# MAC Brainstorming Sessions

Final All Group Meeting

May 29<sup>th</sup>, 2024

### Welcome and Introductions

Malinda (MassHealth) and Heather welcomed the group, walked through the meeting guidelines, and shared the meeting agenda. Heather also shared a slide with visuals and quotes from members encapsulating their experiences with the Brainstorming meetings.

To further build community, participants shared their names, the Brainstorming Activity they were a part of, and one thing they wanted to share about themselves in the chat. Following the meeting, the Team will share a participant directory to facilitate further connection.

## Celebrating Brainstorming Meeting Investment

Heather shared visual highlighting the investment made by participants that brought a range of backgrounds, including MassHealth Members, Providers, Caregivers, Community-Based and Advocacy Organizations, and Students.

Altogether, this process included 11 Brainstorming meetings. Activity 1 (developing the MAC) included 5 Brainstorming Sessions with 7 members for a total of 70 hours of investment. Activity 2 (outreaching to communities) included 3 meetings with 20 members for a total of 90 hours of investment.

# Activity 1 Overview

Members from Activity 1 shared key elements from Activity 1 discussions, including prioritizing accessibility. The overarching theme of this Activity was that:

The MAC should represent diverse experiences and recognize intersectionality.

The Activity 1 members also shared more detail about intersectional identities and Asset Maps created through Activity 1, outlining where/ how these communities might be reached. Participants suggested additional partners that may be added to the Asset Maps, including:

 Adding Program of All Inclusive Care for the Elderly (PACE) to the 'Various Programs' visual The Activity 1 members reviewed Activity 1's commentary on MAC approach and messaging, highlighting the importance of working with the whole person rather than checking boxes, and emphasizing the ability to make change. Activity 1 also focused on outreach accessibility, effective outreach strategies, and partnerships for success.

Participants added additional suggestions, such as:

- Emphasizing simplicity and ease in messaging to ensure potential participants are not too overwhelmed to participate
- Outreaching at courthouses to reach people in the Justice System
- Partnering with social workers and other professionals who support incarcerated people transitioning out of prison/jail

## **Activity 2 Overview**

Members from Activity 2 shared key elements from Activity 2 discussions, including the perspectives and experiences they brought about MassHealth, such as geography, services, various programs, and target communities. They also shared an overview of obstacles and lessons learned.

The group discussed how some accommodations, such as telehealth, became more widely accessible during the COVID-19 pandemic. However, participants also identified continued access issues for people with disabilities and problems with the reliability of services.

Activity 2 explored various communities, including disability community, older adults, immigrant communities, rural communities, children, youth, and families (including at risk youth), unhoused community, young and middle-aged adults, and mixed literacy communities. Members from Activity 2 shared the various partners that Activity 2 mapped to reach these communities. Participants discussed adding health vans to these partners and farmers markets as important sites for rural communities.

A participant also shared the following resource to assist people to speak with their MassHealth representatives: <a href="https://www.mass.gov/info-details/schedule-an-appointment-with-a-masshealth-representative">https://www.mass.gov/info-details/schedule-an-appointment-with-a-masshealth-representative</a>

# Jam Board Activity

The group broke out into smaller groups to collaborate on a Jam Board activity. Participants reflected on the following questions:

- Based on today's group sharing, describe the outreach strategy that you believe is important. What does that strategy look like in your own words?
- What do you believe will be the biggest hurdles to achieving real MassHealth member engagement? What suggestions do you have for overcoming these hurdles?

A participant from each group shared key take aways from their breakout discussions, including:

- Need to reach the back office of providers
- Consider using marketing campaigns with local businesses that include gift cards and reminders to participate or nominate participants for the MAC
- Use texting to reach people
- Meet people where they are
- Find interpreters that have MassHealth expertise and can act as cultural brokers
- Re-establish trust for people who have not been able to reach resolutions in the past or have struggled to receive services
- Use the MassHealth phone number so that people are not concerned that a link is spam
- Contact people who have already taken the time to share their qualms with MassHealth, such as those who have called the complaint line
- Ensure people understand MassHealth is listening to them and cares about what they share

#### The full Jam Board can be found here:

https://jamboard.google.com/d/1xDOBmSambJ8TsbBJiePgtrSsRUmm1LkVo6PllhZ6uz0/edit2usp=sharing

#### MassHealth Team Reflections

The MassHealth Team shared reflections on the Brainstorming process and the work done towards building a MAC generally. Currently, MassHealth is developing a MAC application and other MAC materials based upon information shared in the Brainstorming Sessions.

MassHealth has informed their thinking about the MAC based on information shared by group members and other stakeholders, best practices for member and consumer engagement, examples from other state Medicaid programs, and by the guidelines laid out in the New Rule released by the Centers for Medicare and Medicaid Services (CMS), which can be found here: Ensuring Access to Medicaid Services Final Rule (CMS-2442-F) | CMS.

MassHealth shared the following details about the MAC:

- The MAC will be an advisory body that aims to advise policy and programs and discuss topics such as communications, quality of care, and delivery of services
- The MAC will work with Members to develop an accountability loop that keeps
  Members informed of how MassHealth implements their feedback
- Some MAC Members will serve as representatives on the Medical Care Advisory Committee (MCAC)
  - Learn more about the MCAC here: <u>Medical Care Advisory Committee (MCAC)</u> reports to the <u>legislature | Mass.gov</u>
- The MAC will provide accommodations, including language accommodations to Members
- The MAC will provide an optional stipend to all Members
- The MAC will meet no less than quarterly and will likely meet every other month
- The MAC will use the "COMMBUYS" process for applications, since it is required to do so. However, MassHealth understands that this process is overly complex and inaccessible, so MassHealth will try to use other methods, such as a MAC webpage to host application materials as well.
  - o Find the MAC webpage here: MassHealth Member Advisory Committee (MAC) | Mass.gov
- The MAC will work with MAC members to make community guidelines and create a safe culture in which MAC members know they can share without retaliation
- The MAC is one of many ways to engage community. MassHealth will conduct additional outreach to ensure that other ways to engage are more accessible and well known

One participant highlighted the importance of the facilitation team to the success of the Brainstorming Sessions and asked if external facilitators will work with the MAC as well. MassHealth is not yet sure if they will engage external facilitators as they want to prioritize developing direct relationships with MAC Members.

# Wrap Up

Participants shared their appreciation for the Brainstorming process and the opportunity to connect with other participants. Haylee shared a word garden visual detailing terms group members used to describe engagement.

Next Steps that emerged from this meeting:

- Haylee will share meeting notes
- Participants will fill out the meeting evaluation survey
- Haylee will share a participant directory with all participants