



Promoting Medicaid and CHIP During Marketplace Open Enrollment

Connecting Kids to Coverage National Campaign

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Gabriela Duran: Welcome to the Connecting Kids to Coverage National Campaign Webinar. Our topic today is Promoting Medicaid and CHIP During Marketplace Open Enrollment. I'm Gabby Duran. I work closely with the Connecting Kids to Coverage Team to support the enrollment of more children and parents in free or low cost health care coverage. Open enrollment for the health insurance marketplace is an important time of the year when attention to health coverage is high. The 2017 Marketplace Open Enrollment Season runs from November 1, 2016 to January 31, 2017. And while Medicaid and Children's Health Insurance Program (CHIP) enrollment is open year round, families may learn about their eligibility in these programs at this time. Having information about Medicaid and CHIP at the ready while conducting marketplace outreach can connect eligible but unenrolled children who need health care coverage to vital services. Our webinar today will provide you with tips for conducting outreach during the marketplace open enrollment and support to develop messaging and activities that will resonate with families during this important time of the year to expand the outreach of your enrollment work. In just a moment, Jessica Beauchemin from the Centers for Medicare and Medicaid Services will walk us through the agenda. With that being said, I'm going to pass it over to Jessica to begin. Jessica?

Jessica Beauchemin: Thank you Gabby and thank you to everyone for joining us here today. Our speakers today will cover various strategies and tips for your organization to engage in when conducting outreach during marketplace open enrollment. Our speakers will also discuss how to develop messages and activities that will resonate with families and help expand the reach of your enrollment work. We will first hear from Lisa Wilson, who is with CMS and who will discuss outreach and enrollment strategies to implement during marketplace open enrollment. Next, the Director of Training and Consumer Education from Young Invincibles will walk us through the Healthy Young America Campaign and the best practices for engaging millennials about health insurance. We will then hear from the



Director of Policy and Strategic Initiatives at Enroll America, who will share insight on how to increase access to comprehensive health coverage. Then a Policy Analyst from Community Catalyst will share best practices when it comes to building strong networks for health care enrollment in the marketplace. We will also hear from the Executive Director from Consumers for Affordable Health Care Foundation, who will provide tips on how to leverage marketplace open enrollment in order to highlight Medicaid and CHIP. Finally, we will learn more about the Connecting Kids to Coverage National Campaign resources that can help strengthen your outreach efforts. We will also take your questions at the end of the webinar, so please feel free to use your chat box throughout the webinar. Gabby?

Gabriela Duran: Thank you Jessica. Before we begin, let's answer a poll question. In your past Marketplace outreach and enrollment work, have you promoted Medicaid and CHIP? Please submit your vote by clicking on an answer that is on your screen. Great, thank you all for your responses. We're about to close up the poll. It looks like in the results here that the majority of you, almost 82%, answered yes, that you have promoted Medicaid and CHIP in your Marketplace outreach and enrollment work, which is great to hear. So today we really are looking forward to getting your feedback too, so if there is anything you would like to add please feel free to add it in to your comment or question box during the webinar. We would love to hear your experiences and strategies in that section in the control panel. Great. So our first speaker today is Lisa Wilson. She is a Senior Advisor from the Center for Consumer Information and Insurance Oversight at the Centers for Medicare and Medicaid Services. She is going to talk today about discussing overall strategies for outreach and enrollment during marketplace open enrollment. Lisa?

Lisa Wilson: Thank you so much. And let me just say thank you to everybody for having me here today. It's really exciting to talk to a group of people who work so much on making sure that all people in our country have access to health coverage and health coverage options. Hopefully I can give you a little bit of information about some of the options under the marketplace and then connect it back to some of the work in the Medicaid and CHIP world. So let me just of course, again, begin by saying thank you for all the work you do out in the field. Without all the work that you're doing, there is no way that folks in the ivory tower like me could ever be able to reach so many people in the country. So thank you for everything that you do. We're going to start off, I'm just going to run through a few things. Everybody out there, you've been an important part of this work.



Today, about 20 million fewer people are uninsured. The Affordable Care Act has driven the uninsurance rate below 10% for the first time ever, which is amazing. So give yourself a pat on the back for your part of that. You know, it was just six years ago that millions of Americans were locked out of our health care system because they couldn't afford insurance or because they had preexisting conditions. Women were charged more than men. Health care costs were rising. So we know that there was a lot of need for the Affordable Care Act. Next slide please. Again, you can look at these numbers. Amazing results on preexisting conditions. So many people had lifetime limits and weren't getting the preventive services that they needed, and now, thanks to the Affordable Care Act, all people are able to access those things today. Next slide please. So the marketplace uses an eligibility determination to help people get access to a health plan through a private health insurance company on the exchange or the marketplace, different people talk about it differently. All of our materials call it the health insurance marketplace. Just making sure everybody is on the same page, and giving you the basic 411, insurers offer qualified health plans through the marketplace. They allow people to access premium tax credits that lower what somebody pays for their monthly health premiums. It also, depending on their income, may qualify them for cost sharing reductions to lower what people pay on out of pocket costs. And of course, everything is linked, in that we're trying to make it as streamlined as possible through Medicaid and CHIP also. Next slide please. For folks who are interested in helping people obtain coverage through the marketplace, we have four ways people can apply. Obviously the first step is to submit your application and get your eligibility process determined. All of that can happen real time, whether you are over the phone, online, or in person help. And we know that different people have different needs. Some people like to be online, some people still prefer over the phone. Then there is a group of people that really likes that face to face interaction. So not only do we have groups out there, and maybe some of you are part of our local coalition, they're assisters working with people in person to help them apply for marketplace coverage. We also have agents and brokers that are working on insuring people through health insurance companies too. So a lot of ways people can qualify for the marketplace coverage. The big thing, and this is one important difference, if you spend a lot of time on Medicaid and CHIP. One important piece of the pie that you have to remember is that, you go through the eligibility determination, and then you have to enroll in a plan. So to enroll in the plan is a two part process in the marketplace. First, you go through and you pick a plan, you select a plan. And then you have to effectuate coverage is what



we call it in the health policy wonk world. All that really means is that you make your first month's premium payment. So most of us who have insurance through our employer know the drill about paying our health insurance premiums every single month. In the case of the marketplace, in order to actually get enrolled in the plan you have to pay that first month's premium payment. So I just wanted to call that out, because that is one important difference between the world of Medicaid and CHIP and the world of the marketplace. And I know various states have a lot of different cool programs in the Medicaid and CHIP world, so some of this may or may not apply. But I just wanted to make sure that you knew that in the marketplace, we do have that important step where people have to make their first month's premium payment. And we're really emphasizing that this year to make sure people get their coverage. Next slide please. So we've already talked about an important date next week, November 1, open enrollment starts. That's the first day that you can enroll and re-enroll or change for your 2017 plan. The coverage would start as soon as January 1. You have to help people enroll by December 15 to get their coverage started on January 1. Next slide please. Kind of going through one more slide on dates and deadlines. January 1, 2017 is when coverage would start for any of those folks who came in by December 15. And January 31, 2017 is the last day folks can enroll or change their 2017 health plan. After that day, people have to change plans only if they qualify for a special enrollment period. That means you, not to go through every single one, but if you got married, divorced, had a baby. Life changing events. Next slide please. I think I already alluded to the importance of in person assistance, but let me just say it again, and I don't think I have to tell this crowd how important it is to have that personal interaction. Help is available in the marketplace. We do have a call center that people can interact with a live person. We also have localhelp.healthcare.gov, where folks can go and find a real person they can sit across from in their area. So it's an exciting tool. It boasts on one tab with folks who are assisters, so there tends to be a lot of community based organizations and other folks like that. And then also agents or brokers who are available. We have awesome language assistance through our call center and even have help for folks who might be looking for an application and are looking for a job aid in many different languages, 33 different languages. So I'm going to move to the next slide, and I'm going to just quickly talk about, there has been a ton of marketplace news and we've obviously been able to learn a lot of lessons from some of the things we've gone through here at the marketplace. I've been here since Day 1, and we have learned a lot. Number one is affordability reigns supreme. People want



their health care to be high quality health care, but they are going to come back and shop. People are really engaged, and they want to know what's going on. They also want to know if their doctor and hospital and drug coverage is all there. We have new tools that have been further incorporated into our process this year so people can do that more seamlessly. We're seeing definitely the marketplace mature. We've seen some innovation happening in the marketplace as insurers look to, what's my network look like, how can I better coordinate care across different providers. What are the right benefit designs, and how can I really retain my customers on a monthly basis. So what we're seeing is that one size doesn't fit all. That doesn't surprise people in the Medicaid and CHIP space at all because that's what you already know, and that's why the Medicaid and CHIP programs have become so successful, you are able to tailor it to populations in your state. So a lot of the same lessons learned. Two seconds more I want to just spend letting people know, we're also spending a lot of time this year on marketing towards young adults. We've announced some really cool stuff around the gig economy or innovation economy. So a press release went out yesterday talking about some of the cool partnerships that we have with companies across that sector. We're also doing some really cool stuff. A world that I didn't know before this, many of you may know it, it's called Twitch, it's an online gaming platform. We are going to be spending a lot of our ad buy there, trying to target some young adults. So you'll see some really cool and innovative stuff going on in the marketplace this year, whether it's from the marketing side like I've just mentioned or actually the health insurer side. So a lot of cool stuff going on. November 1 everything starts, and don't forget the enrollment dates are November 1 through January 31. Final slide. How do we connect this back to the world of Medicaid and CHIP? So remember of course, folks can apply any time with the Medicaid and CHIP world. And you want to look for some themes that are really easy to work your messaging in through, like back to school or cold and flu season. And really emphasizing all the quality of care and the huge range of benefits that are covered like dental and immunizations. And again, retention is just as important in the Medicaid and CHIP world as it is in the marketplace. So with that, I'm going to pause and see if anybody has questions and thanks for letting me answer some questions midway through.

Gabriela Duran: Thank you Lisa for all that great information. At this time there are no direct questions, but we will follow up if there are any questions towards the end of our Q&A session. Thank you though for all that really valuable information, and letting us know about all those cool new spaces



that you all are getting involved in to reach more people about the marketplace.

Lisa Wilson: I hope everybody was Googling Twitch.

Gabriela Duran: Thanks for that. Before we continue on to our next speaker, we're going to ask another poll question. What are the key times of year for your outreach and enrollment efforts? And you can select all that apply for the question here. Great. It looks like a lot of you are actually, 81% are conducting outreach and enrollment efforts all year round, followed closely by marketplace, and then back to school. We're glad that everyone is taking advantage of these really prime opportunities to reach families and children about health care coverage. Great. So our next speaker now is Erin Hemlin. Erin is the Director of Training and Consumer Education at Young Invincibles. Erin?

Erin Hemlin: Great, thank you so much. Thank you for having Young Invincibles on today, I'm really excited to talk a little bit about my work and thank you for all who took some time out of your day to join the webinar. Again, my name is Erin Hemlin. I'm the Director of Training and Consumer Education at Young Invincibles, and I've lead our health care outreach work for the last few years. Next slide please. For those of you who may not be familiar with our organization, we are a national nonprofit organization focused on economic advancement for millennials. By millennials, generally we're talking about young adults ages 18-34. We work primarily on three main issues: access to health care, access to higher education, as well as financial security and work worth issues. Through or work on health care, we actually got started back in 2009 as the debate over health care reform was happening in Congress. Our founders were students at the time who felt that the young adult voice wasn't really being represented in the conversation over health care reform. So they started a movement to gather stories, to hear what young people cared about in health care reform, and bringing that voice to the table. Through that work, we ended up culminating around the provision of being able to stay on your parents' health insurance until the age of 26, which was ultimately successful and still to this day one of the most popular parts of the law. So after the ACA passed and was signed into law, we started the organization Young Invincibles to see through implementation of the ACA. And through that we started and have led a campaign called Healthy Young America, which I'll go into a few details next. Next slide please. So a quick agenda. Again, we started this campaign, Healthy Young America, really with the goal of reaching young adults to



provide just a basic consumer education of what the Affordable Care Act is, how it impacts young people specifically, and then provide partners with the outreach, best practices and tools to reach young people in their communities and help them get signed up for coverage. So I'll run a little bit of the background of that, then talk a little bit about the key messaging in outreach best practices we've identified through that work over the last couple years and a few new initiatives we're working on for this open enrollment period. Next slide please. To start off, I'd just like to give a quick overview of how far we've come. As you can see through this graph, young people were uninsured at higher rates than any other age population or age group prior to the ACA. We have seen dramatic declines in the uninsured rate of young people. Prior to the ACA, young adults 18-34 were uninsured as high as 28%. That dropped down to 22% in 2014 and is now as low as 15% this year according to new census data that just came out this fall. Which is incredible, an incredible drop. We've seen a drop of 7.4 percentage points, which is twice as much as older Americans 35 and older. So we've really come a far way, even though there is still work to be done and we're really excited to make that number even lower this open enrollment period. Next slide please. To give a quick overview of what we did with our campaign. We basically used three methods to reach young people all across the country. The biggest one was a partner training series. We've led a train the trainer type series, working with a variety of different partners all across the country. A lot of in person assisters, navigators, health care outreach workers, all kinds of folks who are working directly on ACA implementation as well as organizations and partners who work with young adults or have networked with young adults but didn't necessarily have that health care piece, such as college advisors and faculty, YMCAs, Boys and Girls Club, etc. The idea was to give them information, kind of an ACA Policy 101 on how the ACA impacts young people in terms of biggest benefits and motivators for young people to sign up as well as those outreach best practices I'll talk about in a minute on how to get that message out there within their community and help motivate young people to enroll. In addition to that work with partners, we also did a lot of direct consumer education through education enrollment events that we held on the ground in about 20 states over the past four or five years, as well as online. We ran a pretty sophisticated digital outreach campaign through social media and our email list to reach young people as they are interacting through social media and online. Part of that we started a millennial families Facebook group, which actually picks up a lot of interest with young parents where we can share resources and information with young parents all across the country that we



have met throughout our work, and they can interact with each other, which has been a really fun way to connect a lot of millennial parents together in one place. Next slide please. Through that work, we've talked to thousands of young people on the ground and online, and we've developed a set of some lessons learned and best practices that have evolved over the past three open enrollment periods. Next slide please. So to start out, I always like to debunk this myth that young people don't actually value or don't want health insurance. We've seen in our work time and time again that this simply isn't true. Prior to the ACA going into effect, back before implementation fully took effect in 2012, we ran a poll of uninsured young adults nationwide. Through that poll, only 5% reported that they chose not to have health insurance. Everyone else across the board basically said that they didn't have an affordable option or just didn't have access at all. So we've seen through our conversations with folks on the ground the same thing time and time again. Really, young people want and value health insurance for themselves and their family. It's just about affordability and having access to health insurance. And we know the ACA is an extremely complicated and complex law, and it's hard to comprehend all of that information when you have a million other things going on. So we found that there really was a huge need just for an education and awareness campaign, which is why we set out to do what we did. Next slide please. So a few best practices I wanted to highlight here. When working with young adults, and especially working with young parents, it's really important to build strategic partnerships and build strong relationships with validators within the community you are trying to work in. And on the next slide I'll go through a few of those partners that we've identified and good places to do outreach. But I can't stress enough, it's really important to try to find people where they are. Go to where they are. Especially with young parents, they're not looking to add more things to their calendar. You need to go to where they are already working, where they are already socializing, where their kids are going to school, etc. in order to get messages out there rather than expecting them to come to us. Digital engagement, again I mentioned, has been a really great way to communicate. The vast majority of young adults are on social media and have primary access to the internet through their smartphones, and it's a really great way to get simple messages out there. We recently started a new partnership with a mobile app called Fresh EBT, which has a really great and innovative feature where you can download a mobile app for folks who are eligible for SNAP benefits and be able to see their benefits right then and there rather than having to call to find out their balance. And they've agreed to send push notifications out throughout open



enrollment to people who have downloaded that app, which we're really excited about, in order to get those messages out there about deadlines and things as they're coming up. And finally, and we'll talk a little bit more about messaging in a second too, but really tailoring your message to the whole family. We've seen a lot, especially misconceptions when young adults have been told, or young parents have been told, that they are not eligible for health insurance they just automatically assume that their children aren't either. And in many cases, their children will be eligible for traditional Medicaid or CHIP even if their parents are in a coverage gap in a state that hasn't expanded, or maybe now they're eligible for marketplace insurance but were told in the past they weren't. So really making sure that the messaging is tailored for mixed status households and mixed eligibility households as you're working with young parents. Next slide please. Again, so I just wanted to highlight a few of the key partners that we really strive to work with when working with young adults and young parents.

Community colleges are really a great place to do outreach and try to build relationships. Prior to the ACA, a lot of community colleges had uninsured rates as high as 80%, partly because the majority of their students tend to be what is called a nontraditional student, students who are older, above the age of 26 who are no longer on their parents' insurance, who maybe are going to school and working part time and don't have an employer option. It's a really great place to do outreach and find some of these young adults who are likely eligible for marketplace insurance. And when working with young parents specifically, we've had some success working with clinics and trying to talk to young parents who are taking their children in for checkups or getting immunizations at the beginning of the school year to talk to the parent about their insurance needs. Getting them kind of all in one place has been a really successful tactic for our in person assisters. In addition to that, working with elementary schools, PTA programs, even the YMCAs and recreational league sports for children, peewee football, peewee baseball, all kinds of programs like that, and trying to reach a group of young parents in one place and get information out there to set up appointments and remind people about open enrollment and remind people about financial assistance has been a really great place to do work. Next slide please. To identify some of those key messages when we're working with young people, we've really found there are three phases of messaging to young adults specifically. I think of them as the first phase being, really highlighting the benefits of having a health insurance plan. Walking through what preventive care looks like. We've found in our work that just saying the term, free preventive care is available when you have health insurance, wasn't really resonating with



the young folks we were working with. However, once we broke down what is included under preventive care, that really clicked and they could see value in that. Just the term was not familiar or not resonating as a health insurance benefit. But especially for young women, access to contraception without a copay is a huge motivator. For young parents, well child visits and prenatal care and pediatric care for their children are great benefits that are included in every plan through the essential health benefits and really important to highlight. The second phase is the financial aspect. I think the financial security and peace of mind of knowing that having health insurance, you're protected against huge medical debt if you are to get sick or get in an accident. That can be a really positive message too. And of course, finally, the fact that there is financial assistance available, and for young adults, young adults disproportionately benefit from the subsidies. If you are a young person just coming out of school, working an entry level salary or maybe working part time while you are finishing school and have a lower income, you are going to benefit the most from those subsidies, and really driving that point home is really critical to motivating young adults to enroll. Next slide please. Just to illustrate that a little bit further. When talking about affordability, it is really important to make it concrete and give localized examples. We found that the vague, financial help or financial assistance is available, it tends to not resonate with folks. A lot of people seem to think that that is going to be for somebody else and not for them. However, if you kind of break it down into really specific examples of saying, for example, we spoke to a Virginia mother and she and her child were able to get covered for \$17 a month. That's affordable, and that's intriguing, and that will motivate people to see what their options are. So definitely, keeping it simple and keeping it very clear of what that affordability piece means, specifically for a young parent, and how much they're going to benefit from the subsidies is really, really important. Next slide please. All right. So a few more slides I have on kind of, what's coming up and some new initiatives for Open Enrollment 4. Next slide. So Lisa spoke about this a little bit, but I'm really excited about some of the new initiatives coming out of the administration, particularly on reaching young adults. Twitch, as she mentioned, the streaming platform will be running ads and click throughs that will take you to healthcare.gov to sign up. One of the most critical updates is HealthCare.gov Mobile 2.0, which basically means you can complete the enrollment process through a smartphone or tablet, which previously we couldn't do in open enrollments 1-3. Again, 1 in 5 young adults primarily or solely access internet through a smart phone. So mobile access is extremely important for this population. I think it's going to be a



really, really big benefit. If you haven't heard of this also, the IRS is also doing outreach this year to consumers who have paid the penalty in the past. And I think that's also really important, especially for young adults and young parents who probably aren't aware that they are eligible for a lot of subsidies and can probably get an affordable plan and not pay that penalty and then also have health insurance and that financial protection of being covered. And then finally, Healthy Adulting. So this is a new campaign that we started about a year ago to really bridge that gap of understanding how your health insurance works, particularly for young adults. As more and more people gain health insurance, we really want to make sure that that results in better health outcomes and that young people are seeking out preventive care and actually utilizing their health insurance. So we started this campaign and have since broadened it and partnered with HHS and Enroll America and Out to Enroll and a few other partners to lead this umbrella campaign called Healthy Adulting to reach out to young folks throughout the year. Next slide please. So here are a few of the things that we're doing under that Healthy Adulting umbrella. First we released a toolkit about a month ago called the Healthy Adulting Toolkit, and it's really consumer facing but we're hoping that as a package it works as a great resource and outreach tool for folks doing outreach to young people on the ground. It again has a fact sheet on the Affordable Care Act, just the basics particularly as it impacts young people. Health insurance basics, kind of understanding how your cost sharing works. I think we see a lot that people grasp the concept of the premium, but after that, understanding your deductible, your copays, your coinsurance and how they all interact with each other is very confusing and a lot of people have a limited understanding of what all of that means and how you can compare different plans with different numbers when you're shopping. So that is hopefully helpful in breaking down some of those complex terms as well as an explainer of how the tax credit works and explaining how the penalty works, and of course emphasizing preventive care. So we have that up on our website now, and we're hoping to develop more materials that we will frequently add to it. We get a lot of questions from young people about dental insurance for example, so we are creating a one page fact sheet on how dental insurance works as well as a one page fact sheet on a well child visit and why it's important for young parents to take their children for an annual exam. In addition to the toolkit and online resources, we're hosting on the ground workshops that we will be holding in conjunction with enrollment events to provide some of that education background to folks that are coming in to get enrolled. And then of course pushing out a lot of



digital content and working hopefully with a lot of very cool and exciting digital influencers this year to really maximize the message. Next slide please. Finally, we will be running our fourth National Youth Enrollment Day on December 10, 2016. This is a national day of action that we have led along with Enroll America and HHS and the White House every year during open enrollment, where we have worked with partners all across the country to really focus on enrollment for young adults on this one day. Every year we have had about 200 events reaching thousands of young people all across the country, and we are doing it again this year. So if you would like to host an event or just be involved in the movement in any way, please reach out to me and I would love to give you some more details about that. Next slide please. All right. Thank you so much for having me, and I'd be happy to take questions at the end. But that's all for me. I'll turn it back to you guys.

Gabriela Duran: Thank you Erin for that great overview of the Healthy Young America, Healthy Adulting and the Young Invincibles Initiative and providing some really helpful tips for reaching and engaging millennials where they are. That was great. Our next speaker today, we have Sophie Stern. She'll be speaking about increasing access to comprehensive health coverage. Sophie is the Director of Policy and Strategic Initiatives at Enroll America. Sophie?

Sophie Stern: Great, thank you so much. Good afternoon everyone. I am very excited to be here. Open enrollment is just a week away. So I know you all are doing this work year round, but things for Enroll America definitely pick up around this time. Next slide. So I just wanted to spend a little bit of time talking about who Enroll America is if you're not familiar with our organization. We are an independent nonprofit, nonpartisan organization. We're dedicated to working with partners to maximize the number of Americans who enroll in and retain health coverage under the ACA. We're focused on making sure consumers know about their options through the marketplace as well as through Medicaid and CHIP. We've been doing this, or I've been doing this work since the inaugural open enrollment period in 2013, and it's been a wild but important and fun ride. We have staff on the ground in North Carolina, Tennessee, Texas, Ohio, Florida, Michigan and Colorado, and then we have regional directors across the country working with partners at a more local level to get information in the hands of consumers. Next slide. In terms of what I wanted to cover today, I



wanted to talk a little bit about the cycle of enrollment, the remaining uninsured and opportunities for enrollment gains as we think to OE4 and beyond. Some outreach messages and tools, and then of course the importance of in person help and tools to connect consumers to local assisters. Next slide. So I have this slide here just to help orient us in terms of the way that Enroll America thinks about enrollment. And we really think about it in terms of this cycle of enrollment. We spend a lot of time working to identify the uninsured, following up with the uninsured once they've been identified, making sure that they are connected to in person help in their communities or online resources if that is what they prefer. But once those individuals have really enrolled in coverage, our work isn't over, and I think that many of you on the phone definitely recognize that our work doesn't stop when somebody has enrolled in coverage, that there is quite a bit of work that we need to do on the back end to make sure that people are appropriately utilizing their coverage, finding that primary care doctor. If they are in marketplace coverage, making sure that they are paying their premium each month and that they are actively coming back to the marketplace to renew. And of course, with Medicaid their reenrollment dates are a little bit different than marketplace, but we are just finding that that messaging surrounding renewal and making sure people maintain some type of coverage, whatever coverage they might be eligible for is absolutely critical. So even though the next three months are going to be intensive from an outreach perspective, for the marketplace, this work really does continue year round. Next slide. Some of you may have seen that the Urban Institute, in conjunction with the Robert Wood Johnson Foundation, released a report earlier this summer that showed some data on who are the remaining uninsured and really what are the opportunities to reach those individuals and move them to take action to get covered either through Medicaid or the marketplace. I thought that this report and the data that was presented in this report is particularly relevant to folks on the phone here, just because when you are thinking about who is the most movable of the remaining uninsured, it falls squarely in terms of your target population in terms of the people you are working every day to try to connect to coverage. So what the Urban Institute found is that 53% of marketplace individuals who are eligible for financial help and 67% of individuals who are eligible for Medicaid or CHIP are living in families in which at least one member is already receiving the Earned Income Tax Credit or at least one other public benefit such as SNAP. 24% of the marketplace population that is eligible for the greatest amount of financial help, so those cautionary reductions, and over 50% of Medicaid and CHIP households, have at least



one school aged child in the family. The next data point here is really just to say that, you know, a really big chunk of the remaining uninsured who are eligible for a good amount of financial help from Medicaid/CHIP are younger adults. So I think this is just to say that the work that you are doing over the next year and future years is more important than ever and I think that there is progress to be seen among the population of individuals that you're trying to interact with and engage during the next open enrollment period. Next slide. In terms of messaging, we've spent quite a bit of time over the past few years refining our messages to reach consumers. Something that we have learned is that individuals in this space, uninsured are incredibly price sensitive and they really value the importance of in person help. We have found that people are less likely to react to a message that is really high level and not personalized. We have tried to get more specific in terms of our high level messaging. It can be hard to do when you are trying to reach a broad population, but we've tried to get as specific as possible. Something that I would just acknowledge is that, when thinking about messaging during open enrollment, and when you are thinking about trying to engage various different populations depending on their eligibility, it can get complicated very quickly. So we have found that we try to keep our messages as simple as possible, understanding that not each point is necessarily going to resonate with the marketplace population or the Medicaid population but our goal is really to use messages that we know that work to get people in the door to meet with that in person assister to start to explore options. So the five messages that we know work are, first and foremost, that financial help is available to lower monthly costs. This year we're actually releasing new messaging today or tomorrow, and it's going to update this first point to include, more than 4 in 5 adults are eligible for financial help. The second point is again, in person enrollment help is available in your community. Three, coverage helps protect both your health and your wallet. We know from consumer testing that people really do value health insurance, they do want that financial security. This fourth bullet, new plans and new prices are available. We're also tweaking that for this year just because some of the headlines around issuers pulling out of marketplaces, and then we're going to tweak it to just really motivate consumers to shop. There might be a better option, a more affordable option out there for you, we know that people who actively shop do save money month to month, HHS has some really good numbers on that. And then fifth, there is a fine for not having coverage. And so I'm sure we can get these updated messages out to you, but they're not changing significantly, but there are some tweaks that we're making for this year. Just unfortunately,



we weren't able to have them done in advance of this call. Before we move on to the next slide, I just want to acknowledge that there are some challenges this year in terms of outreach, and we know that there is a lot of conversation around rising premiums, there are some issuers exiting from certain marketplaces. And then of course there is a big election coming up. These are all things that we need to take into consideration in terms of our messaging to consumers. So in talking about rising premiums, our role is really to serve as an explainer to help consumers understand what is happening. We are pointing out that premium rates are increasing each year, but it's not as significant as it was before the Affordable Care Act was passed and new price controls were put in place to slow that growth. And then most importantly, I think it is, the financial assistance is tied to the actual price of plans. And so as prices increase so does that financial help. So those are kind of our key messages there. And I think one key stat that is important is that even if every premium in the country rose by double digits, thanks to financial help three out of four Americans could still find a plan for \$75 or less. And that is pulled from data that HHS has put out. And I think in terms of issuers exiting the marketplace, the bottom line is that consumers need to know that they still have options, there are still multiple plans available to them in the marketplace. On average, even if there is just one issuer issuers are offering about ten plans, and the average consumer has about thirty plans to choose from. So I think that is just an important point for individuals to know. We've also developed a graphic for individuals who are affected by issuers exiting the marketplace. You can go to getcoveredamerica.org to find that resource. So that is just a little bit about our consumer facing messaging. I think we can go to the next slide. I did want to spend some time talking about our outreach tools. So if you go to our consumer facing site, getcoveredamerica.org, there are a suite of digital tools that are available to consumers to use for free. The first is our Get Covered America Calculator, which helps people estimate the amount of financial help that they might be eligible for each month if they shop through the marketplace. If it turns out that we think that they're eligible for Medicaid, we'll direct them to the appropriate resources. So we've spent a lot of time making sure that we are directing traffic to the right point of entry for people to take action to enroll. The other tool is the Get Covered Plan Explorer, which helps people understand how much they might be spending in total out of pocket costs over the course of the year depending on which marketplace plans they are interested in in their area. We take into consideration their health conditions and their overall health status. And of course people can look up their providers and drugs as well. And the last



tool that I won't spend too much time talking about now is our Get Covered Connector. It's a tool that people can type in their zip code and find in person in their community. I'll spend a few minutes talking about that towards the end of the presentation. But some actual tools that we have found incredibly effective to use in terms of outreach are commit cards. It is basically a card that at the top has some information about open enrollment or new health insurance options for the individual. And at the bottom of that card is just a place for consumers to fill in their information. So if you are talking to somebody in person, say in a high traffic area, and you are asking them if they are interested in finding out more information about health insurance, you would hand them the top piece of that card that has information about where to go and how to get help, then you would take the bottom piece which includes their name, email, phone number, so you can continue to follow up with them throughout the enrollment period or throughout the year and get them connected to coverage. Another tactic that we found that is helpful is sign in sheets. If you are a health center, or if you just have a place where people can sign up to receive more information about health insurance should they be interested. And another tactic is providing staff with call scripts to conduct that follow up, so you can get a sense of what messages are working, what it is that people are needing help with over the phone to even refine further your outreach and follow up and become even more efficient. Next slide. So in OE3, you're going to hear from speakers across the board how important partnerships are. But something that I think in OE3 we had some really unique partnerships, which was incredibly exciting to reach various different populations. We partnered with the DMV, we partnered with utility companies to make sure people were receiving information with their utility bills surrounding the availability of in person help. So I think that when thinking about people that you can work with in your community to get the word out that it's okay to think outside the box and really think about who are those stakeholders in the community that touch consumers that you're trying to reach the most and how can you get them involved or understand the value of participating in this effort to reach consumers. Next slide. Again, Lisa talked about this as did Erin, but I think the value of in person assistance, we just can't say this enough. We know that people who received in person help were 60% more likely to successfully enroll in coverage. Over 80% agreed or strongly agreed that they would recommend in person assistance to a close friend in a survey that we conducted after the third open enrollment period. Something that is interesting we're finding is it is not just older populations that are wanting in person help. It is even young adults who we all think are tech savvy, and



who very well may be, but they are also wanting that in person assistance. So it is just an incredibly important resource to continue to provide to consumers. Next slide. So what you see here on this slide is an image of our Get Covered Connector, it's our Find Local Help tool. Consumers can use this tool for free to enter their zip code, they can search within what distance they want to find help, what language it is that they need help in, and then they search for help and they can find organizations in their area that are providing that assistance. Next slide. So the Get Covered Connector, again from a consumer facing perspective, is free for individuals to use. From an organization perspective, it's free in the sense where you can take this tool and embed it on your website and make it available for consumers to use. If you want to use it as a back end scheduling tool you can do that, it does cost a little bit of money but you can manage assisters' schedules in one system, make appointments publicly available for consumers to book, you can automatically send consumers appointment reminders. We have found that the more interactions consumers have with the organization before an in person assistance appointment the more likely they are to show up. And then you can of course access all appointment data for your reporting needs. And that is aligned with the CMS reporting requirements. So with that we can go to the next slide. Thank you so much for inviting me to speak today. Again, I'm happy to answer any questions that you may have at the end of today's presentation. And I'll turn it over to Rachelle.

Gabriela Duran: Thank you Sophie for your insights on messaging and all the resources from Enroll America available to help increase access to comprehensive health care. Our next speaker today is going to be Rachelle Brill, and she will be speaking about building strong networks for health care enrollment. Rachelle is a Policy Analyst at Community Catalyst. Rachelle?

Rachelle Brill: Hi everyone. Thanks so much for having me. I'm going to be speaking today about strategies for building and maintaining a strong network when conducting outreach and enrollment for Medicaid and CHIP. But first I'm going to back up a little bit and just talk about who Community Catalyst is. Next slide. So Community Catalyst is a national nonprofit health care advocacy organization. We've been around since 1998, and we're based in Boston. Our mission is to ensure that everyone has access to high quality affordable health care. We think this mission is best achieved when consumers have a strong organized voice in the health policy decision making process, and so we seek to bring that voice to the table by both supporting pro-consumer policy changes at the national level while also working with state-based consumer health advocates in about 40 states to



build tailored health care advocacy campaigns in their state or region. Next slide. So for the past few years, our network of both consumer health advocates and enrollment assisters have developed some best practices when it comes to building a strong network to reach the uninsured and enrolling them in either the marketplace, Medicaid or CHIP. One is working with local community based partners who might have pre-established relationships with the eligible and uninsured. Another is meeting consumers where they are as Erin mentioned rather than having your own event and asking consumers to come to you, going out into the community to reach the eligible and uninsured where they already are or are likely to be. And lastly, training the trainer, or working with community based partners who perhaps are more likely to come into contact with the uninsured to educate them about health coverage options so they in turn can educate eligible and uninsured consumers. I'm just going to give some example of work that state based partners have been doing in employing these strategies. Next slide. Our partners at the Arizona Children's Action Alliance really excelled at both working with local and community based partners as well as meeting consumers where they are by working with school officials to conduct school based outreach at back to school and other school events in the city of Phoenix. They not only brought enrollment assisters to the events so parents and children could enroll in coverage during the event, but they also created materials such as the application check list on your screen that shows all of the documentation needed to complete a Medicaid or CHIP application. And they put that checklist into backpacks and other promotional materials that were already being distributed at the event. They realized that this method was really effective in reaching the eligible and uninsured with both health care coverage information and enrollment opportunities. Because as Erin mentioned earlier, rather than giving parents an additional item or event to go to or put on their to do list, they decided it was more effective to incorporate health care coverage information and enrollment into the preparation parents were already doing for their children to get them ready for school. Next slide. Also our partners at the Children's Defense Fund in Ohio really excelled at working with local community based partners as well as training the trainer by using bilingual community outreach workers to reach the eligible and uninsured racial and ethnic minority children in different cities throughout Ohio. So they used community health workers to not only assess the particular outreach needs of different regions, but then also to meet consumers where they are in the community by conducting outreach and education at existing social service programs such as at English speakers of other languages classes. Next slide. Another community



network that I wanted to mention, and this is a national community network specifically for enrollment assisters is In The Loop, which is the project that I work on at Community Catalyst. In The Loop is a joint project of Community Catalyst and the National Health Law Program that began in 2013. The one sentence description I like to give is that it is a password protected online community created for enrollment assisters such as navigators and certified application counselors to share their enrollment experiences, ask questions to one another, and to also trade best practices and report problems that they are having with enrollment. Right now we have about 4,700 members in all 50 states, and it's really a great community for sharing best practices and asking questions. We often get a lot of questions related specifically to Medicaid and CHIP eligibility and enrollment. Next slide. Another important feature of In The Loop that I like to mention is that it serves as a feedback loop between assisters on the ground that are conducting outreach and enrollment and federal policymakers. So a really great advantage of having a community of assisters from all over the country is that we're able to spot trending issues that are occurring either between multiple assisters in the same state or different assisters in different states. So one of the things In The Loop does is summarize the issues we're seeing into reports and sharing them with federal officials at the White House, Department of Health and Human Services, and the IRS so they can get a sense of how enrollment is working on the ground. So In The Loop really serves as a great feedback loop, not only between assisters, but between enrollment assisters on the ground and federal policy makers. So if you are an assister, or you're working for an organization that is a navigator grantee or is partnering with another assister organization, feel free to log on to www.enrollmentloop.org to register for In The Loop and connect with others who are doing the same thing. Next slide. And that's all for me. So I will turn it back over to you Gabriela.

Gabriela Duran: Thank you Rachelle. Thank you for sharing the best practices and helping us get examples from all those people doing work on the ground to build these strong networks within the community. Our last speaker today is going to be Emily Brostek. Emily is going to speak about leveraging marketplace open enrollment to highlight Medicaid and CHIP. Emily is the Executive Director at Consumers for Affordable Health Care Foundation. Emily?

Emily Brostek: Thanks so much and I'm so excited to be here this afternoon. I'm going to be talking just briefly about how we've been able to use open enrollment to get more kids and families enrolled in Medicaid and



CHIP. Next slide please. So first, just some information on my organization so you know where we're coming from. Consumers for Affordable Health Care is based in Maine, and our mission is to make sure that everybody in Maine can get quality affordable health care. Next slide. We do this in two ways. We help individuals access coverage and care through our consumer assistance program and statewide help line, and we also do policy research and advocacy. We are based in Augusta, our state's capital, but we cover the whole state and we've been very involved with outreach and enrollment in the marketplace ever since it opened and even before. We've also been helping people apply for MaineCare, our state's Medicaid program, for over a decade. So we have a lot of experience in this work. Next slide. As other speakers have mentioned today, we have also found that people are thinking about health coverage during open enrollment. Our help line gets very busy. People call saying, I think I need to do something, I think I'm supposed to sign up for Obamacare. What should I do? And so we've found that this is a great opportunity to tell people about all of their different options. Next slide. We also have the benefit in Maine that we have had a great deal of success in enrolling people in the marketplace for private health insurance coverage, and actually we are one of the top states for enrolling people in the federally facilitated marketplace on healthcare.gov. We are just behind Florida. And well over half of Mainers eligible for the marketplace have been enrolled. As we have been thinking about how we can get more families enrolled in Medicaid and CHIP, we know we can build on that success and use a lot of those same strategies. Next slide. So lots of different groups are working on marketplace outreach and enrollment in Maine. So on this group you see some of the assisters that we've talked about, other presenters have talked about today. But we also have insurance agents and brokers, you have insurance companies who are out there running ads and going to events often and talking to people about their options. Providers and health systems have a vested interest in getting people covered. Enroll207 is a public education campaign that is run here in Maine by the Maine Health Access Foundation. So we have lots of different groups that are talking about coverage during open enrollment, but many of them are focused on the marketplace. They are focused on private coverage, specifically when you look at insurance agents and brokers but also some of the other groups. Next slide please. And we know that when you talk to people today, we might get a call on our help line and that person calling might be eligible for the marketplace. But they are going to have family members and friends who might be eligible for other options. So I think we saw that most people on this webinar today do both marketplace and Medicaid enrollments, often



year round. And I'm sure you've seen this. People come in thinking they are going to get a private insurance plan, but it turns out they're eligible for Medicaid instead, and we need to be prepared to help them do that. And for those doing enrollments in our state who are not prepared, we need to help them know where to send those folks. Next slide please. Just a couple of quick tips from our experience is to make sure you know everybody who is doing enrollment in your area. So you may already know the navigators and certified application counselors who are near you, but make sure you know the agents and brokers as well. Next slide. And that localhelp.healthcare.gov link Lisa mentioned at the top of the webinar is a great way to find out who is doing this work that you can connect with. Next slide. And here is a big tip. Once you find people who are doing this work, if you can, offer them training and support on Medicaid and CHIP. So we find that even for navigators and some other enrollment assisters, they just don't know as much about Medicaid. If they are relying on the training that is available through CMS, there is a lot of training on the marketplace, but the training on Medicaid is not specific to the rules in each individual state and it is a complicated program. So we found that people really need that kind of support. If we can help all these people that are out there talking about coverage learn the basics, they can better assist and refer family members when they meet people who aren't eligible for the marketplace but are instead eligible for Medicaid. So at CAHC, some of the things that we do is offer full day workshops, we do custom presentations whenever we're asked, and we also have some great resources that I'll highlight for you. Next slide please. So we have a comprehensive eligibility guide that basically goes through the rules for MaineCare and who is eligible under other categories and how income is counted, all sorts of things like that. Next slide. We've also created some great references and resources that navigators, assisters and others can have on hand to use when they are talking to people. And those resources typically, like this example on the slide here, it includes both MaineCare and the marketplace. Someone can quickly see, okay, how big is the family, what's the income, and quickly scan and see what coverage program that individual is likely to qualify for. Next slide please. Our next step is to make sure that you are reaching out to others who are doing enrollment to coordinate. So if you have some great outreach materials with information about Medicaid or about CHIP, reach out to other groups who are already doing events and offer them to them. They would probably be happy to have materials that they could hand out to families they meet that may not be eligible for the marketplace. And if you can, find ways to collaborate on the events themselves. Offer to have them come and table



with you at an event, do presentations together, and just strengthen those relationships. Next slide. My final tip is to make sure that you have really strong referral relationships with all these different groups. So make sure that all of these individuals who are working on marketplace enrollment know that you are available to help with Medicaid. Because this is going to make their jobs easier. If I am an insurance agent, I am probably not going to be that familiar with Medicaid, and I probably don't really have the time to learn it and help the family navigate it. So we've found on our help line, if busy assisters know that they can send someone to us for help going through an application and getting through the process, if insurance agents know that they can send somebody to us, then that's a helpful resource for them that they come to rely on. Next slide please. So this final slide just shows all those different groups that we have a relationship with, and we've found that these relationships really inform everything that we do. We often, like Rachelle said for Community Catalyst, we'll hear about trends that are happening, problems with enrollment, that we can then communicate to Maine's Department of Health and Human Services to try to find the fix, like a confusing question on an application for example. At the same time, we might hear something from DHHS that we can send back out to the field so people who are helping with those applications know the right fax number to use when they are sending a consent form for example. So we use all these relationships to understand what is happening and how we can best help people. Next slide please. And that is it for me. Feel free to reach out, anybody who'd like to see links to any of of the examples of the resources I shared. Thanks.

Gabriela Duran: Thank you Emily for sharing those important tips on leveraging marketplace open enrollment and sharing your state's success in outreach and enrollment. That was wonderful. Thank you all for being on the webinar today. We're going to quickly run through some of the Connecting Kids to Coverage National Campaign resources. Unfortunately because of the timing we won't have time to address questions directly on the webinar, but we have been taking your questions throughout the webinar and we'll reach out to the appropriate speakers to address those questions and get those answers to you. So thank you. The Connecting Kids to Coverage Campaign has a variety of resources available. The campaign has a number of downloadable resources to help enhance your outreach and enrollment work. These include tip sheets, eNewsletters and ready made article templates, PSA radio scripts, and more. In addition to those downloadable materials, there are also digital media tools. So while you are reviewing the Outreach



Tool Library, feel free to use these digital media tools for your social media channels. We also have content and graphics that you can share and eNewsletters that you can share with your network. Some examples of our material topics include year round enrollment, oral health, vision, teens, and sports. All those materials are available for download on www.insurekidsnow.gov. You can also customize most of our materials to support your outreach efforts. We provide materials both in English and in Spanish for all of our materials, and also in a number of other languages as well. The process to customize materials takes approximately two weeks. All of our outreach videos and previous webinars are also available in the Outreach Tool Library on the Insure Kids Now website. The outreach videos are short videos showcasing a variety of outreach and enrollment practices from groups across the country. There are several ways you can stay up to date with the latest Medicaid and CHIP outreach strategies and stay connected to the Connecting Kids to Coverage Campaign. Tags can expand your reach, connect with the campaign on social media. You can follow @IKNGov on Twitter for campaign updates and to share resources across your social media channels. Don't forget to share or tag messages using #Enroll365, #KidsEnroll, #Medicaid and #CHIP. We would love to see what you all are doing in your community. You can also sign up to receive our campaign eNewsletters. They are distributed throughout the year and provide updates on campaign activities. If you have any questions or just want to share an outreach or enrollment strategy, please feel free to email our team at connectingkids@cms.hhs.gov. Again, thank you so much. We were monitoring questions throughout the webinar, and we will address those questions with you all individually. I just wanted to send everyone, our speakers and everyone participating today on the webinar a big thank you. Remember there are campaign resources available for download on the website, and a recording of this webinar will be available on the website in about two weeks. If you've missed any past webinars, please check out our webinar archive on insurekidsnow.gov. Thank you very much everyone and have a great rest of your afternoon.