Written by <u>Michael Tennant</u> on April 6, 2013

New American

ObamaCare's Costly GPS: Tens of Thousands of "Navigators"

With just a compass, some charts, and an hourglass, Christopher Columbus was able to navigate sailing ships to the New World and back multiple times. By contrast, reports the *Washington Examiner*'s <u>Paul</u> <u>Bedard</u>, it is going to take "tens of thousands" of people, each possibly earning "\$20 an hour or more," to help Americans navigate ObamaCare.

The Department of Health and Human Services (HHS) has proposed a rule laying out the requirements for the healthcare law's insurance "navigators," whose job it will be to assist Americans who don't have coverage through their employers in purchasing insurance through state exchanges. Buying coverage is scheduled to commence in January, but the websites and call centers for the exchanges are supposed to go active October 1, and that's when the navigators will first be needed. (Of course, those dates could very well be pushed back: The feds' small-business exchange has already been delayed a year, and HHS is also known to be a few months behind on the state exchanges, many of which it will have to run.)

There is little question that people are going to need a great deal of help finding their way through the labyrinthine legislation. The two laws comprising ObamaCare come to nearly 1,000 pages, and the regulations issued under it are already "well over twice as long as the Guinness World Record for the longest novel," according to <u>Americans for Limited Government</u>. A <u>draft version</u> of the federal government's application for insurance is 15 pages long for a family of three and includes an additional 61-page questionnaire for determining eligibility for financial assistance. The proposed navigator rule itself runs to 63 pages.

Just who is eligible to become a navigator? Although the rule declares that navigators "must not have a conflict of interest during their term" and "must provide information and services in a fair, accurate, and impartial manner," it provides little other guidance. "The rules allow navigators to come from the ranks of unions, health providers and community action groups such as ACORN and Planned Parenthood," Bedard states. In fact, they *require* each exchange to have "at least two different types of entities as Navigators, one of which must be a community and consumer-focused non-profit group."

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How many navigators will be needed? The final number has not yet been determined, but according to Bedard, California alone has requested 21,000 of them. It's no exaggeration to suggest that there may be hundreds of thousands of these tax eaters when all is said and done.

And taxes they will consume. HHS estimates that navigators will make anywhere from \$20 to \$48 per hour, depending on their positions. Assuming California got its 21,000 navigators and they all made just \$20 an hour for a 40-hour week, they would cost taxpayers over \$873 million a year — and that's for just one state. The day after the proposed rule was released, <u>Rep. Kenny Marchant</u> (R-Texas), a member of the House Ways and Means Committee, sent a letter to HHS Secretary Kathleen Sebelius expressing his concern over the navigators' "inflated hourly wages," particularly "at a time when thousands of current federal employees are being placed on furloughs to reduce our budget deficit." (An administration official told Bedard that the \$20-per-hour assumption used in the rule "is an estimate, not a recommendation or a requirement" and that "states and organizations are not required by the federal government to set any payment levels for these employees.")

Additionally, taxpayers will have to foot the bill for translators for non-English-speakers who seek insurance on an exchange. The proposed rule requires exchanges and navigators to "provide consumers with information and assistance in the consumer's preferred language, at no cost to the consumer, which would include oral interpretation of non-English languages and the translation of written documents in non-English languages when necessary to ensure meaningful access."

The exchanges themselves are supposed "to have a strong customer-service component, including call centers and physical offices," according to <u>The Hill</u>. This, too, will undoubtedly take taxpayers for a pretty penny — and provide customer service similar to that of the Internal Revenue Service.

Then there's the matter of voter registration. The draft ObamaCare application asks the applicant if he would like to register to vote; if so, it directs him to a voter registration form. Republicans are none too happy with this, fearing that it could be used to encourage people to register as Democrats — especially since Democrat-aligned activists may well be serving as navigators — or to retaliate against those who don't. (Democrats might want to consider this, too: At some point a non-Democrat will move into the White House and become privy to the data HHS has collected.) <u>Rep. Charles Boustany</u>, Jr. (R-La.), chairman of the House Ways and Means Oversight Subcommittee, wrote to Sebelius on March 25, seeking more details on the voter-registration matter. In his letter he reminded her that the Affordable Care Act (ObamaCare) does not mention voter registration and that the Paperwork Reduction Act "requires that Federal agencies gather only appropriate information as required by legislation."

Navigating ObamaCare is going to be a costly, labor-intensive, intrusive, and politically charged task. In no conceivable way does it improve the quality or reduce the cost of healthcare. It does, however, vastly extend the reach of the federal government and the party that controls its executive branch. And that, more than anything else, explains why the law was passed and why it is proving so difficult to repeal.



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