

NAVIGATOR PRELICENSING COURSE OUTLINE

SECTION A and B – 8 hours

SECTION A

- I. Principles of Insurance
 - A. Health insurance terminology
 - B. Definition of risk
 - C. Pooling concept--law of large numbers
 - D. Types of insurance companies (chs. 611, 613, 185, Wis. Stat.)

- II. General Wisconsin Insurance Laws
 - A. Duties and powers of Insurance Commissioner—statutory and rule-making
 - B. Knowledge of administrative action process, including hearings and penalties
 - C. Purpose of licensing, including procedures and who must be licensed/registered
 - D. Record keeping and changes in navigator status, including change of name and address
 - E. License expiration, revocation, suspension, and limitation
 - F. General regulations regarding misrepresentation, knowledge of acts of agents, rebating
 - G. Unfair claim methods and practices – timely payment of claims
 - H. Home and telephone solicitation requirements
 - I. Section 628.32, written disclosure of fees other than commissions
 - J. Proper exchange of business
 - K. Privacy of consumer financial and health information
 - L. Unfair marketing practices
 1. Misrepresentation
 2. Unfair inducement
 3. Unfair discrimination
 4. Extra charges
 5. Influencing employers
 6. Unfair use of official position
 7. Restraint of competition
 8. Unfair restriction of contracting parties choice of insurer
 - M. Insurance contracts in Wisconsin

SECTION B

- III. Health Insurance
 - A. Purpose of health insurance
 - B. Types of policies
 1. Medical expense policies
 - a. Basic hospital, medical, and surgical policies (excepted benefits policies)
 - b. Comprehensive major medical policies
 - c. Long Term Care
 - d. Health Maintenance Organizations (HMO) policies
 - e. Preferred Provider Organization (PPO) policies
 - f. Service organizations (Blue Cross Plans)
 2. Group insurance
 - a. General concepts
 - b. Differences between individual and group contracts
 - c. Small group and large group
 - d. COBRA

NAVIGATOR PRELICENSING COURSE OUTLINE

3. Medicare supplement, Medicare select, and Medicare Advantage policies
 - C. Policy provisions, clauses, and riders
 1. Mandatory (uniform policy) provisions
 - a. Entire contract
 - b. Time limit on certain defenses (incontestable period)
 - c. Grace period
 - d. Notice of claim
 - e. Claim forms
 - f. Proof of loss
 - g. Time of payment of claims
 - h. Payment of claims
 - i. Legal actions
 2. Other provisions and clauses
 - a. Insuring clause
 - b. Free look
 - c. Consideration clause
 - d. Probationary (waiting) period
 - e. Elimination (waiting) period
 - f. Exclusions
 - g. Coinsurance
 - h. Deductibles
 - i. Nonduplication and coordination of benefits
 3. Rights of renewability
 - a. Comprehensive health Plans subject to the ACA
 - b. Other policies
 - (a) Guaranteed renewable
 - (b) Period of time
 - D. Contract law
 1. Requirements of a contract
 2. Warranties and representations
 3. Unique aspects of the health contract
 - a. Conditional
 - b. Unilateral
 - c. Adhesion
- IV. Wisconsin Health Insurance Law
- A. General policy provisions
 1. Right of return
 2. Right of insurer to contest
 3. Grace periods
 - B. Mandated benefits
 1. Handicapped children
 2. Newborn children
 3. Alcoholism, drug abuse, and mental and nervous disorders
 4. Home health care
 5. Skilled nursing care
 6. Kidney disease treatment

NAVIGATOR PRELICENSING COURSE OUTLINE

7. Diabetes
 8. Maternity benefits for dependent children
 9. Nurse practitioners
 10. Optometrists
 11. Chiropractic
 12. Adopted children
 13. Grandchildren
 14. Mammograms
 15. Lead poisoning screening
 16. Temporal mandibular joint disorders
 17. Hospital/anesthesia coverage for dental care
 18. Breast reconstruction
 19. Immunizations
 20. Emergency medical services
 21. Prescription drugs and devices
 22. Experimental treatment
 23. Requirements relating to AIDS
 24. Cancer clinical trials
 25. Dependent children
- C. Wisconsin Medicare supplement policies
- D. Medicare
1. Primary, secondary payor
 2. Medicare and Choice and Advantage
 3. Medicare Part D prescription drug
- E. HIPAA (Health Insurance Portability and Accountability Act)
- F. Continuation and conversion privileges
- G. Marketing Methods and Practices
1. Company approval of advertising
 2. Suitability
 3. Identification of insurer in advertising
 4. Testimonials, endorsements or commendations by third parties
 5. Disparaging comparisons and statements

SECTION C – 4 hours

- V. Wisconsin Public Assistance Programs
- A. Medicaid-Elderly, Blind and Disabled
 - B. Badger Care Plus
 - C. Eligibility requirements
 - D. Services Covered
 - E. Copays and premiums
 - F. Verification requirements
 - G. Possible outcomes
 - H. Rights and Responsibilities

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Section D – 4 hours

VI. Affordable Care Act

- A. Intent of the Law
- B. Supreme Court Decision
- C. Major provisions
- D. Immediate Reforms
 - 1. No lifetime limits
 - 2. External review
 - 3. Coverage for preventive services
 - 4. Uniform summary of benefits and coverages
- E. Market-wide Reforms – January 1, 2014
 - Guaranteed Issue
 - 1. No pre-existing condition limitations
 - 2. Rating rules
 - 3. Single Risk Pool
 - 4. Actuarial value – metal levels
 - 5. No annual limits for essential benefits
 - 6. Essential Benefits
 - a. Ambulatory patient services
 - b. Emergency services
 - c. Hospitalization
 - d. Maternity and newborn care
 - e. Mental health, substance use disorder services, behavioral health treatment
 - f. Prescription drugs
 - g. Rehabilitative and habilitative services and devices
 - h. Laboratory services
 - i. Preventive and wellness services and chronic disease management
 - j. Pediatric services, including oral and vision care
- F. Tax Penalties and Shared Responsibility
 - 1. Individuals – minimum essential coverage
 - 2. Employer plans provide minimum value and affordable premiums
 - 3. Exceptions
- G. Tribal Considerations
 - 1. Eligibility
 - 2. Enrollment options

VII. Health Insurance exchanges

- A. Federally Facilitated Exchange
 - 1. Eligibility and Enrollment
 - 2. Premium tax credits
 - 3. Reduced cost sharing
 - 4. Website and Call Center
 - 5. Comparison tools
 - 6. Enrollment assistance
 - a. Navigators
 - b. Certified application counselors

NAVIGATOR PRELICENSING COURSE OUTLINE

- 7. Qualified Health Plans
 - 8. Stand-alone Dental Plans
 - B. Individual Exchange
 - C. Small Business Health Options (SHOP) Exchange
- VIII. Other policies
- A. Grandfathered plans
 - B. Student plans
 - C. Expatriate plans
 - D. Short term
- IX. Navigators, certified application counselors
- A. Issuance of license and registration
 - 1. Navigators
 - a. Prelicensing and examination
 - b. Licensing
 - c. Continuing education
 - 2. Certified Application Counselors
 - a. Prelicensing and examination
 - b. Registration
 - c. Continuing education
 - B. Roles and Responsibilities
 - 1. Prohibited activities
 - 2. Permitted activities
 - C. Ethics
 - 1. Fiduciary duties and responsibilities
 - 2. Conflict of interest
 - 3. Ethical marketing practices, including fair and ethical treatment of policyholders
 - 4. Suitability of product to client
 - 5. Social responsibility of agents/navigators/certified application counselors
 - 6. Agent/company relationships
 - 7. Maintaining appropriate insurance expertise
 - D. Definition and eligible entities
 - E. Navigator Duties
 - 1. Plan eligibility and enrollment
 - 2. Conduct public education activities
 - 3. Provide fair, accurate and impartial information
 - 4. Provide information that is culturally and linguistically appropriate
 - 5. Facilitate QHP selection and acknowledge other health programs
 - F. Privacy and security of health information
 - 1. HIPAA
 - 2. Confidentiality, integrity and availability of Protected Health Information (PHI)
 - 3. Penalties for violations or noncompliance with HHS regulations
 - 4. Criminal acts