Various types of assisters are at work across the country to support consumers with enrollment in health coverage. Consumers will be screened for eligibility for both Medicaid and the Marketplace and will be referred to the appropriate program for enrollment, regardless of where they first seek coverage. State Medicaid agencies can play an important role to help ensure Marketplace assisters are trained on the essentials of the Medicaid program. Medicaid agencies are also offering information on the Marketplace to their staff. This brief provides an overview of federal training for Marketplace assisters as well as examples of how state Medicaid agencies in Federally Facilitated Marketplace (FFM) and State Partnership Marketplace (SPM) states have worked with a diverse set of partners to advise on, develop and deliver state-specific consumer assistance training. This brief provides an overview of federal training for Marketplace assisters and examples of how state Medicaid agencies have worked with a diverse set of partners to advise on, develop and deliver state-specific consumer assistance training, including training for traditional Medicaid assisters.
Federally Developed Medicaid Training for Marketplace Assisters

The Affordable Care Act (ACA) funds an array of consumer assistance programs: navigators, in-person assistants (IPAs), certified application counselors (CACs) and federally qualified health centers (FQHCs). The types of consumer assistance available in each state depend on which Marketplace model the state has chosen. All State-Based Marketplaces (SBMs) utilize navigators and CACs, and some may have an optional IPA program. State Partnership Marketplaces (SPMs) performing consumer assistance functions utilize navigators, IPAs and CACs while FFMs have only a navigator and a CAC program (there is no federal IPA program). The federal government specifies training requirements for in-person consumer assistants, and states have the option to create additional certification requirements.

Navigators and CACs in FFM and SPM states are required to complete federal training before they can assist consumers with enrollment in Medicaid, the Children’s Health Insurance Program (CHIP) or Marketplace plans. This federal training includes modules that provide background information on the Medicaid program. The modules focus on issues that include eligibility and enrollment, state-specific information about Medicaid expansion and the role of the FFM and SPM in assessing or determining eligibility for Medicaid.

The Health Resources and Services Administration (HRSA) awarded outreach and enrollment grants to FQHCs across the country to assist with enrollment of uninsured consumers. The awards totaled $208 million to over 1100 health centers in all 50 states and the District of Columbia. There are training requirements for the health center staff that conduct outreach and assess program eligibility, and FQHC grantees in FFM and SPM states must apply for CAC designation and ensure that employees complete the CAC training. The training contains general information on the Medicaid program to facilitate enrollment of individuals into the Marketplace, Medicaid or CHIP.

State Training about Medicaid for Federal Marketplace Assisters

State Medicaid officials in some states are working with the FFM or SPM to ensure assisters understand details about the state’s Medicaid program so they can enroll consumers in the appropriate coverage program.

The Illinois Health Insurance Marketplace partnered with the University of Illinois at Chicago School of Public Health (UIC) and the state’s Medicaid agency to create a comprehensive state-specific training for IPAs in Illinois. With the expertise and guidance of UIC, the state developed a three-day training with a combination of online and in-person modules. The training includes a half-day in-person module on the state’s Medicaid program in order to provide background on consumer eligibility for the various coverage options available in Illinois. The training covers a variety of Medicaid issues, programs and policy topics such as Modified Adjusted Gross Income (MAGI), tax filing, household size, the state’s integrated eligibility system and Medicaid expansion.

Arizona Medicaid is leveraging its history of strong partnerships with community organizations and social service providers to educate assistants about the new coverage landscape. The Arizona Medicaid agency is working closely with Cover Arizona, a coalition of community partners engaged in conducting outreach and enrollment assistance for the state’s Medicaid program and the FFM. Medicaid staff members participate in public forums around the state to ensure community partners understand the Medicaid expansion and how Medicaid coordinates coverage with the FFM.

A state law in Montana requires navigators, CACs and certified insurance producers to be licensed and trained with state-specific information. The law also authorized the Montana Commissioner of Securities and Insurance (CSI) to train other assisters, including volunteers. The Medicaid agency is working closely with CSI on the education and training of assisters. The Medicaid agency developed a one-page fact sheet providing background on the state’s Medicaid program for the CSI navigator.
training as well as a presentation slide about state Medicaid and Marketplace eligibility levels. The Medicaid agency also assists Marketplace CACs and navigators with questions and is exploring other ways to collaborate.

**STATE TRAINING ABOUT THE MARKETPLACE FOR MEDICAID STAFF**

The **South Carolina** Department of Health and Human Services is increasing the capacity of its call center to assist those eligible but not enrolled in Medicaid, even though the state has opted not to expand the program’s eligibility levels. The agency contracts with the United Way, and pays for call center workers who answer Medicaid calls, which often relate to eligibility questions or changes in family status. The Medicaid agency collaborates with the United Way on training for these call center workers. The training includes information about a range of eligibility topics such as Modified Adjusted Gross Income (MAGI) so workers are able to address consumer questions and help them navigate through the new system.

The **Illinois** Medicaid agency is training its eligibility caseworkers on basic Marketplace information so they are able to assist those consumers who seek coverage through Medicaid, but are actually eligible for coverage through the Marketplace.

Some states have developed websites intended primarily for direct use by consumers, but which also help Medicaid agency staff assist consumers with enrollment in health coverage. The **Arizona Medicaid website** includes information about the FFM to assist consumers who might be eligible for coverage through the Marketplace. The website provides background information on both the FFM and Medicaid expansion in Arizona. Consumers or Medicaid agency staff assisting them can complete a general eligibility screening through the Medicaid eligibility website, and are then directed to the Federal Marketplace website for the actual shopping experience.

**CONCLUSION**

Medicaid agencies will continue to have an important role in ensuring that all eligible individuals are enrolled in health coverage regardless of a state’s decisions on Marketplace models and Medicaid expansion. Incorporating important Medicaid program information in assister trainings and including Marketplace information in training for Medicaid staff will help achieve the ultimate goal of enrolling consumers in the appropriate health coverage program.

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1. 45 CFR 155.215 (2) (b)