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**Date:** August 31, 2017

**From:** Randy Pate, Director, Center for Consumer Information & Insurance Oversight

**Subject:** **Policies Related to the Navigator Program and Enrollment Education for the Upcoming Enrollment Period**

The Centers for Medicare & Medicaid Services (CMS) is announcing the following plan related to the Patient Protection and Affordable Care Act (PPACA) Navigator program and enrollment education for the upcoming open enrollment period.

For the upcoming Open Enrollment Period, CMS plans to spend \$10 million on educational activities in order to meet the needs of new and returning enrollees. CMS will target its advertising and outreach activities to educate consumers on the new dates of the Open Enrollment Period through digital media, email, and text messages. These outreach methodologies have proven the most effective in reaching existing and new enrollees. Outreach will also be targeted based on specific demographic and geographic data. This approach is not only based on previous evaluation of past Exchange outreach efforts, but is also consistent with promotional spending on Medicare Advantage and Medicare Part D.

The PPACA requires the establishment of a Navigator program to help facilitate enrollment of individuals through the federally-facilitated exchange (FFE) or state-based exchanges (SBE). Launched in 2013, the Navigator program was intended to engage consumers on the ground and provide information and educational outreach concerning the new health insurance exchanges. Since its inception, the program has helped educate over 9 million consumers about their options for Exchange coverage. Funding for the Navigator program comes from user fees paid by issuers participating in the FFE. During the most recent open enrollment period, Navigators received over \$62.5 million in federal grants while enrolling 81,426 individuals.

For the upcoming enrollment period, Navigator grantees will receive funding based on their ability to meet their enrollment goals during the previous year. For example, a grantee that achieved 100 percent of its enrollment goal for plan year 2017 will receive the same level of funding as last year, while a grantee that enrolled only 70 percent of its enrollment goal would receive 70 percent of its previous year funding level, a reduction of 30 percent. The new funding formula will ensure accountability within the Navigator program.

In this final year of a three-year grant cycle, Navigators will be asked to assist consumers with plan selections, particularly focusing on consumers who are currently enrolled in coverage in areas where issuers have reduced or eliminated plan offerings. In addition, Navigators will be

asked to focus outreach efforts to inform consumers regarding the new Open Enrollment dates for the upcoming 2018 coverage year, which runs from November 1 to December 15, 2017.

Consumers will continue to have multiple options to assist them in enrolling in coverage for 2018, including healthcare.gov, call center, agents and brokers, and enrollment directly with an issuer.