Tribal Assister-Tribal Government Agreement between
Washington Health Benefit Exchange
And
Name of Tribe:

This agreement is entered into between the Washington Health Benefit Exchange (HBE) and the Tribe named above to establish the terms related to the oversight and provision of Tribal Navigator services to assist individuals in applying for health insurance using the Washington Healthplanfinder web portal.

Tribal Assister Role and Responsibilities
The activities performed by Tribal Assisters which include the same services provided by Certified Application Counselors. The Tribe assures that individuals providing Tribal Assister services on behalf of the tribe will provide the following assistance:

• Assist consumers to complete a Washington Healthplanfinder application, including entering the consumer’s application data into the system as needed.
• Explain information to consumers, in an impartial, objective manner, about the full range of health care insurance options available to the consumer through the Washington Healthplanfinder, including Washington Apple Health (State Medicaid), Qualified Health Plans (QHPs), Health Insurance Premium Tax Credits, and cost sharing reductions.
• Explain the consumer’s eligibility results and insurance coverage options, answer consumer questions related to plan benefits, costs, and selection and facilitate the completion of the enrollment, including premium payment processes.

Organizational Oversight Responsibilities
The Name of tribe assumes responsibility for assuring each of its Tribal Assisters (TA) is informed about and complies with the following requirements. The organization agrees to identify a Coordinator to serve as the primary point of contact for the WAHBE.

A Tribal Assister must:
• Complete all WAHBE TA initial certification requirements prior to assisting consumers to apply for and enroll in health insurance through the Washington Healthplanfinder and completing all ongoing Healthplanfinder User Access requirements.
• Disclose to each consumer and WAHBE any relationships the TA has with carriers of Qualified Health Plans.
• Act in the best interests of each consumer without steering or advising a consumer to select any particular plan.
• Remain knowledgeable about and deliver TA services in compliance with all published rules and procedures, including nondiscrimination, nondisclosure, privacy and security, and protection of consumer’s personally identifying information (PII) and personal health information (PHI).
• Remain current with all pertinent program and system updates issued by the WAHBE impacting consumer services.
• Provide TA services and assistance free of charge to the consumer, including cultural, language or disability-related services needed by the consumer to effectively participate in these services. If the consumer cannot be served directly, refer consumers to other appropriate consumer application and enrollment assistance resources.

Organizational Coordinator Responsibilities
• Monitor and track the performance and actions of the organization’s TAs to assure adherence to WAHBE standards, procedures, and processes when providing these services.
• Notify the WAHBE immediately at navigator@wahbexchange.org if TA misconduct is suspected or confirmed so the WAHBE can suspend the individual’s Healthplanfinder system access.
• Notify the WAHBE at navigator@wahbexchange.org when a TA leaves or is terminated from employment so the TA’s Washington Healthplanfinder system access can be discontinued.
• Verify that all Tribal Assister staff have a Background Check on file conducted within the past 2 years that meets the provisions for serving children and vulnerable adults as specified in RCW 43.43.830 and RCW 43.43.832 and that the individual is not disqualified to provide these services due to conviction records related to crimes against persons. Also, due to the Assister’s access to consumers’ personal health and personal identification information, the tribe must disqualify the CAC/Navigator for these positions upon receipt of an individual’s background check with a conviction record related to financial crimes including but not limited to: identity theft, robbery, forgery, fraud, theft, bribery, embezzlement. All Assister background checks must be current within two (2) years of their employment and participation in these services.
• Retain a signed WAHBE attestation form from each TA affirming they understand the duties and responsibilities of serving in this capacity, including rules related to conflict of interest, confidentiality, security, privacy and ethical standards.

Washington Health Benefit Exchange agrees to:
• Make program rules, information, and training available to assist potential TA’s to pass qualifying exams needed for TA certification, including, but not limited to: QHP options, tax credits and cost sharing reductions, Washington Apple Health rules and information, and eligibility for all affordability programs.
• Administer the certification exam for qualified candidates and notify the organization and individual about exam results.
• Provide Washington Healthplanfinder system access and log-in instructions to TA candidates who successfully complete the certification exam and ongoing requirements.
The Washington Health Benefit Exchange may terminate a TA organization’s WAHBE agreement to provide these services, or may terminate any individual TA’s access to the Washington Healthplanfinder system immediately upon notification of any situation or report of misconduct that:

- Is in violation of the conflict of interest, confidentiality, privacy and security standards; or
- Constitutes fraud, abuse or illegal activity related to TA services.

Suspension of Washington Healthplanfinder system access will continue until the matter is investigated by the WAHBE and a decision is reached regarding the claim.

Organization’s Coordinator for TA services is:
Name:
Job Title:
Address:
Telephone:
Email:

Authorized Tribal Signatory:
Name:
Job Title:
Address:
Telephone:
Email:

Signature: _________________________________ Date: __________________

WAHBE:
Signature: _________________________________ Date: __________________
Christine Brown Navigator Training and Certification Manager
(360) 688-7750

Please use this email address navigator@wahbexchange.org to correspond about this agreement or send to inquiries to WAHBE about your organization’s CAC activities and services.