

Person-Centered Enrollment Strategies for Integrated Care



ADvancing States – HCBS Conference | December 10, 2021

Rachelle Brill, Senior Policy Analyst



healthinnovation.org

About Us – Community Catalyst



Community Catalyst's mission is to build the power of people to create a health system rooted in race equity and health justice and a society where health is a right for all.

The Center for Consumer Engagement in Health Innovation at Community Catalyst was established with the mission of bringing people's experience to the forefront of health innovation in order to deliver better care, better value and better health for every community, particularly historically excluded populations.

Person-Centered Enrollment Strategies – Project Goals



To understand the perspectives of dually-eligible individuals on enrollment in integrated care plans

To document best practices as well as to develop recommendations for creating successful enrollment and retention policies

Methodology

- Focused on Financial Alignment Initiative in:
 1. California
 2. Illinois
 3. Massachusetts
 4. Ohio
- Three components to research:
 1. Document and literature review
 2. Enrollment stakeholder interviews
 3. Focus groups and interviews with dually eligible individuals

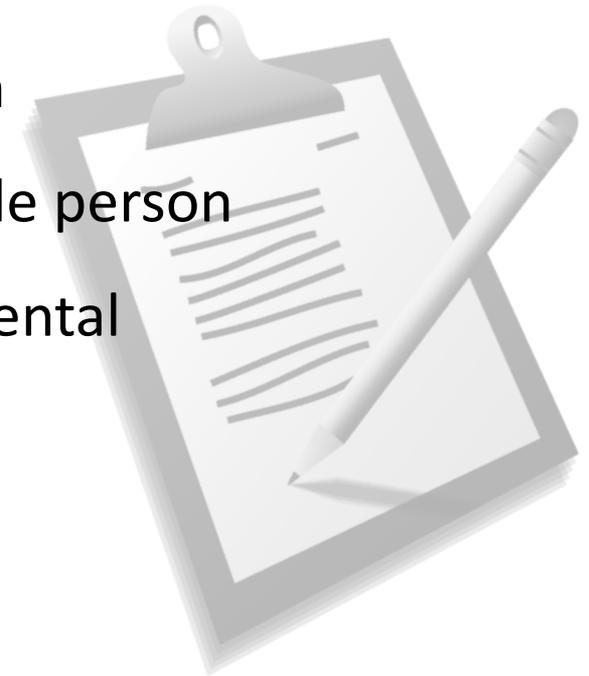


Priorities of Dually-eligible Individuals re: Enrollment in Integrated Care Plans



Factors that impact enrollment decisions

1. Ability to continue seeing their providers
2. Opportunity to make an informed decision
3. Opportunity to speak with a knowledgeable person
4. Potential to receive additional or supplemental benefits

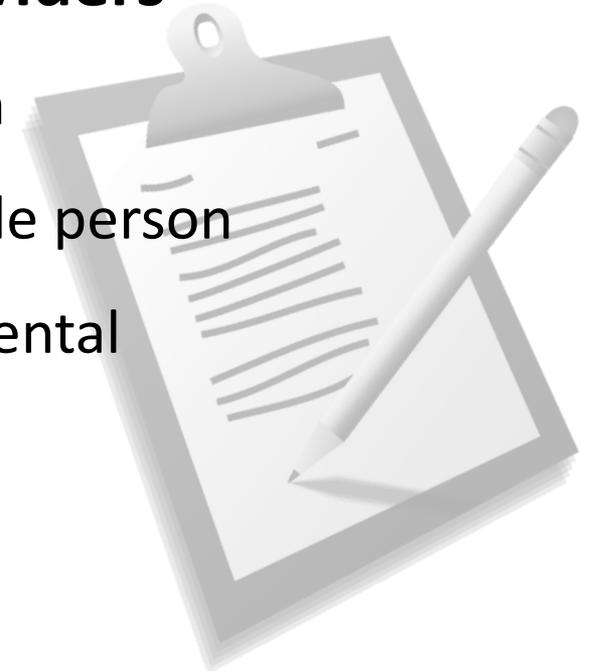


Priorities of Dually-eligible Individuals re: Enrollment in Integrated Care Plans



Factors that impact enrollment decisions

- 1. Ability to continue seeing their providers**
2. Opportunity to make an informed decision
3. Opportunity to speak with a knowledgeable person
4. Potential to receive additional or supplemental benefits





Focus Group Clip

First Stop Enrollment: Getting it Right for Medicare-Medicaid Enrollees

CHRISTAL
Ohio Enrollee



#EnrollDualsRight

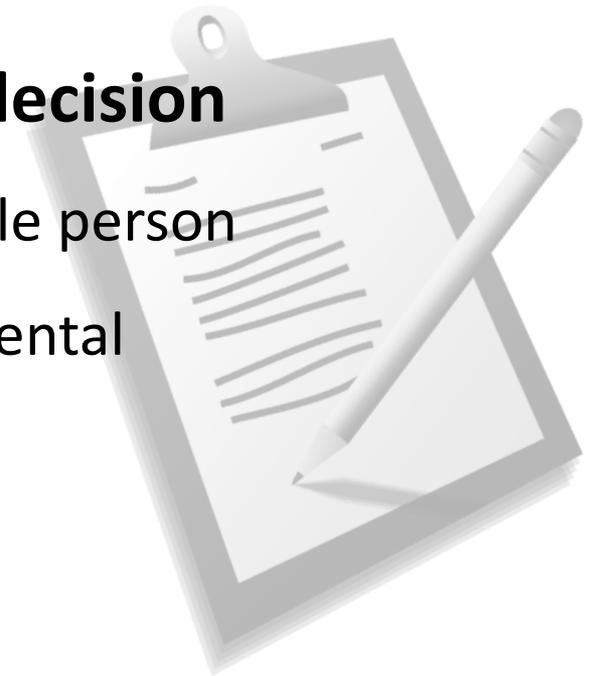


Priorities of Dually-eligible Individuals re: Enrollment in Integrated Care Plans



Factors that impact enrollment decisions

1. Ability to continue seeing their providers
- 2. Opportunity to make an informed decision**
3. Opportunity to speak with a knowledgeable person
4. Potential to receive additional or supplemental benefits



Interview Clip

First Stop Enrollment: Getting it Right for Medicare-Medicaid Enrollees

ROSE

Massachusetts Enrollee



#EnrollDualsRight



Priorities of Dually-eligible Individuals re: Enrollment in Integrated Care Plans



Factors that impact enrollment decisions

1. Ability to continue seeing their providers
2. Opportunity to make an informed decision
- 3. Opportunity to speak with a knowledgeable person**
4. Potential to receive additional or supplemental benefits

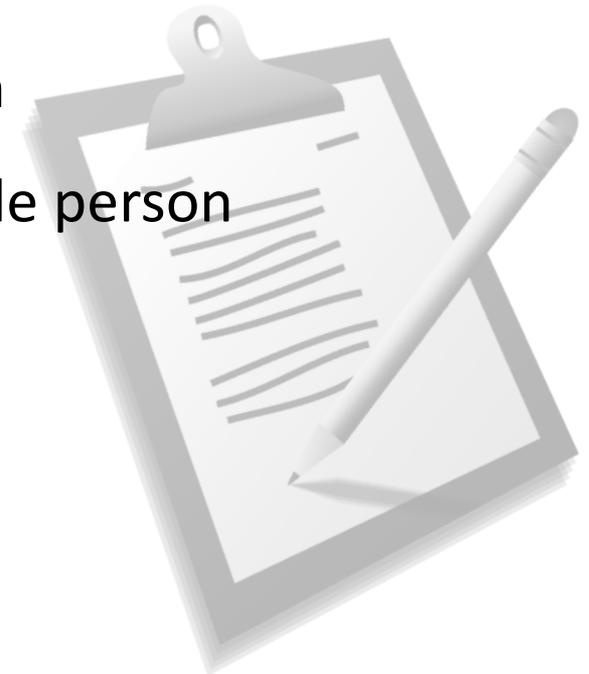


Priorities of Dually-eligible Individuals re: Enrollment in Integrated Care Plans



Factors that impact enrollment decisions

1. Ability to continue seeing their providers
2. Opportunity to make an informed decision
3. Opportunity to speak with a knowledgeable person
- 4. Potential to receive additional or supplemental benefits**





Interview Clip

First Stop Enrollment: Getting it Right for Medicare-Medicaid Enrollees

JANE

Massachusetts Enrollee



#EnrollDualsRight



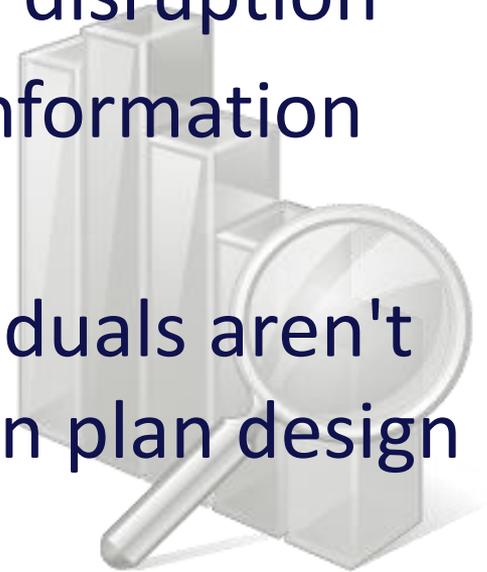
Research Questions

1. What factors are associated with enrollment in the FAI and which appear to be most important to dually eligible individuals?
2. What best practices could policymakers, health plans and other stakeholders employ to improve enrollment?



Findings

1. Limited provider networks prevent access to care
2. Individuals don't have enough information
3. Passive enrollment leads to care disruption
4. Individuals don't have a single information source
5. Priorities of dually-eligible individuals aren't successfully taken into account in plan design



Findings

- 1. The limited networks of integrated care plans hinder access to needed providers**
2. individuals don't have enough info
3. Passive enrollment leads to care disruption
4. Individuals don't have a single information source
5. Priorities of dually-eligible individuals aren't successfully taken into account in plan design



Findings

1. The limited networks of integrated care plans hinder access to needed providers
- 2. Dually eligible individuals do not have sufficient information in a format that aids them in making an informed enrollment decision**
3. Passive enrollment leads to care disruption
4. Individuals don't have a single information source
5. Priorities of dually-eligible individuals aren't successfully taken into account in plan design



Findings

1. The limited networks of integrated care plans hinder access to needed providers
2. Dually eligible individuals do not have sufficient information in a format that aids them in making an informed enrollment decision
- 3. The passive enrollment process does not sufficiently inform individuals that their health coverage is changing, which can then lead to disruptions in care that cause them to opt out**
4. Individuals don't have a single information source
5. Priorities of dually-eligible individuals aren't successfully taken into account in plan design



Findings

1. The limited networks of integrated care plans hinder access to needed providers
2. Dually eligible individuals do not have sufficient information in a format that aids them in making an informed enrollment decision
3. The passive enrollment process does not sufficiently inform individuals that their health coverage is changing, which can then lead to disruptions in care that cause them to opt out
- 4. There is no single entity adequately resourced to counsel dually-eligible individuals about all of their integrated care options**
5. Priorities of dually-eligible individuals aren't successfully taken into account in plan design



Findings

1. The limited networks of integrated care plans hinder access to needed providers
2. Dually eligible individuals do not have sufficient information in a format that aids them in making an informed enrollment decision
3. The passive enrollment process does not sufficiently inform individuals that their health coverage is changing, which can then lead to disruptions in care that cause them to opt out
4. There is no single entity adequately resourced to counsel dually-eligible individuals about all of their integrated care options
- 5. What dually eligible individuals view as the benefits of integrated care are not well known to the individuals designing integrated care plans**



Recommendations



Improved provider access

The federal government should enact policies to help dually-eligible individuals maintain access to their providers, such as requiring:

1. a one-year continuity of care period for managed care integrated care plans.
 2. states to evaluate opt out rates due to provider access issues
 3. plans to address provider access issues before they can participate in ongoing passive enrollment
-

Recommendations



More accessible materials

The federal government should issue new content requirements and accessibility standards designed to improve the passive enrollment notice and other informational material for dually eligible individuals.



Recommendations



Marketing that reflects consumer priorities

States and health plans should market the benefits of integrated care plans that dually-eligible individuals have identified as important to them.

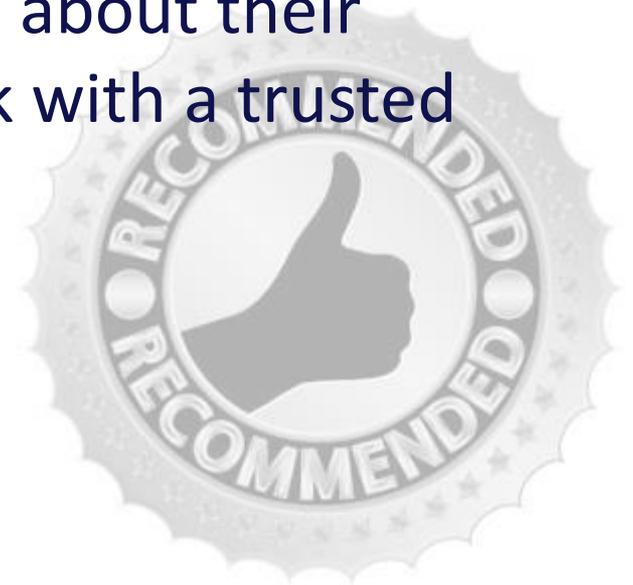


Recommendations



Resource hub

The federal government should create a resource hub in which a dually-eligible individual can receive clear, comprehensive information about their integrated care options and speak with a trusted expert.



Recommendations



Designated Enrollment Assister

States should designate certain community-based organizations to serve as an enrollment assister



For more information – read our report and toolkit!

- *Listening to Dually Eligible Individuals: Person-Centered Enrollment Strategies for Integrated Care:*
<https://www.healthinnovation.org/resources/publications/listening-to-dually-eligible-individuals>
- *Person-Centered Enrollment Strategies for Integrated Care: A Toolkit for Policymakers and Plans:*
<https://www.healthinnovation.org/resources/toolkits/person-centered-enrollment-strategies-for-integrated-care-toolkit>



Interview with Karla Warren

Integrated Care Manager

Ohio Department of Medicaid