



Application Assistance 101

Helping Individuals Sign Up for Health Insurance



Open enrollment has started, and if you are trained to help consumers apply for health insurance, this fact sheet is for you!

You may be a navigator, a certified application counselor (CAC), an in-person assister (IPA), or a staff member at a community health center (CHC). But regardless of your title or where you work, if you help consumers apply for health insurance (including Medicaid and the Children's Health Insurance Program—CHIP) through the marketplace, this fact sheet includes questions to consider and best practices you may want to implement.

Remember: Depending on the role you are playing (navigator, CAC, IPA or CHC) and the state you are in, your work is likely governed by different rules and requirements. You should always check with your state and those funding your assistance efforts (for example, the Centers for Medicare & Medicaid Services—CMS, the Health Resources and Services Administration—HRSA, or private funding) to ensure that you are complying with all relevant policies.

1 Setting Up and Monitoring Your Application Assistance Process

Will you be doing outreach to find uninsured consumers, or will you serve only those who already turn to you for assistance? Either way, you'll want to use these successful techniques.

Best Practices

- Promote your services to your target audience, emphasizing that trained staff and/or volunteers will provide application assistance.
- List the languages in which you can provide assistance.
- Publicize your days and hours of operation.
- Offer services for extended hours, including nights and weekends, when possible. Remember that most people who are eligible for new coverage options have jobs and likely work during the day. If they cannot get help at a time that is convenient for them, they may never apply.
- Monitor wait times—you don't want to discourage people from enrolling!
 - If walk-ins are an option, create a process to monitor wait times.
 - If you take scheduled appointments only, monitor how long it takes for people to get appointments.
 - If wait times are too long, address the issue by increasing staff or volunteer capacity.

- Coordinate consumers' appointments so they align with other appointments consumers may have with your organization (for example, schedule them on the same day, and group appointments in the morning or afternoon, etc.).
- Respond appropriately to consumers' needs, and handle their requests in a timely manner.

Follow-Up Procedures

- Establish a follow-up process to ensure that consumers who've completed an application receive health insurance.
 - Integrate any relevant state and federal policies and rules regarding personally identifiable information (PII) into your follow-up process, and be consistent with your organization's own policies.
 - Have consumers sign a consent form that addresses any future contact you might have with them.
- Train staff and/or volunteers on the new follow-up process, and create mechanisms to monitor their progress. Following up with consumers after they submit their applications will:
 - Confirm that consumers have successfully enrolled in health insurance.
 - Provide an opportunity to ensure that consumers understand the next steps in the process (such as paying monthly premiums, when applicable, so they can keep their health insurance), as well as emphasize the importance of reporting any life changes (such as changing jobs or moving).

2 Incorporating Customer Service Best Practices Into Appointments

What can you do to prepare for appointments?

- Ensure that staff and volunteers are familiar with your organization's policies regarding outreach, in-reach, and using PII, and make sure that signed consent forms are in place before reaching out to consumers.
- Set up an organizational reminder system that notifies people about their appointments by texting, e-mailing, or calling them the day before.
- Ask consumers if there are any barriers that might prevent them from keeping their appointments, such as transportation or child care issues, and assist them if you can.
 - You may not be able to assist consumers with everything they need to help them get to their appointments, but do the best you can!
 - Your conversations with consumers will also help you assess whether they will be able to make their appointments.

Note: Consumers may need to have more than one appointment with you or another staff member or volunteer. Initial appointments could cover an overview of their options, and the following appointment could focus on reviewing their eligibility determination notices or on the actual application process.

! Important:

Always follow state, federal, and your organization's rules when it comes to consent forms.

What can you do during appointments to make them go smoothly?

- Build trust with consumers by greeting them warmly, smiling, and listening carefully throughout the appointment.
- Answer any questions they have to the best of your ability. If they ask something that is outside your scope of knowledge, tell them that you don't know the answer and will get back to them.
- Be patient, detail-oriented, and take your time (do not rush).
- Ensure appropriate accommodations are available for consumers with disabilities.
- Have the appointment in a space that is private and free from distractions.
- Assist consumers in a culturally sensitive manner. Speak in their preferred language or use language translation services when appropriate.
- Check with the consumer frequently to make sure that he or she understands the information. One way to do this is to ask consumers in a non-shaming way to say in their own words what they need to know or do. This will give you a chance to check how well they understand what you've said, and, if necessary, you can re-teach the information.
- Ask if they have any questions, and remember to provide them with information on how to follow up with your organization (or ask them to sign the consent form so you can contact them about additional resources or notifications).

Note: Some people may shake their heads when asked a question, indicating that they understand what you are saying or agree with you, but this may not be the case. That is why it is important to check frequently with the consumer to ensure you are both "on the same page."

What should you keep in mind during appointments?

- Provide consumers with unbiased information about health insurance. The most important task is to help them choose plans that are right for them (plans that meet their health care needs and their budget).
 - Comply with privacy and security standards, and remind consumers that their personal information will remain confidential.
- Inform consumers that even if they're able to enroll in health insurance through the marketplace, they won't receive benefits until they select a plan and make their first monthly premium payment (if applicable).
- Explain to consumers buying health insurance through the marketplace that they will receive a letter from the marketplace prior to the next open enrollment period.
 - The letter will notify them of any changes in the type of coverage or financial help they can get the following year or additional information needed by the marketplace.
 - Consumers will need to review, sign, and return the letter to the marketplace and may need to submit additional information.
 - Individuals that remain eligible for the marketplace will stay enrolled in their health plan unless they terminate coverage or switch plans during open enrollment.

Note: For individuals enrolling in Medicaid, make sure they are aware of the steps they need to take to maintain their coverage.

What materials can you provide consumers to take home with them after the appointments? Provide consumers with a “next steps document” that includes the following:

- Written information about the process consumers will need to follow in order to report any life changes throughout the year, as well as information on what to do prior to and during the next open enrollment period.
 - Changes in life circumstances (such as income, address, or family size) can affect the kind of health insurance consumers may be eligible for, including Medicaid and CHIP, and whether a consumer will get more or less financial assistance.
 - In some cases, consumers may face penalties at tax time if they fail to report changes.

- Guidance on how to use their health insurance. For example, you may need to educate consumers about when it is better to see a primary care physician versus going to the emergency room.
- Culturally appropriate resources to help them identify primary care physicians in their network, as well as information on how to set up a first appointment.

Note: If you are not able to provide all this important information to consumers, refer them to other resources in the community.

