

# Beneficiary Enrollment and Notification Work Group: Duals Demonstration Stakeholder Work Group

## **Meeting #4: Outreach**

**Thursday, May 24, 2012**

This meeting focused on beneficiary outreach, enrollment options, and potential notification strategies under the Duals Demonstration.

This is one of seven stakeholder work groups organized by California's Department of Health Care Services (DHCS) to gain input on the dual eligibles demonstration. Background information on the work groups and all materials can be found here: [www.dhcs.ca.gov/provgovpart/Pages/DualsDemonstrationWorkGroups.aspx](http://www.dhcs.ca.gov/provgovpart/Pages/DualsDemonstrationWorkGroups.aspx)

Key issues raised:

- Ensure that beneficiary notifications are accessible and available in different languages, formats, and written in simple language.
- Brainstorm alternative ways of reaching out to dual eligible beneficiaries. Sending information out by mail or telephone may not be the most effective. Consider creating media campaigns for television and radio.
- Pilot test beneficiary notifications in focus groups before they are finalized and distributed.
- Community based organizations (CBOs) can play a critical role in the outreach process, but they are in need of more funding and resources to better serve their beneficiaries.

## **Minutes and Feedback Received from Meeting #3**

Minutes from the third Beneficiary Notification and Enrollment workgroup and related meeting materials can be found here: <http://calduals.org/workgroup/beneficiary-notifications/>

Dan McCord, Chief, Health Care Options (HCO) provided participants with a summary of questions and comments that were brought up during the previous work group meeting and shared relevant updates.

### **Key Issues Raised:**

- Beneficiaries need to be informed about what happens if they opt-out of the demonstration, including detailed information of how they will access Medi-Cal

benefits. HCO is currently drafting notices that will include this information. These draft notices will be shared with the work group in June.

- Based on feedback from the last work group meeting, a default enrollment process flow-chart was created to clarify how this process will impact different populations.
- The Center for Medicare and Medicaid Services (CMS) plans on adding language to the “Medicare and You” materials that has been beneficiary tested and approved. This language can be used as a model for the beneficiary notifications under the Duals Demonstration. CMS will make this language available sometime in June.
- HCO needs to ensure that notifications are available in a variety of languages and formats that are accessible to beneficiaries.

### **Questions and Comments from participants:**

- It would be beneficial to have a work group meeting focused on consumer protections.
- When and where will beneficiaries receive information about enrollment processes and provider networks?

### **Enrollment Flow Chart**

Dan McCord, Chief, Health Care Options (HCO) shared two flow-charts outlining the enrollment process if the coordinated care initiative passes. Relevant materials can be found at <http://calduals.org/workgroup/beneficiary-notifications/>

Figure 1 is a chart that outlines what happens if a beneficiary is subject to passive enrollment.

Figure 2 is a chart that outlines options for beneficiaries that are exempt from passive enrollment.

### **Questions and Comments from participants:**

- Work group member asked for clarification on how the option of PACE will be communicated to beneficiaries and asked to revise the charts to better show the impact of passive and exempt from passive enrollment on PACE beneficiaries.

### **Health Care Option’s (HCO) Current Enrollment Outreach**

Ferdinand Morales, Deputy Project Director of Operations for MAXIMUS, the state’s enrollment broker, made a presentation about the current beneficiary outreach and notification process that is utilized.

### **Current Outreach Process Including the Availability of Enrollment Choice Representatives Statewide**

Currently, MAXIMUS has 98 Presentation Sites throughout California, and assist 45,000 - 50,000 customers on a monthly basis. The majority of these Presentation Sites are located within county Department of Social Services sites, and HCO is involved in the in-take process. At the Presentation Sites, beneficiaries receive tailored and specific information about the managed care process, their benefits, and enrollment materials specific to the county they receive care in. MAXIMUS also participates in special outreach events to advertise and provide services in local communities. MAXIMUS works closely with counties, health plans, and other stakeholder groups to provide overviews of the HCO program and outreach processes.

### **What lessons have been learned from the Seniors and Persons with Disabilities (SPD) transition?**

- It is critical to have early stakeholder involvement.
- Recognize that the duals population is different from the SPD population, so there are different barriers that need to be addressed.
- Brainstorm alternative ways to reaching out to this population. Telephone is not a very effective outreach channel, especially for the duals population since many of the listed phone numbers are to homes or care centers, so the actual beneficiary may be harder to reach.
- Dual eligible beneficiaries have high needs for specialized care, and have complex networks of providers. Health plans need to take these factors into account.
- Sending large quantities of informational materials to beneficiaries will not result in a more informed population.

### **Language and translational services provided by MAXIMUS**

Currently, MAXIMUS has materials available in 12 different languages. Language Line services are also available to beneficiaries who speak languages outside of the 12 threshold languages. For translation services, MAXIMUS subcontracts with a firm that specializes in health-related translations.

### **Questions and Comments from participants:**

- Notifications need to be written in very simple language to ensure that beneficiaries are able to understand the information. It was suggested that notification letters be mailed out in something that stands out against other envelopes that beneficiaries receive, such as having information enclosed in red envelopes or printed on bright paper.
- Television ads or radio are probably going to be a more effective way to reach out to the duals population. Also consider utilizing robo callers.

## **What happens when enrollment materials are mailed and they are returned because of incorrect address or another reason? How does this currently impact the enrollment process? How does it impact the timeline of when someone is defaulted into a plan?**

Currently, MAXIMUS and HCO process returned mail on a daily basis. When mail is returned, beneficiary records are flagged. Then the beneficiary with the incorrect address is called and informed that they need to update their mailing address. In 2010, the Department of Health Care Services (DHCS) implemented a policy change for returned mail processing. Under this policy change, no further mailings are sent to a beneficiary until a new address has been provided.

This process does not prevent beneficiaries from actively enrolling in a plan since they still have the option in enrolling via phone, in person, or through a Medi-Cal Choice Form.

### **Questions and Comments from participants:**

- A draft version of the information packet that will be sent to beneficiaries will be reviewed during an upcoming work group meeting.
- It was recommended that notices be reviewed in focus groups.
- DHCS is currently in the process of developing notices that are accessible to people with a 6th grade reading level.
- Future work group meeting will discuss process for providing materials in alternative formats.

## **Brainstorming on Enrollment Outreach**

Dan McCord and Peter Harbage, from Harbage Consulting, led a discussion about what stakeholders would like to see in an outreach plan for the duals demonstration.

### **What is the role of community based organizations, like HICAP?**

First and foremost, community based organizations (CBOs) need additional funding, resources, and staff to be more effective at counseling beneficiaries. DHCS should also consider running media campaigns to promote the Duals Demonstration.

Representatives from CBOs also asked that they receive advanced notice and straightforward information about what is going to happen so that they have adequate time to prepare. There is also a need to train CBO staff on Medi-Cal and LTSS benefits. It is also important that CBOs have the ability to speak with enrollment brokers on behalf of their beneficiaries.

### **What do stakeholders think about creating an unpaid media campaign, like a public service announcement?**

- This would be a good strategy. Look to Kaiser as a model since they have very strong advertising campaigns.
- Media campaigns are a good way to reach out to beneficiaries that cannot be reached by phone or mail.
- It is important to keep in mind that Medicare has certain marketing rules. There needs to be a discussion with CMS about the marketing roles of health plans.

### **Questions and Comments from participants:**

- Beneficiaries often need assistance filling out forms and the call center system is not accessible for people who can't push buttons, so there is a need for staff who can help beneficiaries fill out forms.
- It is critical to communicate and share current information with facility managers in skilled nursing facilities and mental health institutions, providers, physician assistants, and social workers to ensure that current information is given to beneficiaries.

### **Presentation of Comments**

Peter Harbage and Kevin Prindiville, Deputy Director, National Senior Citizens Law Center, shared a document containing all suggestions and comments that were brought up in previous meetings. This document can be found at <http://calduals.org/workgroup/beneficiary-notifications/>.

The purpose of this document is to keep track of issues that are brought up during meetings, and also how they are responded to.

### **Wrap-Up and Next Steps**

The next Beneficiary Enrollment and Notification work group meeting will be held on Thursday, June 7, 2012 from 1-3 PM.