INNOVATIONS IN PRIMARY CARE

Embedding Student Volunteer Affordable Care Act Navigators in a Primary Care Clinic

| Sbreyas Hallur | Donna Rasmussen |
|-------------------|-------------------------|
| Sahil Sandhu, MSc | Nicholas Riggs, MPA |
| Emma Herold | H. Musa Ali |
| Ana Trejo | Janet Prvu Bettger, ScD |

Ann Fam Med 2022;20:Online. https://doi.org/10.1370/afm.2794

THE INNOVATION

Uncertainties in federal funding have limited assistance available for consumers enrolling in health insurance plans through the Patient Protection and Affordable Care Act (ACA). We developed the Student ACA Navigators program to enroll uninsured individuals in the primary care setting.

WHO AND WHERE

A partnership between the Duke University Student Collaborative on Health Policy, the NC Navigator Consortium (a federally funded partnership of 6 health care, social services, and legal aid organizations that support ACA education and enrollment), and Lincoln Community Health Center (a federally qualified health center) leveraged student volunteers to support clinic-based ACA enrollment for eligible patients and community members. A paid staff coordinator from the Consortium and 2 student volunteers led the Student ACA program.

HOW

In 2019, Duke students initiated a partnership with the Consortium to create the Student ACA Navigators program. Over a 3-month recruitment and training period, 2 student program leads advertised this opportunity to graduate and undergraduate students and selected volunteers based on prior volunteer experience and communication skills. The Consortium financed student background checks, facilitated online training for federal certification, and hosted supplemental training about state-specific resources. The student group and the Consortium collaborated with community partners to host enrollment events, disseminate enrollment information, and embed navigators on-site.

Students contacted Lincoln Community Health Center to assess interest in hosting student volunteers during the 2019 Open Enrollment Period. Lincoln had only 2 certified application counselors and accepted

Conflict of interest: authors report none.

Corresponding author

Shreyas Hallur Duke University Box 96402 Durham, NC 27708 <u>shreyas.hallur@duke.edu</u> 6 trained students to build in-person enrollment capacity. Application counselors used a shared spreadsheet to coordinate student availability with consumers for on-site appointments. Students often volunteered at the clinic after work hours and on weekends to increase access for consumers. <u>Supplemental Figure 1</u> shows the timeline for recruitment, training, and volunteer deployment and partner contributions.

During the COVID-19 pandemic, the navigator consortium virtually trained students. The clinic's application counselors scheduled consumers' appointments through an online scheduling platform, "Get Covered Connector." The Consortium's coordinator then assigned appointments to student volunteers. Students contacted consumers before their appointment to specify what documents they would need and determine whether a telephone or virtual meeting would be preferred. During the appointment, volunteers worked remotely; the Consortium's coordinator was available for questions by telephone and online messaging. <u>Supplemental Figure 2</u> summarizes program workflow before and during the COVID-19 pandemic. To sustain our academic community partnership, we established a peer-to-peer recruitment and mentorship model within the student club for senior students to train junior students.

LEARNING

In 2019, the ACA Navigators program trained 19 students and embedded 6 volunteers in clinic. In 2020, we trained 15 students. Our local context demonstrated the need for more Spanish speakers, so we increased the number of Spanish-speaking volunteers from 2 to 7 in 2020. Primary care clinics should similarly consider local context and consumer need when replicating this model. During the COVID-19 pandemic, all partners worked together to adapt the program to serve consumers virtually without interruption. Virtual implementation also addressed space limitation at the community health center.

Navigator groups or consortia in 28 states have received federal funding to support ACA enrollment in 2021. Health-focused student organizations in these states could replicate our model by contacting their local primary care clinic and federally funded navigator organization. This scalable model can increase local clinics' enrollment capacity while empowering students across the country to become future champions for access to care.

Supplemental materials, including author affliations

Read or post commentaries in response to this article.

Submitted June 7, 2021; submitted, revised, August 28, 2021; accepted September 24, 2021. -LC

Funding support: The project was supported by Funding Opportunity number NAVCA190360-02-00 from the Centers for Medicare and Medicaid Services.

Key words: Patient Protection and Affordable Care Act; ACA; navigators; student volunteers; primary health care; insurance coverage; volunteers; community health centers; medically uninsured; COVID-19; community networks