

## CH1LDREN NOW



May 31, 2012

California Health Benefit Exchange Board 2535 Capitol Oaks Drive, Suite 120 Sacramento, CA 95833

Re: Richard Heath & Associates draft report, "Statewide Assisters Program Design Options and Recommendations Report for the California Health Benefits Marketplace"

Dear California Health Benefit Exchange Board Members:

The 100% Campaign, comprised of The Children's Partnership, Children Now, and Children's Defense Fund-California, appreciates this opportunity to comment on the Richard Heath & Associates (RHA) draft report, as submitted to the California Health Benefit Exchange (Exchange) on May 22, 2012 and revised on May 24, 2012.

First, we wish to associate our remarks with those submitted by the California Coverage Navigator Work Group (CCAN). Our organizations have been deeply involved in the work developed by CCAN and support the recommendations and comments submitted by that coalition. As the Exchange proceeds to implement an assisters program, we especially want to endorse the CCAN recommendations to fully leverage existing community-based avenues to achieving maximum health coverage "by taking full advantage of community resources and working with health and human service organizations that have established trust and built effective channels of communication with their target communities."

We would also like to express our support for the "market integration" approach suggested by RHA. This model provides for a primary role to be assumed by navigators, while also outlining appropriate roles for other assisters, including agents and other "DBAs." Additionally, we support recommendations that specify that navigators should not only play a prominent role in the Individual Exchange, but should also be readily available to provide coverage and assistance in the Small Employer Health Options Program (SHOP). As we have previously suggested, we believe that the SHOP has a critical role to play in reaching maximum enrollment goals and satisfying the "no wrong door" objective.

We also, however, recommend that the Exchange invest additional attention to the portions of the RHA report dealing with navigator recruitment, training, credentialing/certification, and accountability. It is unclear what the basis is for the RHA recommendation that navigators will require only two days of training; further, it is our view that the training framework suggested is likely incomplete. Professional certification programs typically involve

conducting in-depth "occupational analyses," with training parameters and modules subsequently developed to ensure that appropriate, specific skills and knowledge are identified and addressed through instruction. Test instruments and certification requirements and qualifications must also be adopted. We are pleased that RHA recognizes the importance of training and certification, but we recommend that the Board establish a process for further developing this part of a navigator program.

While we support the RHA recommendation that all assisters sign a Code of Conduct and Confidentiality and Assister Guidelines Agreement, the RHA report does not appear to directly address the accountability and public protection elements implicit in a state certification program. While in our view navigators must ultimately be accountable to the Exchange, we are inclined to think the testing and certification process would best be administered by an established state entity already equipped with a testing and certification infrastructure. Such an entity should also be prepared to conduct oversight and "enforcement" of navigator functions, and thereby ensure a level of consumer protection. Given the extraordinary demands currently on the Exchange to develop multiple other "programs," we believe consideration should be given to contracting out these functions to another state entity.

In closing, we want to emphasize the critical importance of designing and overseeing a comprehensive, effective Navigator Program within the Exchange. California's diverse populations, geographic distinctions and complex family situations can only be well-served by a robust, accessible network of committed, well-trained assisters who possess the special skills that come in large part from community-based expertise and relationships. We continue to be struck by the many enrollment challenges we face meeting the needs of California's complex family situations. The Urban Institute recently shared a new report that includes relevant information: 1.8 million California families are comprised of Medicaid or Healthy Families-eligible children who have potentially Exchangeeligible parents; another 0.7 million Medicaid or Healthy Families-eligible children have parents who are not Exchange-eligible; and an alarming 3.0 million children are in families with at least one absent parent, where access to health coverage is unknown. These are the children we are trying to reach. An effective Navigator Program must be designed with these targets in mind.

We appreciate your consideration of our views and look forward to continued discussion with the Exchange Board and staff regarding our recommendations. For more information, please feel free to contact Kathleen Hamilton at The Children's Partnership: khamilton@childrenspartnerhsip.org, or 916-706-2917.

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