topics under Navigator grants awarded in 2018 or any later year
 - In the meantime, Navigators are permitted (but not required) to provide assistance with any of the specified topics.
 - **State-based Marketplaces** have the option of requiring or permitting their Navigators to provide assistance with any or all of the specified topics.
- If an Exchange requires its Navigators to provide assistance with any or all of the specified topics, the Exchange's Navigator training standards must include training corresponding to the required assistance topics.

Assister Provisions: Post-enrollment and Other Assistance

Specific topics include:

- i. Understanding the process of filing **Exchange eligibility appeals**;
- ii. Understanding and applying for **exemptions from the individual shared responsibility payment** that are granted through the Exchange, understanding the availability of exemptions from the requirement to maintain minimum essential coverage and from the individual shared responsibility payment that are claimed through the tax filing process and how to claim them, and understanding the availability of IRS resources on this topic;
- iii. The Exchange-related components of the **premium tax credit reconciliation process**, and understanding the availability of IRS resources on this process;

Assister Provisions: Post-enrollment and Other Assistance

(continued)

- iv. Understanding **basic concepts and rights related to health coverage and how to use it**; and
- v. **Referrals to licensed tax advisers**, tax preparers, or other resources for assistance with tax preparation and tax advice related to consumer questions about the Exchange application and enrollment process, exemptions from the requirement to maintain minimum essential coverage and from the individual shared responsibility payment, and premium tax credit reconciliations.

Assister Provisions: Post-enrollment and Other Assistance

- Prior to providing assistance, assisters must provide consumers with a disclaimer stating that they are not acting as tax advisers or attorneys when providing assistance as assisters, and cannot provide tax or legal advice within their respective capacities as assisters.

Assister Provisions: Underserved and Vulnerable Populations

- Requires Navigators in all Marketplaces to provide targeted assistance to serve underserved or vulnerable populations, as identified by the Exchange, within the Marketplace service area.
 - In FFMs, this would apply beginning with the application process for Navigator grants awarded in 2018.
 - In State-based Exchanges, this provision takes effect on May 9, 2016 (60 days after the rule is published in the Federal Register).

Assister Provisions: Underserved and Vulnerable Populations

Marketplaces have the flexibility to define and identify the underserved or vulnerable population in their service area.

- In FFMs, CMS will identify populations as vulnerable or underserved through its Navigator funding opportunity announcements and give applicants an opportunity to propose additional communities to target during the grant application process.
- The primary criteria the FFMs will use to identify vulnerable or underserved populations will be if they are disproportionately without access to coverage or care, or are at a greater risk for poor health outcomes.

Assister Provisions: Training

- Effective May 9, 2016, Navigators and non-Navigator assistance personnel will be required to complete training prior to performing outreach and education activities as well as prior to providing application or enrollment assistance.

Assister Provisions: CAC Metrics

- Certified application counselor (CAC) designated organizations must provide the Marketplace in which they serve data and information regarding the number and performance of the organization's certified application counselors and regarding the consumer assistance provided by the organization's certified application counselors, at the Marketplace's request.
 - In FFMs, reporting will be on a quarterly basis beginning with reports for the third quarter of calendar year 2017

Assister Provisions: CAC Metrics

- In FFMs, CAC designated organizations are required to submit data regarding:
 - The number of individuals who have been certified by the organization;
 - The total number of consumers who received application and enrollment assistance from the organization; and
 - Of that number, the number of consumers who received assistance:
 - Applying for and selecting a QHP,
 - Enrolling in a QHP, or
 - Applying for Medicaid or CHIP.
- These data elements align well with the FFM Navigator program reporting metrics and HRSA's Affordable Care Act Health Center Outreach and Enrollment Assistance grant reporting metrics.

Assister Provisions: Gifts & Promotional Items

- Effective May 9, 2016; applies to Navigators, non-Navigator assistance personnel subject to §155.215, and certified application counselors.
- Gifts of any value may not be provided to applicants or potential enrollees **as an inducement for enrollment.**
- Gifts that are not provided as an inducement for enrollment may be provided to applicants and potential enrollees **if they do not exceed nominal value (\$15 or less).**

Assister Provisions: Gifts & Promotional Items

- “Gifts,” for purposes of these provisions:
 - Includes gift items, gift cards, cash cards, cash, and promotional items that market or promote the products or services of a third party.
 - Does not include the reimbursement of legitimate expenses incurred by a consumer in an effort to receive Exchange application assistance, such as travel or postage expenses.

Marketplace Provisions

- **Annual Open Enrollment Period for the Individual Market:**
 - For benefit years 2017 and 2018: Begins November 1 of the year preceding the benefit year and runs through January 31 of the benefit year.
 - For benefit year 2019 and later benefit years: Begins November 1 and runs through December 15 of the year preceding the benefit year.

Marketplace Provisions

- **State-based Marketplaces Using the Federal Platform:** Codifying a Marketplace model for the State-based Marketplaces on the Federal platform (SBM-FPs).
 - The SBM-FPs will retain primary responsibility for plan management functions, consumer assistance and outreach, ongoing oversight and program integrity, and for ensuring that all Marketplace requirements are met, but will agree to rely on the Federal platform for eligibility determinations and enrollment processing activities, and associated federal platform services.
- Many other provisions to promote healthy and stable markets that work for consumers and for insurers.

Questions?

More information and resources:

- Full rule: <https://www.gpo.gov/fdsys/pkg/FR-2016-03-08/pdf/2016-04439.pdf>
- Press Release: <https://www.cms.gov/Newsroom/MediaReleaseDatabase/Press-releases/2016-Press-releases-items/2016-02-29.html>
- Fact sheet: <https://www.cms.gov/Newsroom/MediaReleaseDatabase/Fact-sheets/2016-Fact-sheets-items/2016-02-29.html>