APPENDIX A – Comments and Responses for Information Collection Related to Proposed Collection of Navigator Reporting Requirements

Comment: One commenter from Arizona expressed several concerns and suggestions about the intended meaning for the proposed data to be collected. A concern included the need to reconcile the projected goals that are required in the non-competitive renewal and the data listed in the proposed reporting requirements. One suggestion noted that there should be question/data point regarding the number of consumers assisted with "post enrollment" questions in the weekly report. Another request was to suggest the addition of a question/data point regarding the number of consumers assisted with renewing coverage (both selecting the same plan and selecting a new plan). The commenter also suggested a revision to the weekly report to capture both number of one-on-one appointments and number of consumers applying for coverage when an application is created.

Response: CMS acknowledges the various comments received about the proposed reporting requirements. The initial comment addressing the projected goals in the non-competing continuation application and the lack of alignment with the proposed reporting requirements does not specifically address the purpose of this Paperwork Reduction Act (PRA) package and it is outside of the scope of this notice. However, CMS will revisit the information requested in the non-competing continuation applications and to align with our proposed metrics once final. Another comment addressed the inclusion of a post enrollment question in the weekly progress report. CMS has purposefully modified the proposed reporting requirements to eliminate any references to pre- and post- enrollment activities. We believe that more emphasis should be placed on Navigator activities performed throughout a given year, not just during open enrollment. Another suggestion is to add a data element on renewing coverage. CMS believes that the proposed reporting requirements broadly represent the essence of Navigator activities as well as minimizes the data elements, like renewals, that may be collected in other areas across CMS. The final suggestion includes collecting information on one-on-one appointments. In the previous grant periods, CMS collected metrics on appointments which did not provide a full picture of the Navigator's experience with a consumer. Therefore, we have revised our metrics to focus on each one-on-one interaction with a consumer rather than appointments vs. enrollments. This emphasis is designed to provide our grantee organizations with a greater opportunity to capture the vast array of experiences with consumers. With the proposed reporting requirements, it is our goal to collect useful data necessary for program monitoring and oversight.

Comment: A commenter from Iowa suggested that the events worksheet should include the times of the events in order to advertise schedules. In addition, the commenter noted that the reporting requirements do not address Medicaid applications started and completed.

Response: CMS acknowledges the suggestion to modify the data collection on events to include times of planned activities. CMS also supports incorporating an additional data element to reflect the times of planned events. This inclusion may be beneficial for scheduling purposes. At this time, CMS does not intend to capture the number of Medicaid applications started and completed, and will also be eliminating the metric on the number of Marketplace applications started.

Comment: One commenter from Missouri indicated that there should be a separate data collection on sessions where Navigators help consumers compare QHPs vs when Navigators actually help the consumer enroll. The commenter further noted that there are not any metrics on dental plan enrollments. The commenter also thought it may be helpful to have a location to show other Marketplace issues besides solely "Data Matching Issues." The final suggestion including making very clear wording and instructions in order to record the number of sessions/appointments or the number of individuals represented on the applications.

Response: CMS acknowledges these comments. CMS is committed to capturing strong data to assist with overall program monitoring and oversight. Although our metrics provide a broad range of Navigator activities, we understand that the list is not comprehensive. We support the suggestion to include other types of complex cases and Marketplace issues. Our general intent is to afford our Navigators with the opportunity to collect data on specific programmatic areas that may not be captured in other areas across CMS. Once the reporting requirements have been finalized, the Navigator program will issue guidance to grantee organizations further clarifying the intent of each measure. Please note that the current measures do not reflect any references to sessions or appointments.

Comment: One commenter from Massachusetts thought it would be helpful to receive an email notification after the successful submission of the weekly report.

Response: Although this comment does not specifically address the purpose of this Paperwork Reduction Act (PRA) package and it is outside of the scope of this notice, CMS notes the comment about receiving email notifications once the weekly report has been submitted. Due to system limitations, email notifications are not available at this time.

Comment: Another commenter from Arizona offered suggested areas to improve future reporting requirements by combining the two weekly metrics to facilitate ease with reporting. The commenter also suggested that deleting the category to providing education only and including Coverage to Care activities. An additional suggestion included adding the number of consumers who have sought post-enrollment assistance from an Assister. Furthermore the commenter sought clarification on defining the list of five most common languages spoken as well as the types of consumer assistance offered directly and indirectly. The commenter wanted to determine if data should be collected on the preferred language by the individual consumer being assisted regardless if English is used for assistance. Lastly, the

consumer sought clarification on how and when to account for the consumer assistance individually and collectively, if family members and others are involved.

Response: CMS supports the recommendations on improve future reporting requirements for the weekly report. CMS has revised the metrics to combine all subcategories for consumer assistance under a single metric. This recommendation to combine education only and Coverage to Care initiatives will provide more clarification on the activities that assisters may perform.   With respect to the quarterly report, CMS will modify the measure to list up to five most common languages. The intent of this measure is to better understand the commonly used languages by consumers who are seeking assistance from Navigators. In the upcoming guidance on the reporting requirements, CMS will define when and how to capture individual or represented consumers.

Comment: A commenter from Texas offered several suggestions to improve reporting. One suggestion included adding data elements to include when TV, Radio and or other medium is used to message and that the viewership/listening market should be as provided by that medium used/indicated in the report. The commenter also suggested that in the monthly report, there should be a review the progress of drawn and spent project dollars to date. Another suggestion is to add "if applicable" for the measure on how grantees will ensure the successful performance of sub-grantees/sub-recipients. Another recommendation is to provide a checklist of commonly noted methods of collaboration with CMS regional offices. The commenter also noted that a clear and concise definition of the term "supporting" would help guide grantees in responding to this required information.

Response: CMS has reviewed the recommendations for enhancing the reporting requirements and values your support of the Navigator program. The recommendation to add data elements on impressions, viewership, and listenership from various media sources will be incorporated. CMS supports the opportunity to allow Assisters to capture these elements for event planning and marketing purposes. Regarding the metric on grant funds spent, CMS believes that a retrospective account of the budget will allow grantee organizations more flexibility to document their completed projects. Many grantee organizations do not uniformly maintain the same month end for accounting processes, making end of the current month report difficult or inaccurate.   CMS also will revise the metric listing the five most common languages spoken by consumers to include listing "up to" five most common language spoken by consumers. Furthermore, CMS duly notes your suggestions to clarify other metrics. Many of the suggested comments have been incorporated into the metrics and/or will be clarified in the Navigator reporting guidance that will be released in the fall to all grantees.

Comment: One commenter from Pennsylvania indicated appreciation for the proposed changes and provided additional suggestions for improvement. The suggestions include: separating the subcategories on applying for Medicaid/CHIP into two separate entries; adding a subcategory on reenrolling/renewing; and incorporating two new reporting elements

(Medicaid applications started and CHIP applications started) in the outreach, education, and marketing tool.

Response: CMS acknowledges the commenter's support for the proposed changes. CMS has made changes to clarify our performance measures and further assist with program effectiveness. We also believe that these recent changes broadly capture Navigator activities as well as address the nature of the Navigator cooperative agreement. With respect to Medicaid/CHIP, CMS is proposing to modify the metric on enrollment assistance to account for helping with Medicaid/CHIP applications or referrals. CMS does not intend to capture the number of Medicaid/CHIP applications started at events, however, and will also be eliminating the metric on the number of Marketplace applications started.

Comment: One commenter from New Hampshire described her interpretation of the metric on the number of consumers who sought enrollment assistance and wanted to capture interactions with consumers in the general inquiries. However, the commenter suggested that we should only indicate taxes vs assisting with Marketplace tax forms (1095A). Also, the commenter recommended that the wording in the monthly metric on best practices should be changed from tactics to strategies and from collaborations to partnerships.

Response: CMS supports the collection of robust data to facilitate program oversight. CMS has made every effort to capture meaningful data and data that broadly encapsulates Assister activities. Since answering general inquiries is a significant part of Navigator efforts, CMS will re-introduce this data element as part of the Navigator reporting requirements for the weekly progress report. We, however, will also maintain the reference to assisting consumers with questions related to the Marketplace tax forms (1095A). We believe that this effort adequately supports work performed by Navigators in the Federally-facilitated Marketplace and State Partnership Marketplaces as part of their required Navigator duties. Finally, CMS does not anticipate changing the metric on best practices in the monthly report.

Comment: Another commenter from Texas recommended that the number of consumers who have been assisted with general inquiries about health coverage is maintained, but only to be used to track or count the number of phone, social media or email inquiries.

Response: CMS recognizes the commenter's support for the proposed reporting requirement changes as they reflect the work that Navigators perform. Since addressing general inquiries about health insurance options is a significant part of Navigator efforts, CMS will re-introduce this data element as part of the Navigator reporting requirements for the weekly progress report.

Comment: An anonymous commenter indicated some concerns with reporting. One concern was differentiating between the number of applications and the number of people actually enrolling in health insurance. Another concern dealt with a need to determine better way to track total target population in an outreach event, since their group has weekly/monthly enrollment sites that are not necessarily appointment driven. The commenter also suggested

that the weekly and monthly report submission process could be more efficient by combining the event and consumer totals. Another suggestion involved allowing navigator administrators to email reports from approved email addresses.

Response: CMS acknowledges the comments and needs more context to address some concerns. In an effort to provide clarity around whether reporting should be done based on the number of applications vs. number of people actually enrolling, the overall metric for the weekly reporting has been updated to focus on one-on-one interactions with a consumer. CMS remains committed to adopting strong data collection for program oversight. CMS will continue to provide grantee organizations with the flexibility to capture plans for events, as well as assess the level of interaction with consumers who may need assistance. In addition, in our efforts to streamline the reporting submissions, CMS has established databases to collect programmatic reports and other information from grantee organizations.

Comment: A commenter from Alaska appreciated some of the suggested improvements and offered additional comments to improve the reporting metrics. One suggestion included changing the "number of consumers targeted" to "number of consumers expected to be reached". Another suggestion was to retain the number of consumers who have sought post-enrollment assistance from an Assister.

Response: CMS notes the commenter's support of the reporting requirements. We will adopt the commenter's suggestion to change the data element to the number of consumers expected to be reached for purposes of marketing/promotion activities only. This element will be removed when reporting on events. CMS has deliberately removed the word "post-enrollment" from our metrics this year to reflect the continuous activities required of our Navigators throughout the year, not just during open enrollment. Once the reporting requirements have been finalized, the Navigator program will issue guidance to grantee organizations clarifying the intent of each measure.

Comment: An anonymous commenter indicated support for the improvements to the reporting requirements. The commenter recommended that CMS should remove the "only" from "education only" or having separate categories for "education" and "education only" in the weekly reporting metric. The commenter also noted that health insurance literacy is a pre-enrollment event and should not be placed in post-enrollment activities. A final suggestion was to include a "complex problem" category.

Response: CMS values useful data collection to further advance the work of the Navigator program. We have made several modifications to our proposed metrics, including create one large category for Navigator work (rather than separating out enrollment and post-enrollment work), eliminating any references to post-enrollment activities, and adopting a metric to capture complex cases and other Marketplace issues. CMS is striving to incorporate major activities performed by Navigators.

Comment: A commenter from Georgia proposed revising the outreach, education, and marketing data collection to capture events associated with outreach, education, and enrollment. Another recommendation involved creating a separate spreadsheet for marketing efforts. The last comment included removing the request for monthly expenditures from the monthly report.

Response: CMS has noted the commenter's suggestions on the reporting requirements. After considering the comments, CMS is proposing to revise the events and marketing/promotion tool to incorporate data collection associated with various media venues, including account for viewership, listenership, and impressions. We feel that these changes will allow grantee organizations to report on various media related sources, including TV, radio, and social media. CMS, however, has decided to maintain the data elements on monthly expenditures as a means to assist with program oversight and monitoring.

Comment: An anonymous commenter suggested that it would be helpful if there was a column noting that it is an event open to the public. These events (date, time, location, contact email, or phone number) could be uploaded into healthcare.gov for people who are actively searching for assistance to find.

Response: CMS acknowledges the comment. CMS continues to explore ways to leverage data collected from events to other federal databases.

Comment: An anonymous commenter recommended the metrics should refer to the number of individuals assisted vs. the number of consumers assisted. The commenter also noted that the reporting requirements do not include the actual event attendance.

Response: CMS has reviewed the comments. We will maintain consumers as the unit of metrics in the proposed reporting requirements. The current reporting requirements do not require Assisters to provide actual attendance at an event, and will also eliminate the capturing of anticipated event attendance.

Comment: A commenter from Alaska supported the proposed changes for the reporting requirements. The commenter also recommended an additional data element to include casework as part of the sub-activities under the number of consumers who have sought assistance from an Assister.

Response: CMS acknowledges the recommendation to the proposed reporting requirements. We will broadly introduce a data element to address dealing with complex cases and other Marketplace issues.

Comment: One commenter from Oklahoma suggested that the quarterly report should be revised to include listing the most common languages, up to five, other than English, spoken by consumers you have assisted this quarter.

Response:	CMS supports the commenter's recommendation on the proposed reporting requirements.

Comment:	One commenter from Louisiana urged CMS to mirror the data request for our cooperative agreement renewal application and the prior year's reporting requirements. The commenter also recommended that the inclusion of more definitions and explanation on the meaning of some fields.

Response:	CMS has reviewed the comment about mirroring the data request in the non-competing continuation application and the prior year's reporting requirements. CMS will plan to reconcile any inconsistencies with the proposed reporting requirements once they're finalized.

Comment:	A commenter from Florida supported the revisions to the proposed reporting requirements. The commenter further suggested adding an "other" section to the Outreach, Education and Marketing events page to encompass populations not currently listed such as Justice involved populations, recently arrived immigrants etc. The commenter also noted that the form not include regular recurring navigation assistance office hours as outreach, education & marketing events so as to clearly differentiate between C2C, ACA 101 etc presentations/workshops from the Providing Education only (no enrollment) enrollment assistance and consumers who have sought assistance from and Assister with: Assisting with health insurance literacy under Coverage to Care activities on the weekly progress report.

Response:	CMS acknowledges the recommendations and seeks to create a more robust data collection tool for our grant organizations. We feel that the proposed reporting requirement will help with overseeing programmatic activities. The required information collected for events has been modified for clarity, including the opportunity for grantees to provide a description of the event.	Comment:	An advocacy organization in the District of Columbia provided several recommendations to CMS about the reporting requirements. The commenter offered suggestions to improve the proposed reporting requirements based on three categories: (1) Aligning reporting requirements with CMS priorities and Navigators' range of duties; (2) Minimizing the administrative burden of the reporting process; and (3) Clarifying and standardizing the weekly reports. The recommendations included: requiring Navigators to report the number of consumers who are enrolling for the first time and the number who are renewing; reconsidering the way events in the spreadsheet are currently grouped (discrete types of events with different metrics for each); simplifying the events reporting and allowing Navigators to report on an event-basis, allowing Navigators to report on all descriptors for each event; mirroring the data requests for the Navigators' cooperative agreement renewal application and the prior year's reporting requirements; exploring ways to create a more flexible reporting mechanism that, where possible, can better connect with other systems; providing more clarity around how to handle consumers; providing a supplementary set of definitions that are tied to the intent of the metric (i.e. describe whether the metric is it about kind of interaction, number of consumers helped, or the kind of help a consumer received);

specifying whether the metrics are mutually exclusive or independent; and providing specific instructions on how to handle multi-encounter consumers and consumers who fall into multiple categories.

Response: CMS has reviewed the improvement recommendation for the proposed reporting requirements. After careful consideration of the recommendations, CMS will modify some data elements as noted in the proposed reporting requirements. With the proposed changes, we seek to achieve sound metrics and greater alignment between with our program efforts and the duties performed by our grantee organizations. We also recognize that the activities captured in our metrics may not comprehensively address all Navigator duties and we strongly feel that the proposed metrics offer a broad representation of Navigator duties. In order to minimize any administrative burden, we have simplified the data collection for events and marketing/promotion activities. This change allows our grantee organizations greater flexibility with reporting on their events and/or marketing/promotion activities. CMS is proposing to remove the requirement to specify the categories of outreach, education, or marketing. In addition, CMS is proposing to clarify all reporting metrics in the reporting requirements guidance that will be issued once the proposed reporting requirements have been finalized.

Comment: A commenter from Illinois indicated that a primary concern was that a significant amount of the work being done by Navigators (such as Medicaid redeterminations, Marketplace applications not resulting in a QHP selection, etc) was not being collected or accounted.

Response: CMS has noted the comments. With the proposed reporting requirements, CMS has broadly captured the duties of Navigators. These proposed metrics highlight efforts associated with Medicaid as well as work done to support consumers with understanding health insurance options.

Comment: One commenter from Michigan encouraged CMS to keep the taxes and filing exemption items in the weekly report as well as maintaining the question about languages other than English. The commenter added that assisting with health insurance literacy question was too vague. All of the issues under that items could be identify as health literacy. The commenter further suggested that CMS should change it to helping consumers understand and then have a list similar to the current one. Another item could be helping consumers understand how to use health insurance. Lastly, the consumer support the monthly report metric's removal of the past year grant period.

Response: CMS has noted the comments. CMS has not proposed to remove any of the data elements which involves assisting with Marketplace tax forms (1095A), filing exemptions, and assisting with health insurance.

Comment: Another commenter from Oklahoma indicated that the reporting requirements were confusing.

Response: CMS acknowledges the comment. CMS will provide more clarification the Navigator reporting requirements guidance, once the proposed reporting requirements have been finalized.

Comment: A commenter from Tennessee suggested revising the timing of report submissions. The commenter indicated that the weekly reports should be submitted one week after the reporting week and create a more reasonable timeframe for submitting the monthly reports. The commenter also supported the restructuring of the enrollment assistance post-enrollment assistance, and general inquiries about health coverage. The commenter further suggested that the general inquiries about health coverage should be provided for outreach purposes and not in the weekly reporting template. The commenter recommended additional revisions to further improve the accuracy of this reporting, including: separating the current metric "Providing education only (no enrollment)" into multiple, more descriptive activities; and adding three additional reporting fields to "Number of consumers who have sought assistance form an Assister with," specifically (1) "Updating Marketplace information," (2) "enrollment assistance pre-plan selection" and (3) "Customer service assistance with issuers". Another suggestion included reinstating the "Other" field. In addition, the commenter advocated that CMS should simplify the outreach event reporting by removing the three categories, Outreach/Enrollment, Education and Marketing/Promotion, and instead allowing more complete and accurate reporting on all types of consumer interactions which take place at event. The last recommendation provided that CMS should permit the counting of education events to non-consumers by differentiating between "Consumer Education" and "Stakeholder Education" as outreach types on the Outreach/Education/Marketing events spreadsheet.

Response: CMS recognizes the commenter's suggestions for improving the reporting requirements. CMS will maintain the current timeframes for the weekly reporting. This timeframe allows us to expeditiously account for Assister activities performed throughout the week as well as use the outreach and marketing reports for CMS-wide events planning. We also believe that the reporting requirements offer reasonable burden estimates with respect to collecting the data. CMS acknowledges the commenter's support for removing references to post enrollment metrics. We are also will retain the metric on assisting with general inquiries about health coverage in the weekly report submission. As it relates to adding more descriptive activities about providing education, CMS is proposing to modify the metrics to account for the work performed by our Navigators. We recognize that the list of activities is not comprehensive of all Navigator activities. CMS is also proposing to revise the events and marketing/promotion data collection in order to provide grantee organizations with options to describe the various activities that may occur. This revision will help minimize any concerns with interpreting the event types.

Comment: One commenter from Pennsylvania suggested that CMS should include number of consumers who sought assistance: including the number of consumers counseled on QHPs, yet not enrolled. Another recommendation included breaking out the post-enrollment

section. The commenter also added that the CMS should track "other" by listing out which type of programs the Navigators may refer to such as drug discount program, food pantry, transportation program, etc. Under outreach, education, and marketing, the commenter requested that CMS include categories for veteran's outreach and homeless outreach as well as track referrals received rather that applications completed.

Response: CMS acknowledges the comments. The proposed metrics widely incorporates the ongoing Navigator work done throughout the year. In addition, CMS has removed references related to post- enrollment efforts from the weekly reporting submission as well as removed the reference to the number of Marketplace application started in the events data collection.

Comment: Another commenter from Pennsylvania supported the data collection improvements, but suggested the Medicaid appeals should be added to the weekly reporting metrics.

Response: CMS has noted the comments. The current metrics are designed to broadly capture Navigator work performed in the Federally-facilitated Marketplace and the State Partnership Marketplace. In the proposed reporting requirements, CMS recognizes the Navigator work done to support with Medicaid/CHIP. In our efforts to streamline data collection and capture the Navigator cooperative agreement priorities, we have decided not to include Medicaid appeals.

Comment: One commenter from Ohio made several suggestions to improve the reporting requirements. The suggestions included: simplifying "type of event" metric and explaining utility for "point of contact information" metric in the weekly progress report - Outreach, Education and Marketing section; clarifying reporting on Medicaid assists for enrollment and assessment states; reducing frequency of data collection to monthly after the open enrollment period; collecting information about collaboration with all federal agencies in the monthly progress report; and enhancing reporting capabilities of the Marketplace to collect information on Navigator activities.

Response: After reviewing the suggestions by the commenter about the types of event classification, CMS has decided to revise the tool to collect events and marketing to minimize any concerns with interpreting the event types. In the Navigator reporting requirement guidance, the intent of each metric will be providing, including the utility of the point of contact information.   CMS also accepts the recommendation to clarify reporting on Medicaid/CHIP. However, CMS has decided to maintain the current frequency of reporting for program oversight and monitoring purposes. We will also have continued focus on the CMS regional collaboration in the monthly metrics. In the future, CMS will consider ways to enhance the reporting capabilities on the Marketplace to capture Navigator activities.

Comment: A commenter from Missouri indicated concerns and provided a recommendation for improvement. The commenter expressed concerns with the revision of the post-enrollment metric and the weekly reporting submissions. The recommendation included changing "Providing education only" to "Providing education/technical support only (no enrollment)" or to create a new data point for "Providing application assistance only (no enrollment)".

Response: CMS acknowledges the commenter's position on the reporting requirements. CMS also has modified the metrics to eliminate references to post-enrollment activities. We seek to strongly convey the importance of engaging the Navigator activities throughout the year. In reference to the weekly reporting, CMS will retain its timeframes for submitting the weekly, monthly, and quarterly reporting. The current metrics broadly represent the work performed by our Navigators. As such, more detailed activities have not been outlined as a means to lessen the burden associated with the required reporting to CMS. We recognize that the list of activities is not exhaustive.

Comment: One commenter from Utah expressed concerns about the reporting requirements and suggested reducing the number of fields and naming them something that clearly and concisely states what the information is that is being requested. The commenter further recommended that CMS should count: 1) the total number reached regardless of whether or not they had specific questions for their own case or if they received general information in a presentation or at an outreach event; 2) number of people started an application; 3) number of people helped obtain a QHP through the marketplace; 4) number of people started a Medicaid/CHIP application; 5) number of people obtaining Medicaid/CHIP; 6) number of people interacted with that are in the Medicaid gap; and 7) number of people assisted outside of strict health insurance enrollment" e.g. exemption, tax form, referrals.

Response: CMS acknowledges the comment. We have revised the proposed reporting requirements to offer more clarity. CMS is making every effort to maintain a robust data collection as well as ensure that the reporting requirements largely reflect the duties of our Navigators.

Comment: An anonymous commenter from North Carolina supported the changes to the proposed reporting requirements. The commenter further added that some data elements, like sponsor/partners in the events tool and CMS regional office collaboration from the monthly report, are not applicable to their project activities.

Response: CMS acknowledges the overall comment and support of the proposed metrics.

Comment: One commenter from Florida suggested that the term "estimate" be retained when reporting grant funds spent and funds remaining for the monthly reported. The commenter would also like the metric on general assist and inquiries to be retained in the

weekly progress report. The commenter also recommended that CMS provides any clarification on the metrics as necessary.

Response: CMS acknowledges the comment and support of the proposed metrics. We have modified the monthly report to indicate the grants funds spent to date and funds remaining as of the last day of the previous month.   CMS will retain the metric on addressing general inquiries about health insurance options. Once the reporting requirements have been finalized, the Navigator program will issue guidance to grantee organizations clarifying the intent of each measure as well as the expectation of our grantee organizations.

Comment: A commenter from Wisconsin requested that CMS retain the metric on general inquiries.

Response: CMS recognizes the commenter's request to retain the metric on general inquiries as it allows Navigators to account for addressing questions on health insurance options. Since addressing general inquiries about health insurance options is a significant part of Navigator efforts, CMS will re-introduce this data element as part of the Navigator reporting requirements for the weekly progress report.

Comment: One commenter from Mississippi requested that CMS should consider adding fields to capture phone calls, social media metrics, and e-mail/text interactions. In addition, the commenter recommended that CMS should specify the type of referral for those falling into the coverage gap and others as well as expand the post enrollment section to include eligibility appeals, filing grievances about an issuer or provider, using their health insurance, and filing taxes. The commenter also indicated that it would be nice to share success stories and weekly challenges.

Response: CMS has considered the commenter's recommendations to include metrics for various media related activities. In the events and marketing data collection, additional elements to include impressions, viewership, and listenership are presented in the modified reporting requirements. In the weekly data collection, CMS has retained the metric on addressing general inquiries about health insurance option to capture any emails, text, and phone calls. However, CMS has decided to omit the optional metric for consumers who fall in the coverage gap.   We strongly feel that the modified reporting requirements generally reflect the work performed by Navigators and align with the priorities of the Navigator cooperative agreement.

Comment: One commenter from Alaska indicated that the proposed changes are reasonable.   The commenter inquired about additional training on Coverage to Care.

Response: CMS acknowledges the comments provided. CMS has removed the Coverage to Care language and modified the metric to capture the activities on helping consumers understand and use healthcare.

Comment: A commenter from Florida suggested several recommendations. The recommendations included: 1) capturing activity related to moving from Marketplace to Medicare; and 2) including target groups by eligibility in the vulnerable population, particularly in non-Medicaid expansion states. Examples include targeting those who have income over 100% FPL to encourage more strategic partnerships with large retail employer groups with part time workers, hospitality based employers with part time workers, construction industry individual contractors, healthcare employers with PRN staff, etc.

Response: CMS has reviewed the comments. We have included a metric relating to Medicare referrals in the proposed reporting requirements. However, CMS has removed that the optional measure on capturing consumers who live in non-Medicaid expansion states. We feel that the modified reporting requirements align with the priorities of the Navigator cooperative agreement.

Comment: One commenter from Tennessee noted that the outreach and enrollment numbers of only of their 4 navigators is counted and the outreach and enrollment numbers for 12 CACs is only counted in a supplemental optional report. The report has no particular time for reporting, and has no particular format. It would be much more meaningful for the 12 volunteers if their numbers were counted at the same time and in the same format as the 4 navigators.

Response: CMS has reviewed this comment. However, for the purpose of this Paperwork Reduction Act (PRA) package, it appears that the comment may be outside of the scope of this notice because it does not address the changes in the proposed Navigator reporting requirements for weekly, monthly, quarterly, and final submissions.

Comment: One commenter from North Dakota who is a CAC expressed frustration with Navigators.

Response: CMS acknowledges the nature of this comment. However, for the purpose of this Paperwork Reduction Act (PRA) package, the comment is outside of the scope of this notice because it does not address the changes in the proposed reporting requirements for weekly, monthly, quarterly, and final submissions.

Comment: Another commenter from Missouri suggested that CMS include the following activities in the weekly report: assisting consumer with scheduling medical appointment; linking consumer with language appropriate service i.e. interpreter; and escalation with insurance company. In the Outreach, Education, and Marketing spreadsheet, the commenter recommended adding a metric to count consumers engaged directly during activity in addition to consumers targeted (or indirectly engaged).

Response: CMS has reviewed the comments. We feel that the proposed metrics broadly represent the work performed by our Navigators. More detailed activities have not been outlined as a means to lessen the burden associated with the required reporting to CMS.

We recognize that the list of activities is not exhaustive. However, CMS has modified the tool to collect events and marketing/promotion activities.

Comment: An advocacy organization from DC made several recommendations for improving the reporting requirements. One recommendation included issuing a unique number to Navigator sites so that it is easy to document the actual number of enrollments as they are reviewed and certified in plans under the ACA and by states under Medicaid and CHIP. Another recommendation involved eliminating the weekly report submission to converting to no more than monthly reporting in order to reduce the paperwork burden on Navigators. The commenter also suggested that meaningful data need to be collected and that combining both Navigators and Certified Application Counselors (CACs) under "Assisters" is not informative. Another comment was that HIOS design undercounts the effort of Navigators in states that are not allowed to directly enroll persons into Medicaid/CHIP.   The commenter also added that under outreach and marketing if, in addition to the activities of the local sites, the expectation is to have outreach activities with specific organizations such as Enroll America, regional CMS offices, and regional Navigator collaboratives, then this should be formalized and included in HIOS as specific data reporting to increase transparency. Lastly, the commenter noted in the monthly progress report, in addition to reporting best practices, a method needs to be included for capturing the barriers that new navigators have to overcome at the local level.

In addition to the overall comments, the commenter provided suggestions that were more specific. The commenter suggested adding completed Marketplace enrollment, no QHP chosen; contacted Marketplace; and consumers who did not qualify for ACA since they were given an exemption process to the enrollment assistance question. Another suggestion included adding fields for "Other", data matching issues, and 8962 form for APTC reconciliation to differentiate between tax forms. The commenter further noted that it was difficult to distinguish the population types at events and also suggested that Navigators who help people in a language other than English, navigators should get credit for this because it is a bilingual skill that needs to be recognized. The final suggestion was to re-phrase the quarterly metric on CLAS to ask if the grantee organization has made any changes to meet the CLAS standards.

Response: CMS acknowledges the overall and specific comments. For the purpose of this Paperwork Reduction Act (PRA) package, CMS will address the comments that are specific to the proposed reporting requirements. CMS will retain the frequency for the weekly, monthly, and quarterly reports to support with program oversight and monitoring. We believe that with the proposed changes in the reporting metrics, meaningful data will be collected to assess programmatic activities. CMS has modified the reporting on consumer assistance with Medicaid/CHIP applications and referrals. In the monthly report, we also have a measure to account for collaboration with CMS regional offices as well as a metric that allows grantee organizations to indicate best practices involving the collaboration of others in the community. Furthermore, in our efforts to modify the proposed requirements, we understand the activities highlighted in the metrics are not an exhaustive list of work done by Navigators. We also want

to minimize any increased reporting burdens by adding more categories of Navigator activities. We, however, are proposing a metric to incorporate dealing with complex cases and other Marketplace issues.