# **Slide 1:**

# Implementation Council

## Activity: Design an Outreach Strategy to Propose to MassHealth

# **Slide 2:**

# Review of January 2016 Passive Wave Outreach Strategy

## MassHealth worked closely with the Implementation Council to develop a targeted outreach approach that combined updated member notices with local, community-based outreach events

### Events were held in neighborhoods with large numbers of members included in auto-assignment

* Date, Time and Location of One Care Outreach events

### Thursday, December 3rd 12:30pm to 2:30pm at the Bruce Bolling Municipal Building, Roxbury

### Friday, December 4th 5:00pm to 7:00pm at the Boston Public Market Downtown Boston

### Tuesday, December 8th 1:30pm to 3:30pm at Bunker Hill Community College (BHCC), Chelsea Campus – joint Health Fair Event

### Wednesday, December 9th 1:00pm to 3:00pm at the Kroc Corps Community Center, Dorchester

### MassHealth mailed flyers about the events to members included in auto-assignment in between the 60 and 30 day notices, and also included another copy of the flyer in the 30 day mailing packet.

### MassHealth/UMMS contacted local community and neighborhood organizations, including shelters to spread the word about the events

### Events included presentations by Tufts Health plan and tables with SHINE and the OCO, along with free food

## MassHealth also redesigned the auto-assignment notice packages to be more informational

# **Slide 3:**

# Increasing Enrollment Through Targeted Strategies in 2016

## Tufts Health Plan is open to new enrollments in both Suffolk and Worcester Counties

### The previous cap in place for Tufts Health Plan in Worcester County ended as of December 31, 2015

## Commonwealth Care Alliance (CCA) is open only to members who have previously been enrolled with CCA

## We are preparing for another passive enrollment wave into Tufts Health Plan in both Suffolk and Worcester counties for a May 1, 2016 effective enrollment date.

## We are targeting enrollment of about 375 members in each county.

## 60 day notices will be mailed to members at the end of February.

## We are looking for suggestions and discussion on how to increase member attendance at future targeted outreach events, and/or alternative outreach strategies to better engage members in informed decision making during the passive process:

### Other suggested venues for events?

### Timing of events (including mailing of member flyers)?

### Online outreach – e.g., hosting a live, introduction to One Care/auto-assignment webinar?

### Other strategies?

# **Slide 4:**

# Outreach Strategy: Why?

## Why is outreach needed?

### To increase knowledge of One Care across all stakeholder groups

### To reduce opt outs

### To better understand reasons for opt outs

### To increase knowledge of passive enrollees about enrollment options

### To increase the number of people who proactively make their own healthcare decisions

### To increase member participation at Open Meetings

### Other reasons?

# **Slide 5:**

# Outreach Strategy: Who?

## Populations are diverse in terms of geography, race/ethnicity, language, culture, and disability

### Which populations have we successfully reached in the past?

### Which populations have we not succeeded in reaching?

# **Slide 6:**

# Outreach Strategy: How?

## Leveraging expertise within target populations.

## Determining most effective method for deploying consumers and providers to assist in outreach

### Procure consumer Ambassadors

### Provide support to Council members (within the scope of the Council procurement)

### Other?

# **Slide 7:**

# Outreach Strategy: How? cont.

## What competencies do outreach staff/volunteers need in order to be effective?

### Familiarity with population-based strategies to reach

#### People with lived experiences of psychiatric diagnosis, trauma, or other extreme states

#### People with disabilities

#### People from diverse backgrounds (race/ethnicity, gender, sexual orientation, class)

#### People who have experienced stigma, bias, and discrimination

### Knowledge of specific geographic areas

### Fluency in specific languages

### Knowledge of One Care and MassHealth

### Ability to work with others from various socioeconomic status & groups

### Other?

## What trainings and materials do they need from MassHealth?

# **Slide 8:**

# Enrollment Notices and Provider Information

## We frequently hear that people do not enroll in One Care because their provider is not in-network

## What provider information do potential enrollees need in order to make an informed decision about enrolling?

### Ex. PCP, psychiatrist, LTSS provider availability in network

## Which providers are most important to potential enrollees and should be listed on enrollment notices?

# **Slide 9:**

# Passive Enrollment

## The Implementation Council has expressed concern about a passive enrollment growth strategy that is not evidence-based

### What information/data does the Council need to support passive enrollment moving forward?

### What information/data is the Council seeking in order to demonstrate that quality of enrollee experience is maintained during growth?

### What role is the Council seeking in shaping passive enrollment?