



# Bureau of Primary Health Care Grantee Enrichment Session:



## Health Insurance Marketplace and Medicaid Expansion Outreach and Enrollment in Health Centers Part 1

Department of Health and Human Services  
Health Resources and Services  
Administration

Tuesday, July 9, 2013  
1:30pm – 3:00pm, ET



# Outreach and Enrollment: Learning Objectives



- Understand key dates and opportunities for health centers with respect to the national rollout of new affordable insurance options and enrollment processes.
- Initiate key strategic health center operations activities to coordinate health center and outreach and enrollment activities.



# Outreach and Enrollment: Learning Objectives



- Leverage non-outreach and enrollment health center staff to prepare and facilitate patients' knowledge of, and ability to enroll in, new insurance options.
- Identify specific actions grantees have taken to provide successful outreach and enrollment assistance to prepare staff and patients.
- Access current and reliable information on the Health Insurance Marketplace and Medicaid Expansion.



# Agenda in Brief



- **Welcome –**
  - Jim Macrae, HRSA/BPHC
- **Enrollment Dates and Landscape –**
  - Carrie Cochran, HRSA/OA
- **Playbook –**
  - Phillip Bergquist, Michigan Primary Care Association
- **Lessons from the Field –**
  - Brockton Neighborhood Health Center



# Marketplace Outreach and Enrollment Timeline



## Health Insurance Marketplace and Medicaid Expansion Outreach and Enrollment in Health Centers Part 1

Carrie Cochran  
Deputy Director  
Office of Planning, Analysis, and Evaluation  
Department of Health and Human Services  
Health Resources and Services  
Administration



# Health Insurance Marketplace



- A new way to get health insurance
  - Enrollment starts October 1, 2013
  - Coverage begins January 2014
- About 25 million Americans will have access to quality health insurance
  - Up to 20 million may qualify for help to make coverage more affordable
  - Working families can get help information on coverage options and enroll through Marketplace





# Eligibility and Enrollment



- Marketplace initial open enrollment period starts October 1, 2013 and ends March 31, 2014.
- Marketplace eligibility requires consumers to
  - Live in its service area, and
  - Be a U.S. citizen or national, or
  - Be a non-citizen who is lawfully present in the U.S. for the entire period for which enrollment is sought
  - Not be incarcerated



# Implementation Timeline



June 2013	July/August 2013	October 1, 2013
<ul style="list-style-type: none"><li>Healthcare.gov re-launches</li><li>Toll-free Call Center launches</li></ul>	Training for consumer assistance begins	Open enrollment in the Health Insurance Marketplace begins
January 1, 2014		
<ul style="list-style-type: none"><li>Coverage through Health Insurance Marketplace begins</li><li>Access to Medicaid will expand</li><li>Subsidies for private insurance through the Marketplace will be available</li></ul>		



# Where Consumers Can Get Help



## For Consumers:

- HealthCare.Gov
  - Now – Sign Up for Email and Text Alerts and Get Ready
- 24/7 Toll Free Call Center
  - 1-800-318-2596 (150+ languages)
  - 24/7 Website chat
- Starting October 1, 2013, consumers can apply through this site





# General Resource For Partners



For Partners:

[www.marketplace.cms.gov](http://www.marketplace.cms.gov)

Get the latest resources to help people apply, enroll, and get coverage in 2014.

The screenshot shows the CMS.gov Health Insurance Marketplace website. At the top, there is a navigation bar with links for 'About CMS', 'FAQs', 'Print', and 'Share'. A search bar is also present. Below the navigation bar, the main heading reads 'Health Insurance Marketplace' with a sub-heading 'Centers for Medicare & Medicaid Services'. A large banner features the text: 'Starting this fall, there'll be a new way for people to buy health insurance - the Health Insurance Marketplace. Get the latest resources to help people apply, enroll, and get coverage in 2014.' A prominent blue button says 'Get updates >'. Below the banner, there are two dark navigation buttons: 'Get official resources >' and 'Explore research >'. The main content area is divided into three sections: 1. 'Resource spotlight' featuring a presentation titled 'PLEASE COMPLETE THIS PRESENTATION TO OTHER HEALTH CARE PROFESSIONALS' with a 'Get presentation >' button. 2. 'Looking for consumer information?' with a 'Get consumer information >' button. 3. 'Have questions?' with a 'Get answers >' button. At the bottom, there is a footer with the CMS.gov logo and a social media section titled 'Stay connected with the Marketplace' with a Facebook icon.



For HRSA Providers:  
[www.hrsa.gov/affordablecareact](http://www.hrsa.gov/affordablecareact)  
The Affordable Care Act and  
HRSA Programs.

The screenshot shows the HRSA website interface. At the top, there is a navigation bar with the HRSA logo and the text "U.S. Department of Health and Human Services Health Resources and Services Administration". Below the navigation bar, the main content area is titled "Affordable Care Act and HRSA Programs". A highlighted yellow box contains a bullet point: "Upcoming CMS-hosted State-by-State Calls in Federally-facilitated and State Partnership Marketplace states". Below this, there is a paragraph explaining that the Affordable Care Act increases access to health insurance coverage and health services for all Americans. The page is divided into sections: "New Health Insurance Options", "Health Insurance Marketplaces", and "Medicaid Coverage". Each section has a brief description and a "What You Can Do Today" button. On the right side, there is a sidebar with "On-Demand Webcast" and "Learn More" sections, featuring video thumbnails and links to various resources like "Potential Impacts of the Affordable Care Act on Safety Net Providers in 2014" and "The Healthcare Law and You: Educational Materials".



# Key Points



- Key Points:

- A New Health Insurance Marketplace will be available to all consumers in every State, where they can shop for and purchase affordable health insurance coverage starting October 1, 2013.
- Now is the time for consumers to learn about the Marketplace so they can prepare for open enrollment.
- There is assistance available to help consumers get the best coverage for their needs.
- HHS re-launched HealthCare.gov and opened a 24/7 Call Center to help consumers get ready for open enrollment.



# Key Resources



- Key Resources:

- For Consumers: <http://www.healthcare.gov/>
- For HRSA Providers: [www.hrsa.gov/affordablecareact/](http://www.hrsa.gov/affordablecareact/)
- For Partners: [www.marketplace.cms.gov](http://www.marketplace.cms.gov)
- Finding Information on Specific States:
  - Kaiser Family Foundation – <http://kff.org/health-reform/state-indicator/state-decisions-for-creating-health-insurance-exchanges-and-expanding-medicaid/>
  - State Re-form (NASHP) – <https://www.statereforum.org>



# Contact Information



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# The Outreach and Enrollment Playbook



## Strategies for Leveraging the Coverage Expansion Opportunity



Michigan Primary Care Association  
[www.mpca.net](http://www.mpca.net)



# Your PlayBook



- Recognize Your Stakeholders
  - Staff, Patients, Community Members and Partners
- Designate a “Playmaker”
  - This undertaking needs a coordinator and a strong team to ensure success
- Construct a Plan
  - Draw from our strategies where helpful and add your own for a comprehensive approach
- Create Measures of Success
  - Agree on metrics and track them from the start to measure progress against a benchmark



# Staffing Plays



1. Anticipate Patient Needs
2. Educate All Staff
3. Train Assistors
4. Develop Enrollment Assistance Processes
5. Undertake Quality Assurance
6. Scale Up Assistance



# Anticipate Patient Needs



- Research from Enroll America points to several important statistics ...
  - 78 percent of uninsured lack awareness of new options for insurance (83 percent amongst those likely Medicaid eligible)
  - 75 percent would like in-person assistance, especially in figuring out what financial help they could receive and in selecting a plan
  - Provider offices (you) are number three on the list of places the uninsured will turn to for help



# Anticipate Patient Needs



- Apply the research to “math it out” and develop an informed estimate
  - Number of Uninsured x 83 percent  
= Number of patients that need coverage education
  - Number of Potentially Medicaid Eligible Patients x 75 percent / 12  
= Number of potentially Medicaid eligible patients that need enrollment assistance per month
  - Number of Other Uninsured Patients x 75 percent / 6  
= Number of patients per month that need enrollment assistance during the first open enrollment period



# Educate All Staff



- Does every staff member in your health center understand how the ACA will affect your organization? Your patients?
  - Can every staff member seamlessly guide a patient to coverage resources and enrollment assisters?
  - Do your staff understand the importance of providing this assistance for patient retention?
- How can you incorporate this basic training into existing staff/team meetings?



# Train Assisters



- Staff providing direct enrollment assistance will need a high level of expertise in coverage issues across Medicaid, MI Child and plans sold in the marketplace
  - The content is more complex than previous enrollment assistance training programs
- In addition to the national training curriculum and certification, think about local training needs ...



# Develop Enrollment Assistance Processes



- Educating staff and training your assisters is a great start, but consistent enrollment processes are indispensable.
  - Think about the enrollment process from start to finish
  - Document the steps, the tips, the tricks, websites URLs, helpful links, troubleshooting resources, patient take-away materials, etc.
- Enrollment processes help to ensure patients receive quality assistance across the organization.
  - Start thinking about the processes today and build them into your plan for the future!



# Undertake Quality Assurance



- We measure and pursue quality improvement for nearly all services in Health Centers.
  - Think about key indicators of patient satisfaction with their enrollment experience and positive enrollment outcomes.
  - Implement a methodology to use results for staff continuing education and process improvement.



# Scale Up Assistance



- Use a mix of enrollment assisters to meet the needs of your patients.
  - Do you have sufficient staff to provide enrollment assistance?
  - Can staff be temporarily re-assigned to help with enrollment?
  - Can you incorporate additional AmeriCorps members or other volunteers?
  - Do you have organizational partners with enrollment capacity?
- Plan for high demand in the first six months, concentrated toward the middle/end of open enrollment.



# Operational Plays



1. Gather Patient Income Information
2. Update Patient Contact Information
3. Develop Useful Reports
4. Map Patient Entry Points
5. Leverage Financial Processes
6. Structure Patient Visits



# Gather Patient Income Information



- Many Health Center patients do not have a Federal Poverty Level percentage reported in UDS.
  - Is your Health Center's data "better or worse?"
- If you don't know your patients' income data how can you proactively reach out to those who are likely eligible?
  - How can you work to record and/or update this information before coverage expansions take effect?



# Update Patient Contact Information



- What systems do you have in place to update patient contact information?
  - How well are they working?
  - Are you periodically verifying the validity of phone numbers?
- Are you collecting the full range of patient contact information?
  - Text message enabled mobile phone numbers? Emails? Facebook? Mailing address?



# Develop Useful Reports



- How quickly can you retrieve the patient information you need to pursue in-reach strategies?
  - In what format does that information export from your PM or EHR system?
- Your ability to pull useful data on currently uninsured, likely eligible patients will be essential...
  - Start generating and “tweaking” those reports today to ensure they work well!



# Map Patient Entry Points



- How do your patients connect with the Health Center on a routine basis?
  - Scheduling? Check-In? Patient Portal? Nurse Triage? Case Manager? Outreach Workers? Group Visits? Preventive Service Reminders?
- How can you institutionalize a process at each entry point to educate and assist potentially eligible patients?
  - Map the touch points and treat each one as an opportunity.
  - Focus on consistency across the organization!



# Leverage Financial Processes



- How can Health Center financial processes be used to engage patients in a conversation about coverage?
  - Collecting co-pays and nominal fees?
  - Patient questions/calls on balances due?
  - Mailing patient statements?
  - Sliding fee applications and updates?
- How can you best leverage the processes you already have in place?
  - Again, map the processes and use each one as an opportunity.



# Structure Patient Visits



- How many opportunities exist within the flow of a patient visit to educate and assist with coverage?
  - The waiting room?
  - Front desk staff interactions?
  - Clinical support staff interactions?
  - Waiting in the exam room?
  - Follow-up appointment scheduling?
- How can you structurally engrain coverage conversations into the visit?
  - PM/EHR Templates
  - Patient Forms
  - Patient Education Materials



# The Outreach and Enrollment Playbook



## Final Thoughts



Michigan Primary Care Association  
[www.mpca.net](http://www.mpca.net)



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# Outreach and Enrollment



## Health Insurance Marketplace and Medicaid Expansion Outreach and Enrollment in Health Centers Part 1

Matilda Correia, Intake Supervisor  
Luke Logan,  
Director of Practice Management  
Brockton Neighborhood Health Center



# Health Center Population



- Serve 25,000 patients.
- Diverse patient population: Cape Verdean, Haitian, Latino, Brazilian.
- 90 percent are below 200 percent poverty
- 74 percent of these patients are below 100 percent of poverty.
- Brockton and 16 surrounding towns.
- BNHC is also the dominant Health Center for 13 additional communities.
- Total area population 381,875.



# Investing in Outreach and Enrollment Staff



- Intake staff since the inception of the Health Center. Currently have 12 employees in Intake.
- Bilingual capacity is required for hire.
- Grant funding for Outreach & Enrollment from Mass Health and Blue Cross Blue Shield. Currently 0.75 FTE.



# Cultural/Linguistic Access



- 80 percent of our staff speak more than one language.
- 22 onsite interpreters from the cultural communities of our patients.
- Access to sign language interpreters.
- Use of Language Line.



# Investment in Outreach and Enrollment Staff



- The investment is mission driven but also financially prudent.
- Even though Massachusetts has current rate of 98 percent insured, many of our patients fall out of coverage.
- Roughly 40 percent of patients are cutoff for not filling out review.



# Preparing Health Center Operations for Outreach and Enrollment Staff



- BNHC uses an Electronic Practice Management System (NextGen).
- Insurance information is included and reports are available for management of information.



- Virtual Gateway.
  - Mass Health online submission for health insurance (application process)
- MAP
  - My Account Page
- Patients can also check the status of their Mass Health application on-line.



# Staff Training



- In-house expertise in insurance.
- Attendance at State trainings.
- Intake is usually an internal promotion.
- Last year promoted a Supervisor to a staff Development/Trainer for Practice Management Staff.



# Staff Training



- All Practice Management Staff (registration, telephone, clinical secretaries) are trained in accessing the MA “revs” system to look up insurance.
- Intake staff is responsible for changes of information related to health insurance coverage (i.e., Name, DOB, etc.)



# Current Outreach and Enrollment Program



- Identification of insurance begins with the first telephone call.
- The switchboard staff looks up the patient's insurance status on the MA Virtual Gateway.
- If the patient does not have current insurance or is new to us, the telephone staff will schedule an appointment with the Intake staff.



# Current Outreach and Enrollment Program



- Schedule Intake appointments prior to or on their first appointment at the Health Center/Walk-ins.
- Do a daily Chart Review of all patients scheduled for the next day and call all patients with insurance challenges prior to their appointment.



# Community Public/Private Partnerships



- Mass Health – provided onsite training for each new major initiative
- Mass Health Quarterly Training Forum
- Health Connector
- Other public insurers: NHP, Network Health, Boston Medical Center
- Use of Community sites in addition to the Health Center location. Career Works, Food Pantries, Cape Verdean Association, Teen Challenge
- Use of Radio – especially for cultural communities
- Community Leaders Forum: Held quarterly, invite church leaders, human service organizations, cultural organizations



# Results/Data



- Provided 2,600 new applications and 4,500 renewals in 2012.
- Completed DVD on application process in four languages – this is played in our lobby and has been given to community leaders.



# Lessons Learned/Tips for Other Health Centers



- We average two meetings per consumer before the application is submitted.
- Consumer needs to trust you prior to giving you their information.
- Services best provided by having regular hours in community locations.



# Contact Information



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