

**NEW YORK STATE HEALTH BENEFIT EXCHANGE  
BLUEPRINT UPDATES**

Item	Category	Description of Update
<b>Updated May 15 / May 23, 2013</b>		
2.6	Navigators	The Exchange will develop a long-term budget and sustainability plan, which will include Exchange funding for the Navigator program. Please refer to section 8.0 of the Blueprint for additional information about the Exchange's long-term budget and sustainability plan
3.1	Exchange applications	The Exchange is finalizing applications for the Individual Exchange and the SHOP. These applications will be submitted to HHS for approval by 06/01/2013.
3.5	Verifications	The Exchange has updated its verification process based on federal guidance.
3.7+3.8	Integrated Eligibility Determinations	Following conversations with CCIIO regarding Integrated Eligibility Determinations, this process is under review by the Exchange.
3.10	Individual Responsibility Determinations and Payment Exemptions	New York seeks to invoke the federal service for exemption determinations per 42 CFR 155.625, pending further discussion with CMS/CCIIO and clarifications regarding exemption certifications and 1095 reporting requirements.
8.0	Finance and Accounting	The New York Health Benefit Exchange will have a long-term operational cost, budget and management plan by September 16, 2013.
8.0	Finance and Accounting	Beginning in September 2013, the Exchange will use PeopleSoft to track revenue and expenses.
9.0 + 10.0	Technology + Privacy and Security	Several documents pertaining to sections 9.0 and 10.0 of the Blueprint have been updated. Please refer to the update for details.
<b>Updated February 15, 2013</b>		
2.5	Tribal Consultation	The Tribal Consultation process has been developed and is described in the updated Blueprint document.

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2.6+2.7	Navigators and In Person Assistors	The Exchange issued the RFA for IPAs/Navigators on February 13, 2013. Details on the IPA/Navigator program are available in the RFA and codify previously proposed decisions except for: a) The Exchange will require IPA/Navigator entities to serve potential enrollees for the e Individual Exchange and the SHOP; b) Local District Social Service Agencies may provide in-person assistance to the MAGI population as art of the State assumption of Medicaid administrative functions, and will not serve as IPA/Navigator entities.
4.4	QHP Compliance	A comprehensive audit strategy will be developed by December 2013. The updated Blueprint document describes the Exchange's approach towards QHP monitoring, QHP auditing, and handling complaints about QHPs.
4.7	Timeline for QHP Accreditation	The Plan Invitation to Participate in the Exchange codifies the previously proposed timeline for QHP accreditation
4.8	Quality Reporting	The Plan Invitation to Participate in the Exchange includes a comprehensive approach towards quality reporting.
<b>Updated January 11, 2013</b>		
2.8	Agents and Brokers	Updates Exchange decision to allow insurers, at their discretion, to make the assistance of licensed, certified producers available to individuals and small employers, to facilitate enrollment into the Exchange.