



Silver State Health Insurance Exchange

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Conflict of Interest Standards applicable to Navigators and Non-Navigator Assistance Personnel

Please Read, Initial, Sign and Date.

§155.215 Standards applicable to Navigators and Non-Navigator Assistance Personnel carrying out consumer assistance functions under §§155.205(d) and (e) and 155.210 in a Federally-facilitated Exchange and to Non-Navigator Assistance Personnel funded through an Exchange Establishment Grant.

(1) *Conflict-of-interest standards for Navigators.* (i) All Navigator entities, including Navigator grant applicants, must submit to the Exchange a written attestation that the Navigator, including the Navigator's staff:

(2) *Conflict-of-interest standards for Non-Navigator assistance personnel carrying out consumer assistance functions under §155.205(d) and (e).* All Non-Navigator entities or individuals authorized to carry out consumer assistance functions under §155.205(d) and (e) must—

(i) Comply with the prohibitions on Navigator conduct set forth at §155.210(d) and the duties of a Navigator set forth at §155.210(e)(2).

(A) Is not a health insurance issuer or issuer of stop loss insurance; _____ (initial)

(B) Is not a subsidiary of a health insurance issuer or issuer of stop loss insurance; _____ (initial)

(C) Is not an association that includes members of, or lobbies on behalf of, the insurance industry; _____ (initial)

(D) Will not receive any consideration directly or indirectly from any health insurance issuer or issuer of stop loss insurance in connection with the enrollment of any individuals or employees in a QHP or non-QHP. _____ (initial)

(ii) All Navigator and Non-Navigator entities must submit to the Exchange a written plan to remain free of conflicts of interest during the term as a Navigator Non-Navigator entities. _____ (initial)

(iii) All Navigator and Non-Navigator entities, including the Navigator's and Non-Navigator staff, must provide information to consumers about the full range of QHP options and insurance affordability programs for which they are eligible. _____ (initial)

(iv) All Navigator and Non-Navigator entities, including the Navigator's and Non-Navigator staff, must disclose to the Exchange and, in plain language, to each consumer who receives application assistance from the Navigator: _____ (initial)

(A) Any lines of insurance business, not covered by the restrictions on participation and prohibitions on conduct in §155.210(d), which the Navigator intends to sell while carrying out the consumer assistance functions; _____ (initial)

(B) Any existing employment relationships, or any former employment relationships within the last 5 years, with any health insurance issuers or issuers of stop loss insurance, or subsidiaries of health insurance issuers or issuers of stop loss insurance, including any existing employment relationships between a spouse or domestic partner and any health insurance issuers or issuers of stop loss insurance, or subsidiaries of health insurance issuers or issuers of stop loss insurance; _____ (initial) and

(C) Any existing or anticipated financial, business, or contractual relationships with one or more health insurance issuers or issuers of stop loss insurance, or subsidiaries of health insurance issuers or issuers of stop loss insurance. _____ (initial)

(D) Will not charge any applicant or enrollee, or request or receive any form of remuneration from or on behalf of an individual applicant or enrollee, for application or other assistance related to Navigator duties; _____ (initial)

(E) Provide to an applicant or potential enrollee gifts of any value as an inducement for enrollment. The value of gifts provided to applicants and potential enrollees for purposes other than as an inducement for enrollment must not exceed nominal value (\$15.00), either individually or in the aggregate, when provided to that individual during a single encounter. _____ (initial)

(b) *Training standards for Navigators and Non-Navigator assistance personnel carrying out consumer assistance functions under §§155.205(d) and (e) and 155.210. The following training standards apply in an Exchange operated by HHS during the exercise of its authority under §155.105(f), and to Non-Navigator assistance personnel funded through an Exchange Establishment Grant under section 1311(a) of the Affordable Care Act.*

(1) *Certification and recertification standards.* All individuals or entities who carry out consumer assistance functions under §§155.205(d) and (e) and 155.210, including Navigators, must meet the following certification and recertification requirements. _____ (initial)

(i) Obtain certification by the Exchange prior to carrying out any consumer assistance functions or outreach and education activities under §155.205(d) and (e) or §155.210; _____ (initial)

(ii) Register for and complete a HHS-approved training; _____ (initial)

(iii) Following completion of the HHS-approved training described in paragraph (b)(1)(ii) of this section, complete and achieve a passing score on all approved certification examinations prior to carrying out any consumer assistance functions under §155.205(d) and (e) or §155.210; _____(initial)

(iv) Obtain continuing education and be certified and/or recertified on at least an annual basis; _____ (initial) and

(v) Be prepared to serve both the individual Exchange and SHOP. _____ (initial)

(2) Training module content standards. All individuals who carry out the consumer assistance functions under §§155.205(d) and (e) and 155.210 must receive training in the following subjects:

- (i) QHPs (including the metal levels described at §156.140(b) of this subchapter), and how they operate, including benefits covered, payment processes, rights and processes for appeals and grievances, and contacting individual plans; _____ (initial)
- (ii) The range of insurance affordability programs, including Medicaid, the Children's Health Insurance Program (CHIP), and other public programs; _____ (initial)
- (iii) The tax implications of enrollment decisions; _____ (initial)
- (iv) Eligibility requirements for premium tax credits and cost-sharing reductions, and the impacts of premium tax credits on the cost of premiums; _____ (initial)
- (v) Contact information for appropriate federal, state, and local agencies for consumers seeking additional information about specific coverage options not offered through the Exchange; _____ (initial)
- (vi) Basic concepts about health insurance and the Exchange; the benefits of having health insurance and enrolling through an Exchange; and the individual responsibility to have health insurance; _____ (initial)
- (vii) Eligibility and enrollment rules and procedures, including how to appeal an eligibility determination; _____ (initial)
- (viii) Providing culturally and linguistically appropriate services; _____ (initial)
- (ix) Ensuring physical and other accessibility for people with a full range of disabilities; _____ (initial)
- (x) Understanding differences among health plans; _____ (initial)
- (xi) Privacy and security standards applicable under §155.260 for handling and safeguarding consumers' personally identifiable information; _____ (initial)
- (xii) Working effectively with individuals with limited English proficiency, people with a full range of disabilities, and vulnerable, rural, and underserved populations; _____ (initial)
- (xiii) Customer service standards; _____ (initial)
- (xiv) Outreach and education methods and strategies; _____ (initial) and
- (xv) Applicable administrative rules, processes and systems related to Exchanges and QHPs. _____ (initial)

c) Providing Culturally and Linguistically Appropriate Services (CLAS Standards). The following standards will apply in an Exchange operated by HHS during the exercise of its authority under §155.105(f) and to Non-Navigator assistance personnel funded through an Exchange Establishment Grant under section 1311(a) of the Affordable Care Act. To ensure that information provided as part of any consumer assistance functions under §155.205(d)

and (e) or §155.210 is culturally and linguistically appropriate to the needs of the population being served, including individuals with limited English proficiency as required by §§155.205(c)(2) and 155.210(e)(5), any entity or individual carrying out these functions must:

- (1) Develop and maintain general knowledge about the racial, ethnic, and cultural groups in their service area, including each group's diverse cultural health beliefs and practices, preferred languages, health literacy, and other needs; _____ (initial)
- (2) Collect and maintain updated information to help understand the composition of the communities in the service area, including the primary languages spoken; _____ (initial)
- (3) Provide consumers with information and assistance in the consumer's preferred language, at no cost to the consumer, including the provision of oral interpretation of non-English languages and the translation of written documents in non-English languages when necessary or when requested by the consumer to ensure effective communication. Use of a consumer's family or friends as oral interpreters can satisfy the requirement to provide linguistically appropriate services only when requested by the consumer as the preferred alternative to an offer of other interpretive services; _____ (initial)
- (4) Provide oral and written notice to consumers with limited English proficiency, in their preferred language, informing them of their right to receive language assistance services and how to obtain them; _____ (initial)
- (5) Receive ongoing education and training in culturally and linguistically appropriate service delivery; _____ (initial) and
- (6) Implement strategies to recruit, support, and promote a staff that is representative of the demographic characteristics, including primary languages spoken, of the communities in their service area. _____ (initial)

(d) Standards ensuring access by persons with disabilities. The following standards related to ensuring access by people with disabilities will apply in an Exchange operated by HHS during the exercise of its authority under §155.105(f), and to Non-Navigator assistance personnel funded through an Exchange Establishment Grant under section 1311(a) of the Affordable Care Act. Any entity or individual carrying out any consumer assistance functions under §155.205(d) and (e) or §155.210, and in accordance with §155.205(c), must—

- (1) Ensure that any consumer education materials, Web sites, or other tools utilized for consumer assistance purposes, are accessible to people with disabilities, including those with sensory impairments, such as visual or hearing impairments, and those with mental illness, addiction, and physical, intellectual, and developmental disabilities; _____ (initial)
- (2) Provide auxiliary aids and services for individuals with disabilities, at no cost, when necessary or when requested by the consumer to ensure effective communication. Use of a consumer's family or friends as interpreters can satisfy the requirement to provide auxiliary aids and services only when requested by the consumer as the preferred alternative to an offer of other auxiliary aids and services; _____ (initial)
- (3) Provide assistance to consumers in a location and in a manner that is physically and otherwise accessible to individuals with disabilities; _____ (initial)

(4) Ensure that authorized representatives are permitted to assist an individual with a disability to make informed decisions; _____ (initial)

(5) Acquire sufficient knowledge to refer people with disabilities to local, state, and federal long-term services and supports programs when appropriate; _____ (initial) and

(6) Be able to work with all individuals regardless of age, disability, or culture, and seek advice or experts when needed. _____ (initial)

(e) Monitoring. Any Exchange operated by HHS during the exercise of its authority under §155.105(f) will monitor compliance with the standards in this section and the requirements of §§155.205(d) and (e) and 155.210.

(g) Consumer authorization. All Non-Navigator entities or individuals carrying out consumer assistance functions under §155.205(d) and (e) in an Exchange operated by HHS during the exercise of its authority under §155.105(f) and all Non-Navigator assistance personnel funded through an Exchange Establishment Grant under section 1311(a) of the Affordable Care Act must establish procedures to ensure that applicants—

(1) Are informed, prior to receiving assistance, of the functions and responsibilities of Non-Navigator assistance personnel, including that Non-Navigator assistance personnel are not acting as tax advisers or attorneys when providing assistance as Non-Navigator assistance personnel and cannot provide tax or legal advice within their capacity as Non-Navigator assistance personnel; _____(initial)

(2) Provide authorization in a form and manner as determined by the Exchange prior to a Non-Navigator assistance personnel's obtaining access to an applicant's personally identifiable information, and that the Non-Navigator assistance personnel maintains a record of the authorization provided in a form and manner as determined by the Exchange. The Exchange must establish a reasonable retention period for maintaining these records which has been set for ten years. _____ (initial)

(3) May revoke at any time the authorization provided the Non-Navigator assistance personnel pursuant to paragraph (g)(2) of this section. _____ (initial)

(4) As per CFR 45 § 155.1210 Maintenance of Records.

(a)General. The State Exchange must maintain and must ensure its contractors, subcontractors, and agents maintain for 10 years, documents and records (whether paper, electronic, or other media) and other evidence of accounting procedures and practices, which are sufficient to do the following:

(1) Accommodate periodic auditing of the State Exchange's financial records; and

(2) Enable HHS or its designee(s) to inspect facilities, or otherwise evaluate the State- Exchange's compliance with Federal standards.

(b)Records. The State Exchange and its contractors, subcontractors, and agents must ensure that the records specified in paragraph (a) of this section include, at a minimum, the following:

(1) Information concerning management and operation of the State Exchange's financial and other record keeping systems;

(2) Financial statements, including cash flow statements, and accounts receivable and matters pertaining to the costs of operations;

(3) Any financial reports filed with other Federal programs or State authorities;

(4) Data and records relating to the State Exchange's eligibility verifications and determinations, enrollment transactions, appeals, and plan variation certifications; and

(5) Qualified health plan contracting (including benefit review) data and consumer outreach and Navigator grant oversight information.

(c)Availability. A State Exchange must make all records and must ensure its contractors, subcontractors, and agents must make all records in paragraph (a) of this section available to HHS, the OIG, the Comptroller General, or their designees, upon request.

I have read, understand and agree to comply with the above regulations related to standards and functions applicable to Navigators and Non-Navigators Assistance Personnel. _____ (initial)

Disclosures or Disclaimers:

Name (Print) _____

Date: _____

License or NPN if applicable: _____

Signature: _____