State of California Office of Administrative Law

In re:

California Health Benefit Exchange

Regulatory Action:

Title 10, California Code of Regulations

Adopt sections:

Amend sections: 6656, 6657, 6660, 6664

Repeal sections:

NOTICE OF APPROVAL OF REGULATORY **ACTION**

Government Code Section 11349.3

OAL Matter Number: 2018-0123-03

OAL Matter Type: Regular (S)

In this regular rulemaking, the California Health Benefit Exchange (Exchange) amends four sections in Title 10 of the California Code of Regulations. To streamline the application process for individuals and entities who wish to participate in the Certified Enroller program, the Exchange amends the regulations to remove some information that was not necessary to determine eligibility for the program. The regulatory modifications also remove the requirement for Certified Enrollment Counselors to receive training on the Exchange's Covered California for Small Business. The amendments further add the requirement that applicants certify they will comply with the agreement between the Certified Enrollment Entity and the Exchange and will adhere to all applicable State and Federal laws and regulations. And finally, the amendments change the requirement for certified enrollers to maintain a record of a consumer's authorization to access his or her personally identifiable information from 6 years to 10 years.

OAL approves this regulatory action pursuant to section 11349.3 of the Government Code. This regulatory action becomes effective on 3/7/2018.

Date: March 7, 2018

> Thanh Huynh Senior Attorney

For:

Debra M. Cornez

Director

Original: Peter Lee, Executive Director

Copy:

Brian Kearns

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For use by Secretary of State only

REGULATORY ACTION NUMBER 2018-0123 NOTICE FILE NUMBER EMERGENCY NUMBER OAL FILE Z_2017-1006-01 **NUMBERS** For use by Office of Administrative Law (OAL) only 2018 JAN 23 P 3:58

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NOTICE	•	Salah Tila (a. 1) Malayan	REGULATIONS	
AGENCY WITH RULEMAKING AUTHORITY				AGENCY FILE NUMBER (If any)
California Health Benefit Exc	hange			
A. PUBLICATION OF NOTIC	E (Complete for pul	olication in Notice	Register)	
1. SUBJECT OF NOTICE		TITLE(S)	FIRST SECTION AFFECTED	2. REQUESTED PUBLICATION DATE
			W. Marine	
3. NOTICE TYPE Notice re Proposed Regulatory Action Othe	er,	DINTACT PERSON	TELEPHONE NUMBER	FAX NUMBER (Optional)
OAL USE ACTION ON PROPOSED			NOTICE REGISTER NUMBER	PUBLICATION DATE /
ONLY Approved as Submitted	Approved as Modified	Disapproved/ Withdrawn	2017 42.2	10/20/2017
B. SUBMISSION OF REGUL	ATIONS (Complete w			
	Allows (complete w	men sasminanig ie		DOAL DECLE ATORY ACTION NUMBER OF
1a. SUBJECT OF REGULATION(S)			1b. ALL PREVIOUS RELATED OAL REGULATORY ACTION NUMBER(S)	
Enrollment Assistance				
2. SPECIFY CALIFORNIA CODE OF REGULATIONS		title 26, if toxics related)		
SECTION(S) AFFECTED	ADOPT			
(List all section number(s)			* •	
individually. Attach	AMEND			
additional sheet if needed.)	6656, 6657, 6660, 666	54		· · · · · · · · · · · · · · · · · · ·
TITLE(S)	REPEAL			
10				
3. TYPE OF FILING				
Regular Rulemaking (Gov.	Certificate of Compliance:	The agency officer named	Emergency Readopt (Gov.	Changes Without Regulatory
Code §11346) below certifies that this agency complied with the Code			Code, §11346.1(h))	Effect (Cal. Code Regs., title
Resubmittal of disapproved or	provisions of Gov. Code §			1, §100)
withdrawn nonemergency filing (Gov. Code §§11349.3,	before the emergency reg within the time period reg		File & Print	Print Only
11349.4)	within the time period rec	quired by statute.		
Emergency (Gov. Code,	Resubmittal of disapprove		Other (Specify)	The state of the
§11346.1(b))	emergency filing (Gov. Co			
4. ALL BEGINNING AND ENDING DATES OF AVA	ILABILITY OF MODIFIED REGULATION	S AND/OR MATERIAL ADDED TO	THE RULEMAKING FILE (Cal. Code Regs. title 1, §	44 and Gov. Code §11347.1)
5. EFFECTIVE DATE OF CHANGES (Gov. Code, §§	11343.4.11346.1(d): Cal. Code Rens	title 1 6100)	No. of the second secon	
Effective January 1, April 1, July 1, or	Effective on filing		Without Effective	
October 1 (Gov. Code §11343.4(a))	Secretary of State	Regulatory Effe	ect other (Specify)	
6. CHECK IF THESE REGULATIONS REQU	JIRE NOTICE TO, OR REVIEW, CO			
Department of Finance (Form STD.	399) (SAM §6660)	Fair Political I	Practices Commission	State Fire Marshal
Other (Courts)				
Other (Specify)		1		
7. CONTACT PERSON		TELEPHONE NUMBER	FAX NUMBER (Optional)	E-MAIL ADDRESS (Optional)
Brian Kearns		916-228-8843	916-403-4468	brian.kearns@covered.ca.gov

I certify that the attached copy of the regulation(s) is a true and correct copy of the regulation(s) identified on this form, that the information specified on this form is true and correct, and that I am the head of the agency taking this action, or a designee of the head of the agency, and am authorized to make this certification.

SIGNATURE OF AGENCY HEAD OF DESIGNER TYPED NAME AND TITLE OF SIGNATORY

Peter V. Lee, Executive Director

ENDORSED APPROVED

MAR 0 7 2018

Office of Administrative Law

California Code of Regulations

Title 10. Investment

Chapter 12. California Health Benefit Exchange (§ 6650 et seq.)

Article 8. Enrollment Assistance.

California Code of Regulations

§ 6656. Navigator Program Request for Application and Selection Criteria.

[(a)(1)-(7): No change]

- (b) The Navigator Grant Program Application shall contain the following information.
 - (1) Individual or Organization Information

[(b)(1)(A)-(F): No change

(G) Fax number;

(G)(H) E-mail address; and

(H)(I) Website address.

- (2) Primary contact information:
 - (A) Primary contact <u>name</u> person;
 - (B) Physical address;
 - (C) Phone number; and
 - (D) Fax number; and
 - (D)(E) E-mail address.

[(b)(3): No change]

(4) Previous experience involving performing the Navigator Program activities.

[(b)(5)-(6): No change]

(7) Subcontractor('s) information:

- (G) Fax number;
- (G)(H) E-mail address; and
- (H)(I) Website address.
- (8) Subcontractor('s) primary contact information:
 - [(b)(8)(A)-(B): No change]
 - (C) Phone number; and
 - (D) Fax number; and
 - (D)(E) E-mail address.
- [(b)(9)-(13): No change]
- (14) Letter(s) of reference from organizations that have previously collaborated with the applicant with.

Note: Authority cited: Sections 100502 and 100504, Government Code. Reference: Sections 100502 and 100503, Government Code; and 45 CFR §§ 155.205, 155.210 and 155.260.

§ 6657. Certified Enrollment Counselor Application

[(a)(1)-(4): No change]

- (b) An individual's application to become a Certified Enrollment Counselor shall contain the following information:
 - (1) Name, e-mail address, primary and secondary phone number, and preferred method of communication;
 - [(b)(2): No change]
 - (3) Identification of the Certified Enrollment Entity that the individual will affiliate with;
 - (4) Affiliated Certified Enrollment Entity's primary site location address;
 - (5) Site(s) served by the individual;
 - (6) Mailing address of the primary site for the Certified Enrollment Entity;

- (3) (7) <u>Languages that the applicant can speak</u> An indication of the languages that the Certified Enrollment Counselor can speak;
- (4) (8) <u>Languages that the applicant can write</u> An indication of the languages that the Certified Enrollment Counselor can write;
- (5)(9) Disclosure of all criminal convictions and administrative actions taken against the individual;
- (6)(10) A certification by the individual that:
 - (A) The individual eomplies with will comply with the agreement between the Certified Enrollment Entity and the Exchange as well as all requirements set forth in this Article, including but not limited to Section 6666;
 - (B) The individual is a natural person of not less than 18 years of age; and
 - (C) The statements made in the application are true, correct, and complete to the best of his or her knowledge and belief;
 - (D) The individual will abide by all privacy and security standards set forth in the agreement between the Certified Enrollment Entity and the Exchange; and
 - (E) The individual will adhere to all applicable State and Federal laws and regulations.
- (c) A Certified Enrollment Entity shall notify the Exchange of every individual to be added or removed as an affiliated Certified Enrollment Counselor. Such notification shall include:
 - [(c)(1)-(4): No change]
 - (5) An indication of whether the individual is certified as an Certified Enrollment Counselor, and if so, the following information:
 - (A) Certification number; and
 - (5) (B) When adding an individual, s Site(s) that the individual will serve to be served by the individual.

Note: Authority cited: Sections 100502 and 100504, Government Code. Reference: Sections 100502 and 100503, Government Code; and 45 C.F.R. §§ 155.205, 155.210 and 155.260.

§ 6660. Training Standards.

- [(a): No change]
- (b) To ensure that all Certified Enrollment Counselors are prepared to serve both the individual Exchange and the Small Business Health Options Program, all individuals or entities who carry out Consumer Assistance functions shall complete training in the following subjects prior to carrying out any Consumer Assistance functions:

Note: Authority cited: Section 100504, Government Code. Reference: Sections 100502 and 100503, Government Code; and 45 C.F.R. §§ 155.205, 155.210 and 155.260.

§ 6664. Roles & Responsibilities.

(a) Certified Enrollment Entities and Certified Enrollment Counselors shall perform the following functions:

[(a)(1)-(5): No change]

(6) Prior to receiving access to any consumer's personally identifiable information, as defined in section 6650 of Article 8, the Certified Enrollment Counselor shall:

[(a)(6)(A)-(J): No change]

(K) Maintain a record of such authorizations for a minimum of $\frac{10}{10}$ years.

Note: Authority cited: Sections 100502 and 100504, Government Code. Reference: Sections 1043, 100502, and 100503, Government Code; and 45 C.F.R. §§ 155.205, 155.210, 155.215 and 155.260.