



Certified Application Counselor Program Announcement and Request for Applications

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1.0 Purpose of Announcement

The District of Columbia (DC) Health Benefit Exchange Authority (HBX)'s Certified Application Counselor (CAC) Program designates organizations throughout the District that will provide application assistance to consumers seeking health coverage and financial assistance paying for health coverage through our health insurance marketplace, DC Health Link. The CAC Program is an unfunded initiative that establishes designated organizations as partners to support DC Health Link efforts to provide access to health coverage to District residents and small businesses. It is designed for health care providers and other organizations whose missions are consistent with the roles of CACs and are willing to bear responsibility for the work of individual CACs.

As part of the CAC Program, DC HBX designates organizations that agree to certify staff or volunteers to perform the duties of CACs. These Designated Organizations must:

1. Submit a Designated Organization application for approval by DC HBX,
2. Ensure that the staff and volunteers to be certified as CACs complete mandatory training and pass a background check, and
3. Sign the CAC Program Designated Organization Agreement with DC HBX.

2.0 Background and Target Populations

2.1 Background

Shortly after the enactment of the Patient Protection and Affordable Care Act of 2010 (ACA), the District of Columbia initiated a multi-agency, coordinated effort to actively implement its provisions. In accordance with the ACA, the District enacted legislation in January 2012 to establish a qualified health benefit exchange. The District law is referred to as the Health Benefit Exchange Authority Establishment Act of 2011. The law called for the appointment of an eleven-member Health Benefit Exchange Authority Board (including seven voting members). The Board was sworn in on July 16, 2012, and is responsible for the implementation of the HBX in the District.

In December 2012, the District became one of the first jurisdictions in the nation granted conditional approval to establish a state-based marketplace to facilitate the sale of private health insurance to eligible residents and small businesses. Since that time, the District has made significant progress in building an innovative web-based portal that will provide residents and employers with a one-stop market for a wide variety of insurance products that will allow side-by-side comparisons of high-quality insurance plans, access to federal tax credits available to certain individuals, families, and small businesses to reduce the cost of coverage, and access to Medicaid. The DC HBX's web portal is called "DC Health Link."

District residents and businesses began enrolling in a range of health care coverage programs through DC Health Link on October 1, 2013. Customers using DC Health Link can find information about health coverage options and qualified health plans, including information about tax credits and cost sharing subsidies that will help reduce the cost of purchasing a qualified health plan. DC Health Link is the sole access point for eligible District residents to apply for and receive tax credits to reduce the cost of premiums and subsidies to reduce cost sharing.

In order to ensure successful implementation of DC Health Link, available insurance options need

to be promoted by multi-pronged outreach and education efforts and enrollment assistance must be provided targeting individual uninsured persons, hard to reach consumers, and small businesses.

The purpose of this program is to develop a group of trained experts - “DC Health Link CACs” - that can provide enrollment assistance to District residents. These organizations and individuals focus on the populations that the organization already serves.

District residents and businesses have many options for assistance. DC Health Link Certified Application Counselors provide primarily in-person assistance completing the eligibility and enrollment functions for those individuals that need and seek assistance. They are an additional source of support for District residents seeking coverage, along with the two other types of DC Health Link trained experts: brokers and assisters. Brokers help individuals, families, and small businesses identify their health coverage options and can recommend an insurance plan that best meets their needs. Assisters are employed by DC Health Link Assister Program grantee organizations and provide outreach, education, and application assistance to uninsured and hard to reach DC residents with whom they have direct and trusted relationships, and are trained to help individuals and families find out what they are eligible for and consider their coverage options.

2.2 Target Populations

DC Health Link is open to the following District residents:

- Individuals and families who legally reside in the District, including those who currently purchase insurance on their own in the individual insurance market, including self-employed individuals;
- Uninsured individuals and families and those receiving or eligible for Medicaid; and
- Small businesses (with 50 or fewer employees). Note: CACs are not expected to directly support small businesses. CACs will receive training to recognize small business marketplace questions and refer them to the customer service center.

3.0 DC Health Link CAC Program

The DC Health Link CAC program provides additional access points for District residents seeking assistance with the application for health coverage and financial assistance paying for coverage. The CAC program is implemented in compliance with 45 CFR § 155.225. CACs provide assistance to individuals applying for health coverage and financial assistance paying for health coverage, including Medicaid and tax credits for private insurance, and provide information to customers about the process of shopping for, selecting and enrolling in QHPs.

DC HBX Support for Designated Organizations and CACs

DC HBX is responsible for the following functions related to the CAC program:

- **Application Process:** Managing the Designated Organization application process.
- **Training:** Training will be held online. Designated Organization staff will be asked for a roster of staff and volunteers to be trained. Instructions will be provided on how to access and complete the online training. Training will include modules on the topics below.
 - DC Health Link overview and introduction;

- Eligibility;
- Qualified health plan (QHP) options;
- Insurance affordability programs;
- Benefits;
- DC Health Link privacy and security standards;
- Other applicable rules and regulations including conflict of interest; and
- How to make referrals to other members of the customer support network.
- **Ongoing Monitoring:** To include but not be limited to the items below:
 - Review of reports to be provided by Designated Organizations upon HBX request;
 - Audits and/or investigations in the event of complaints;
 - Review of Policies and Procedures if the organization makes changes to relevant policies after being accepted into the program and/or if audits and or investigations require said review; and
 - Any activities as might be required due to breaches in security, instances of compromise of privacy, or the risk of a compromise in privacy or security.
- **Designated Organization Decertification:** If necessary, DC HBX will terminate any designation agreement from a Designated Organization for non-compliance with the terms and conditions of the Designated Organization Agreement with DC HBX.

To support Designated Organizations and CACs in helping DC Health Link customers learn about the range of options, complete applications, and facilitate enrollment, DC Health Link provides the following services:

- **Website** capable of providing comparison of available qualified health plans. DCHealthLink.com is a secure place for customers to apply for advance premium tax credits and cost-sharing reductions, and to access an eligibility determination for Medicaid. The system also collects and submits enrollment applications for QHPs.
- **Training Materials** online.
- **Customer Service Center.** The DC Health Link Contact Center provides support by phone to customers and CACs. The Contact Center also supports language interpretation services for customers by request.
- **Tools and services** that support the blind and visually-impaired, non-English speaking customers, and TTY/TDD for the hearing impaired.

3.1 Designated Organization and CAC Expectations and Requirements

3.1.1 Requirements for Designated Organizations

The Designated Organization shall:

- Have a mission that is consistent with the roles of CACs (see section 3.1.2) and be willing to bear responsibility for the work of individual CACs;
- Have existing policies and procedures in place that protect the privacy of personal information and personal health information;
- Have existing non-discrimination and inclusion policies;
- Have existing policies and procedures for providing ADA-accessible locations and services and for providing reasonable accommodations for those with disabilities;
- Have general liability insurance;
- Complete background checks for staff and volunteers it certifies as CACs;

- Ensure all staff or volunteers who will act as CACs complete the DC Health Link provided online training;
- Ensure all staff and volunteers have completed the DC Health Link Privacy and Security Attestation (provided as Appendix A), the DC Health Link Certified Application Counselor Health Insurance Self Attestation Form (provided as Appendix B), and the DC Health Link Certified Application Counselor Conflict of Interest Attestation Form (provided as Appendix C) and retain copies of the completed forms for all current CACs and make these forms available to DC HBX upon request;
- Submit a report with the following information upon request:
 - The names of all current CACs
 - The number of customers assisted
 - Complaints received
 - Information about any CAC decertifications during the reporting period
- Agree to certify, monitor and evaluate Certified Application Counselors on at least an annual basis, and immediately inform DC HBX if it is decertifying a CAC;
 - Monitoring must include a plan to regularly assess adherence to privacy practices, accuracy of guidance given to customers, and training standards;
- Ensure that Duties and Standards of Certification are in compliance with 45 CFR § 155.225 (c) and (d).
- Agree to provide application assistance without charging customers or making assistance conditional on any other relationship, purchase, or direct or indirect consideration;
- Agree to adhere to DC Health Link Privacy and Security Standards, and submit to audit of such;
- Agree to inform customers, prior to providing assistance, of the role of CAC;
- Agree to disclose to customers, prior to providing assistance, any conflicts of interest;
- Agree to act in the best interests of customers;
- Agree to refer customers with unmet language interpretation or translation needs to the DC Health Link customer support for Language Line assistance;
- Agree to provide access to culturally and linguistically accessible services;
- Agree to provide reasonable accommodations for and services to people with disabilities;
- Agree to provide Application Counseling services that acknowledge insurance affordability programs and qualified health plan options for which a customer is eligible;
- Agree to DC HBX reporting and auditing requirements; and
- Agree to adhere to DC Health Link’s branding and marketing standards.

The Designated Organizations shall submit any required policies and procedures to DC HBX upon request.

Further Requirements:

Application Approval

Immediately upon application approval, DC HBX expects Designated Organizations to identify staff and volunteers who will be trained and certified; review policies and procedures to ensure compliance with DC HBX guidelines; and develop policies and procedures not in place but required to perform the duties described herein.

Decertification of a CAC

Designated Organizations shall allow for the potential of decertifying CACs. At a minimum, the plan shall allow for decertification for failure to complete training and for cause (e.g., due to complaints or multiple infractions of policies and protocols). Any decertification of an individual CAC shall be reported to the HBX within one (1) business day.

Reporting Requirements

The Designated Organizations shall provide reports to DC HBX upon request. The specific reporting requirements and formats will be provided to the point of contact and may include, at a minimum, the names of all current CACs, the number of customers assisted, a report of complaints received, and information about any decertifications that had occurred over the prior six months.

Enrollment

Open enrollment for private insurance coverage through DC Health Link begins on November 1 and generally continues until January 31. These will be the periods of highest activity, although CACs should also expect to provide enrollment assistance throughout the year as consumers apply for Medicaid and have life-change events that may change eligibility.

Conflict of Interest

Designated Organizations and CACs must disclose to DC HBX and customers any relationships the Designated Organization or CAC has with QHPs or insurance affordability programs, or other potential conflicts of interest. Designated Organizations must disclose these relationships to DC HBX and shall require that any CACs disclose the same information to them.

Privacy and Security Requirements

DC HBX has developed Privacy and Security Standards for DC Health Link in compliance with state and federal regulations to protect the data that DC Health Link receives, processes, stores, and handles on behalf of applicants, carriers, small-business owners, and others. Unauthorized disclosure of information can compromise DC Health Link business operations, violate individual privacy rights, and possibly constitute a criminal act. The Designated Organization shall agree to adhere to both DC Health Link Privacy and Security Standards and federal standards.

Liability

Designated Organizations are liable for the conduct of the Certified Application Counselors under their supervision, including (but not limited to) compliance with the roles and responsibilities set out in this Application and the Agreement. Designated Organizations are required to hold DC HBX harmless for any legal claims or damages resulting from Certified Application Counselors' actions. Applicants are required to show proof of insurance with signed agreement. Designated Organizations should consult an insurance professional for advice on appropriate liability insurance but at a minimum include \$2,000,000 aggregate General Liability insurance.

Additional Requirements for Health Insurance Carrier Staff who are CACs:

Health Insurance Carrier staff members who are CACs must do the following:

- Only provide assistance to current clients and those who contact them directly
- Must inform customers they are helping about all plan options for all carriers
- Must disclose any potential conflicts of interest

- Must ask if the customer has worked with a broker in the past and if he or she would rather work with that person again to help select a plan

3.1.2 CACs: Roles, Responsibilities and Duties

The Designated Organizations will be responsible for ensuring the duties performed by the CACs will align with federal requirements (45 CFR § 155.225 (c)) which require them to:

1. Provide information to individuals and employees about the full range of QHP options and insurance affordability programs for which they are eligible;
2. Assist individuals and employees to apply for coverage in a QHP through DC Health Link and for insurance affordability programs; and
3. Help to facilitate enrollment of eligible individuals in QHPs and insurance affordability programs. Facilitating enrollment will include providing basic instruction to customers about the QHPs available in DC HBX, the plan shopping experience and decision tools, providing information about next steps, and connecting the customer to a member of the DC Health Link customer service system (Service Center, Assistants, Agents/Brokers) for plan selection assistance, if needed.

The role of the CACs will be to act in the best interest of the customer and provide DC Health Link customers with fair and impartial information and services that help educate them about:

- DC Health Link;
- The available programs, including insurance affordability programs such as Medicaid and subsidized coverage;
- Eligibility for QHP premium tax credits and cost-sharing reductions;
- How a customer can complete an application;
- The plan selection process and what they can expect; and
- Where to go for additional assistance with plan selection or unmet needs.

CACs can help individuals complete an application, describe the plan selection and enrollment process and clarify distinctions among QHPs; however, **CACs shall not provide advice or input on an individual's plan selection.**

3.2 Process of Certifying and Recertifying Individual CACs

Once a Designated Organization has received approval, the Designated Organization will complete the following process to certify individual CACs and recertify CACs on at least an annual basis:

1. Submit a list of those to be trained to DC HBX so that DC HBX can provide online access to training.
2. Submit a list to DC HBX no more than once per week of new CACs who have met all the requirements to become Certified Application Counselors. Before submitting the name of a new CAC, the Designated Organization must ensure that the CAC has:
 - a. Passed a background check according to DC HBX standards;
 - b. Completed the online CAC training;
 - c. Completed the DC Health Link Certified Application Counselor Privacy and Security Attestation Form;
 - d. Completed the DC Health Link Certified Application Counselor Health Insurance

- Attestation Form;
- e. Completed the DC Health Link Certified Application Counselor Conflict of Interest Attestation Form

4.0 Who May Apply

Individual organizations, associations, government agencies or health insurance carriers may apply. DC HBX encourages applications from organizations such as community health centers (including Federally Qualified Health Centers); hospitals; health care providers; Ryan White HIV/AIDS providers; behavioral health or mental health providers; agencies that have experience providing social services to the community such as Supplemental Nutrition Assistance Program (SNAP) outreach or energy assistance; and other local governmental agencies that have similar processes and protections in places such as health departments and libraries.

5.0 Application Preparation and Approval Process

5.1 Application Preparation

DC HBX requests qualified applicants submit completed and signed applications and agreements using the DC Health Link CAC Program Designated Organization Application and Designated Organization Agreement that can be found on the DC HBX website. Applicants shall email their application and agreement to **CAC@dc.gov**. A confirmation email will be sent to verify receipt as soon as DC HBX has verified the documents were received. DC HBX will communicate with the primary contact identified on the application.

After an organization is approved, individual CACs will need to complete all program requirements, including online training, before serving as CACs.

Questions and Requests for Clarification: Email inquiries should be directed to: **CAC@dc.gov** with “Designated Organization Question” in the subject line.

Application Withdrawal: Applications may be withdrawn by Applicants at any time.

DC HBX Questions, Requests for Clarification or Modifications: During the application review, DC HBX may contact Applicants for clarification of information provided on their application.

Confidentiality: DC HBX will not make the contents of applications available to the public; however, we will comply with the DC Freedom of Information Act as necessary.

5.2 Approval Criteria

The Designated Organizations shall be evaluated on the criteria as set forth in section 3.1.1 above. The organization must be able to fulfill the requirements listed in section 3.1.1 to be approved as a designated organization.

Appendix A



DC Health Link Certified Application Counselor Privacy and Security Attestation

I, _____, a DC Health Link Certified Application Counselor, attest that I will use sufficient privacy and security procedures to ensure that:

- a. I will protect personally identifiable information with reasonable
 - Operational safeguards,
 - Administrative safeguards,
 - Technical safeguards, and
 - Physical safeguards,to ensure its confidentiality, integrity, and availability and to prevent unauthorized or inappropriate access, use or disclosure.
- b. I will specify the purpose for which personally identifiable information is collected. The use and disclosure of such information will be limited to and consistent with that purpose.
- c. I will NOT use or disclose personally identifiable information for a purpose other than what was specified without further consent of the individual or as required by law.
- d. I shall maintain the same level of privacy and security with regard to personally identifiable information received from the DC Health Benefit Exchange Authority or its designees.

- e. I shall report a breach of any personally identifiable information immediately to the head of my organization and to the appropriate manager.

- f. I shall allow an individual to obtain simple and timely access to any personally identifiable information I maintain and correct such information if erroneous.

- g. I agree to comply with DC HBX's privacy and security policies and standards found on the DC HBX website and federal standards set forth at 45 CFR 155.260.

Signature

Date

Appendix B

**DC Health Link Certified Application Counselor
Health Insurance Self-Attestation Form**

Self-Attestation of Health Insurance Coverage

I hereby personally attest that:

- I currently have health insurance coverage.
- I will enroll in health insurance coverage through my employer once hired as a DC Health Link Assister/Navigator/Certified Application Counselor.
- Where health insurance is not offered by my employer, I will seek to enroll in health insurance coverage through DC Health Link during the next Open Enrollment Period Opportunity.
- I will seek an exemption from the requirement to have health insurance coverage.

Print Name

Date

Signature

Appendix C

DC Health Link Certified Application Counselor

Conflict of Interest Disclosure

A. "Conflict of interest" means having a private or personal interest sufficient to influence, or appear to influence, the objective exercise of an Assister/Navigator/CAC's official duties. Federal requirements indicate that an Assister or Navigator must disclose some types of information about their business relationships or the business relationships of certain family members to the Exchange and any consumers that receive application assistance from that individual.

B. I, _____ attest that as an Assister/Navigator/CAC affiliated with _____ (Name of Organization) that:

- I do not intend to sell any lines of insurance, including those covered by the prohibitions on conduct in 45 CFR §155.210(d) while carrying out my consumer assistance functions;
- I do not have any existing employment relationships or former employment relationships within the last five 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; and
- I do not have 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.

If any of the above statements are not true, I am disclosing to the Exchange the following regarding my business relationships and/or financial or contractual relationships below (please attach an additional page if necessary):

C. The undersigned attests that the above is true and accurate and agrees that if any additional need for disclosures arises after the date of this signature, the Assister/Navigator/CAC shall immediately make a full disclosure in writing to their Assister/Navigator/CAC-designated organization and the DC Health Benefit Exchange Authority of all additional information.

Date: _____ By: _____