

**STATEMENT OF  
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**ON**

**OBAMACARE IMPLEMENTATION: WHO ARE THE NAVIGATORS?**

**BEFORE THE**

**U. S. HOUSE COMMITTEE ON  
OVERSIGHT & GOVERNMENT REFORM**

**DECEMBER 16, 2013**

**U. S. House Committee on Oversight and Government Reform**

**Obamacare Implementation: Who are the Navigators?**

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Good morning, Chairman Issa, Ranking Member Cummings, and members of the committee. Thank you for the opportunity to discuss the Affordable Care Act Navigator program. Navigators and other in-person assisters are playing a critical role in helping Americans find and enroll in coverage in the new Health Insurance Marketplace. As a career civil servant with 15 years of experience at CMS, my responsibilities as Consortium Administrator for Quality Improvement and Survey & Certification Operations include management of Regional Office staff who provide oversight of Quality Improvement Organizations and End-Stage Renal Disease Networks; management of Regional Office staff who provide oversight of state survey agencies to ensure that providers such as hospitals, long-term care facilities home health agencies and hospice organizations adhere to Medicare's Conditions of Participation; provision of executive leadership and direction to the Regional Administrator in the Atlanta Regional Office and to the Chief Medical Officers in the 10 CMS Regional Offices; management of Emergency Preparedness and Response Operations for CMS; provision of leadership oversight to the new CMS Regional Innovation Network, which will assist the Agency in leveraging and aligning its internal resources in the development, testing and expansion of innovative models that will strengthen and modernize the nation's health care system to provide access to high-quality care at lower cost; and helping to coordinate Affordable Care Act outreach and education efforts throughout Region VI, which includes Arkansas, Louisiana, New Mexico, Oklahoma and Texas. The Dallas Regional Office plays an important role in working with community and consumer groups, providers and other stakeholders throughout the region to ensure people understand the Affordable Care Act and their new coverage options.

Prior to assuming the Consortium Administrator role, I served as Regional Administrator of the Dallas Regional Office of CMS. In that capacity, I directed the Region VI effort to educate and enroll Medicare beneficiaries in Medicare Part D. I also led the national CMS effort to increase influenza and pneumococcal immunization rates among Medicare beneficiaries and served as a member of the Secretary's National Vaccine Advisory Committee.

Over 41 million Americans, including 4.9 million Texans, under the age of 65 do not currently have health insurance, sometimes because the cost of insurance is too high or because they have been locked out of the private insurance market because of pre-existing conditions. The percentage of non-elderly uninsured is over 20 percent of the population in many states. Those millions of our fellow citizens and neighbors live daily with the insecurity of not knowing how they will pay for the medical care they and their families need. The new Health Insurance Marketplace is fundamentally changing that reality for these Americans. The Marketplace is precisely what the name describes: a place where consumers and small businesses can find affordable health coverage options they can rely on.

The Marketplace allows consumers to compare costs, benefits, and cost-sharing in order to choose a plan that is right for them and their families. If eligible, consumers can receive help with the cost of coverage through premium tax credits that can be used to lower the cost of monthly premiums right away or cost-sharing reductions that reduce out-of-pocket costs like deductibles, coinsurance and copayments. Consumers have four ways to access the Marketplace for individual market coverage – online using HealthCare.gov, by phone, using our dedicated call center where customer service representatives are available to help complete the application process 24 hours a day and 7 days a week, mailing in a paper application, or with the help of in-person assisters in their communities, such as Navigators or other in-person assistance personnel trained and certified to help them understand their health coverage options.

Ensuring that consumers and small businesses participate in the Marketplaces requires that they learn about the benefits that these Marketplaces have to offer and that they get the help they need in order to take advantage of those benefits. This is a significant undertaking. We know quite a bit about the uninsured Americans we need to reach — many have never had health insurance, so the transaction of selecting, applying, and enrolling in health coverage will be unfamiliar to them.

To effectively reach these populations about their new health insurance options, CMS implemented a variety of ways to provide outreach, education, and enrollment assistance to the

uninsured and others seeking coverage through the Marketplace. We are leveraging forms of assistance that exist in the insurance market today, like agents and brokers, as well as new forms of assistance, like Navigators, authorized by the Affordable Care Act. CMS's implementation of the Navigator and other in-person assistance programs in states that, like Texas, are relying on CMS to operate their Health Insurance Marketplace builds on our experience in providing outreach and enrollment assistance in Medicaid, the Children's Health Insurance Program (CHIP), and Medicare, including Medicare Parts C and D. As a result, CMS designed Navigator and other in-person assistance programs for the Federally-facilitated Marketplace that enable qualified and well-trained individuals and organizations to help consumers find and enroll in health care coverage, while adhering to standards and requirements designed to ensure that taxpayer money is used appropriately on these programs.

In August, CMS awarded \$67 million in Navigator Cooperative Agreements to entities in all of the 34 states with Federally-facilitated and State Partnership Marketplaces. Those states that have chosen to administer their own Marketplaces fund their own Navigators through separate state grants. No matter what state they live in, consumers will be able to get in-person help as they go through the process of applying for and choosing new coverage options in the Marketplace. Navigators are already playing a vital role in helping consumers with the application and enrollment process. They are helping consumers prepare electronic and paper applications to establish eligibility, find out if they are eligible for affordability programs like premium tax credits, cost-sharing reductions, and Medicaid, and enroll in coverage through the Marketplace. Navigators also provide outreach and education to consumers to raise awareness about the Marketplace. The Federally-facilitated Marketplace also designates organizations to certify application counselors who perform some of the same functions as Navigators - including educating consumers and helping them complete an application for coverage – but will not receive funding from the Marketplace. These groups might include community health centers or other health care providers, hospitals, or social service agencies.

### **The Navigator Program in Texas**

Texas has one of the highest numbers of eligible uninsured residents in the country. Across the state, eight grantees received nearly \$10.9 million in Federal Navigator grants for work in the

state. These grantees are groups and organizations with a proven ability to reach out to likely Marketplace consumers in their local communities, many located in the Dallas-Fort Worth community. For example, the United Way of Metropolitan Tarrant County has served the people in the Fort Worth and Arlington area of Texas for over 90 years, and is working across the state to promote enrollment in the Marketplace. Southern United Neighborhoods oversees efforts in the Dallas and Houston areas to pass out flyers at libraries, community colleges, and local businesses and to participate in outreach events. In early October, they joined the CMS Region 6 staff at the Texas state fair in Dallas to work at the health booth.

To complement the work performed by its Navigator grantees, CMS created an Enrollment Assistance Program to target specific populations in the 14 states in the Federally-facilitated Marketplace with the highest number of eligible uninsured residents, including in Texas. The program primarily targets 18 to 35 year olds in 19 metropolitan areas with high numbers of eligible residents. The Enrollment Assistance Program offers fixed locations at which consumers in need of in-person assistance with enrollment in coverage through the Marketplace can obtain such help and provides non-English speakers with access to translation services and bilingual staff. Additionally, the program provides enrollment support for Navigator grantees or other local organizations that may be conducting outreach and education in addition to enrollment assistance.

### **Navigator Oversight**

The Navigator grant program for the Federally-facilitated Marketplace, its application process, its terms and conditions, and program oversight are informed by the Department of Health and Human Services' (HHS) extensive experience with grants management. HHS awards grants for more than 300 programs, including consumer outreach and education programs, such as the State Health Insurance Assistance Program for Medicare Part D, the nationwide Senior Medicare Patrols program, and the Connecting Kids to Coverage program. The Navigator program for the Federally-facilitated Marketplace follows this tradition of responsible grant-making for consumer education.

Navigators for the Federally-facilitated Marketplace are trained on providing consumers with fair, accurate, and impartial information, along with training on standards to keep consumers' personal information private and secure. Training is not intended to be a one-time-only process. Navigators in the Federally-facilitated Marketplace have regular refresher opportunities where they can share updates, receive information and address issues as they are in the process of helping people in their communities. CMS conducts weekly webinars for Navigators in the Federally-facilitated Marketplace to provide tips to help them facilitate enrollment and to enable them to ask questions and share successful outreach approaches. As open enrollment proceeds and we learn more about consumers' needs, we intend to continue to provide this additional guidance to Navigators in the Federally-facilitated Marketplace.

CMS takes allegations of suspicious activity and fraud seriously and actively monitors complaints about potential wrongdoing. Last month, CMS was made aware of an incident in which employees of one of our Navigator grantees, the Urban League of Greater Dallas, encouraged consumers to provide inaccurate information on their Marketplace applications. CMS took immediate action to officially decertify the two individual Navigators identified in the video and to inform the National Urban League that they and their sub-grantee in Dallas were non-compliant with Navigator regulations. The National Urban League immediately responded by suspending all individuals involved. CMS then sent a detailed corrective action plan to the National Urban League outlining the remedial actions they must take to continue as a Federal Navigator grantee, including:

- A written report detailing steps taken to ensure those involved in wrongdoing have been barred from all functions performed by Navigators and to ensure enhanced supervision of all employees by senior staff;
- A written plan detailing additional training to be provided to all employees, including the importance of providing fair, accurate and impartial assistance to consumers and advising consumers that they must honestly answer questions on the applications; and
- Daily phone calls with CMS Project Officers and weekly written progress reports on personnel actions, quality control enhancements, and all consumer assistance activities.

We also quickly alerted all Navigators and Certified Application Counselors operating in the Federally-facilitated Marketplace to emphasize that encouraging consumers to provide inaccurate information is against the rules of their agreements, and could potentially subject the Navigator and consumer to prosecution.

### **Conclusion**

As an important part of our comprehensive Marketplace outreach plan, we are confident that the Navigator and other in-person assistance programs in the Federally-facilitated Marketplace will help provide consumers with the high quality help they need as they consider their health coverage options. Together, these important resources will help millions of uninsured Americans gain the security of being enrolled in health coverage. CMS will continue to vigorously monitor Navigator grantees in the Federally-facilitated Marketplace to ensure that funding goes to the top applicants, who are most qualified to serve their communities in this capacity, and to ensure that they are well-trained, meeting objectives and using grant funding appropriately.

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James Randolph Farris is Consortium Administrator for Quality Improvement and Survey & Certification Operations. In collaborative partnership with the Centers for Medicare & Medicaid Services Center for Clinical Standards and Quality in Baltimore, the Consortium Administrator for Quality Improvement and Survey & Certification Operations (CQISCO) guides field implementation of CMS goals and objectives for quality improvement and quality assurance in the ten CMS Regional Offices and participates in the establishment of policy and strategic direction. Reporting directly to the Office of the Administrator, the CQISCO Consortium Administrator also provides executive leadership and direction to the Regional Administrator in the Atlanta Regional Office and to the Chief Medical Officers in the 10 CMS Regional Offices; manages Emergency Preparedness and Response Operations for CMS; and provides leadership oversight to the new CMS Regional Innovation Network, which will test innovative models that will strengthen and modernize the nation's health care system.

Prior to assuming the CQISCO Consortium Administrator role in 2006, Dr. Farris served as Regional Health Administrator for the U.S. Department of Health and Human Services. In that capacity, he had responsibility for oversight of Federal public health programs in the Region VI states of Texas, Oklahoma, New Mexico, Arkansas and Louisiana. He became Regional Administrator of the Dallas office of CMS in 1998. In that role, he had responsibility for the Medicare, Medicaid, Clinical Laboratory Improvement Act and State Children's Health Insurance Programs in Federal Region VI. For several years, Dr. Farris led the national CMS effort to increase influenza and pneumococcal immunization rates among Medicare beneficiaries. As part of that responsibility, he was a member of the Secretary's National Vaccine Advisory Committee. He also served as the lead CMS Regional Administrator for rural health issues.

Dr. Farris received his undergraduate degree from the University of Texas and his medical degree from Howard University. He completed post-graduate training in Internal Medicine at Martin Luther King General Hospital in Los Angeles, California and served as Chief Medical Resident. During his years of clinical practice in Dallas, Texas, Dr. Farris held the positions of Assistant Attending Physician in Internal Medicine at St. Paul Medical Center and Clinical Assistant Professor of Internal Medicine at the University of Texas Southwestern Medical School. He was a recipient of the Presidential Rank Award at the Meritorious level in 2002 and received the Roger W. Jones Award for Executive Leadership from American University in 2003.