

Comments on Navigators: Clinica Sierra Vista

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- The main argument seems to be that CHC's are somehow "incentivized" to do enrollment and therefore do not need or should not be, reimbursed. I find this both inaccurate and disturbing.
 - Community health centers receive no incentive for enrolling patients in health insurance. To the contrary, other than the subjective conclusion on someone's part that because an enrollment represents a patient with a payer that should be adequate which is absolutely false. We have no funding to support these services and in fact, since application reimbursement and MAA funding have been radically reduced and/or eliminated by state budget, we no longer have even one assister at each of our health centers. We have in fact reduced this workforce by 50%. This creates a significant barrier to care for our patients whose first exposure to the concept of enrollment is often at the health center front counter.
- Health center assisters are the ultimate neutral third party enroller. As all federal and state funder insurance program are required by law to allow their clients to access health center care, we have no vested interest in which product a patient enrolls in but rather can help a patient make the best decision for their individual and family needs.
- The issue of productivity was raised.
 - Our health center CAA's regularly process 10-12 application and/or renewals a day. Taking and processing applications at this level requires a level of oversight and quality control that few organizations can support but this kind of quality is woven into the health center culture.
- Assistor competency.
 - We are very concerned about competency in the community in a volume driven application environment. We have established a cross training program with our county based assistors to ensure our applications have a minimal rejection rate (<98%) which is evaluated by the county quarterly. None of the other CAA groups in the community while well intentioned, are willing to commit to those standards. We expect that this board will require this kind of commitment to excellence.
- Health centers are not capitalized to provide assister services. In fact, these services are specifically excluded by statute from our cost reporting that creates our prospective payment rate for Media-Cal.
- In conclusion we request that health center Patient Navigator/Assistor's be reimbursed at the same rate as all other's.