NATIONAL ASSOCIATION OF Community Health Centers®

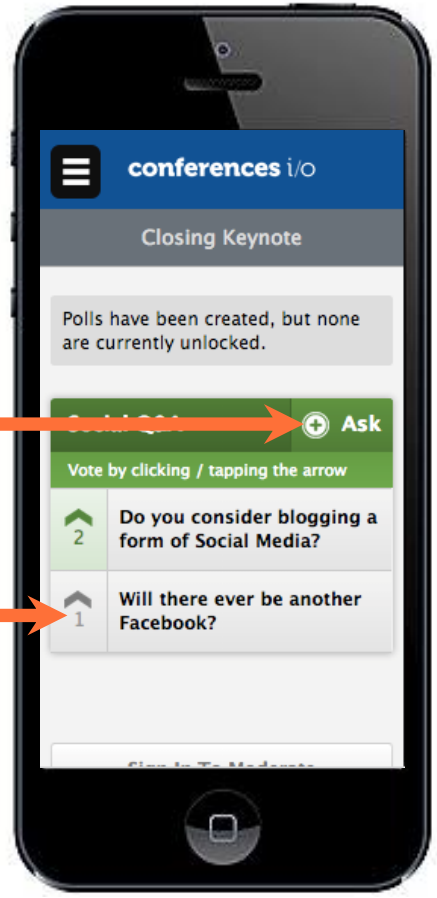
Making the Case to C-Suite to Invest More in Outreach and Enrollment

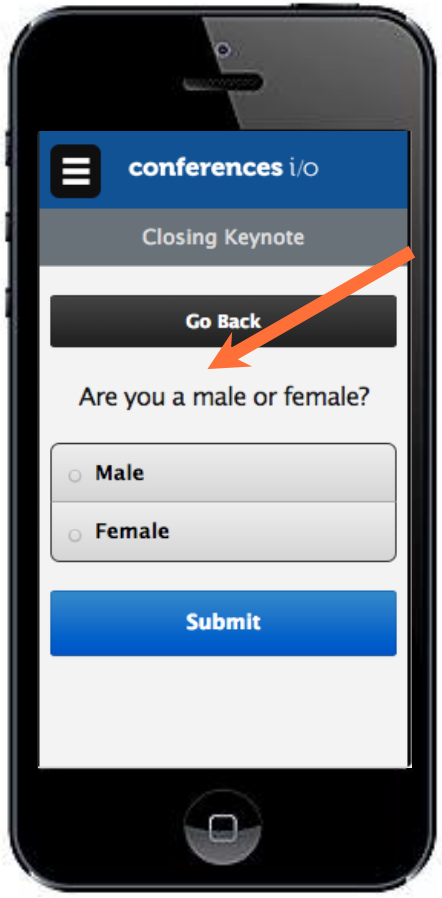
March 9, 2023

In-Person Participants

Give us Feedback

Up-Vote a Comment





Click on question and then Respond to Polls when they appear

Vote / Give Feedback/ Respond to Polls

Virtual Participants

Chat
(use to talk with peers)

Polling/Q&A
(participate in polls, ask questions to faculty)

Speakers

Elizabeth Linderbaum
Deputy Director of Regulatory Affairs, NACHC

Claudia Maldonado
Director of Outreach and Enrollment, Arizona Alliance for Community Health Centers

Tia Whitaker, CCHW
Statewide Director of Outreach and Enrollment, Pennsylvania Association of Community Health Centers

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Recent Policy/Regulatory Landscape of Outreach & Enrollment

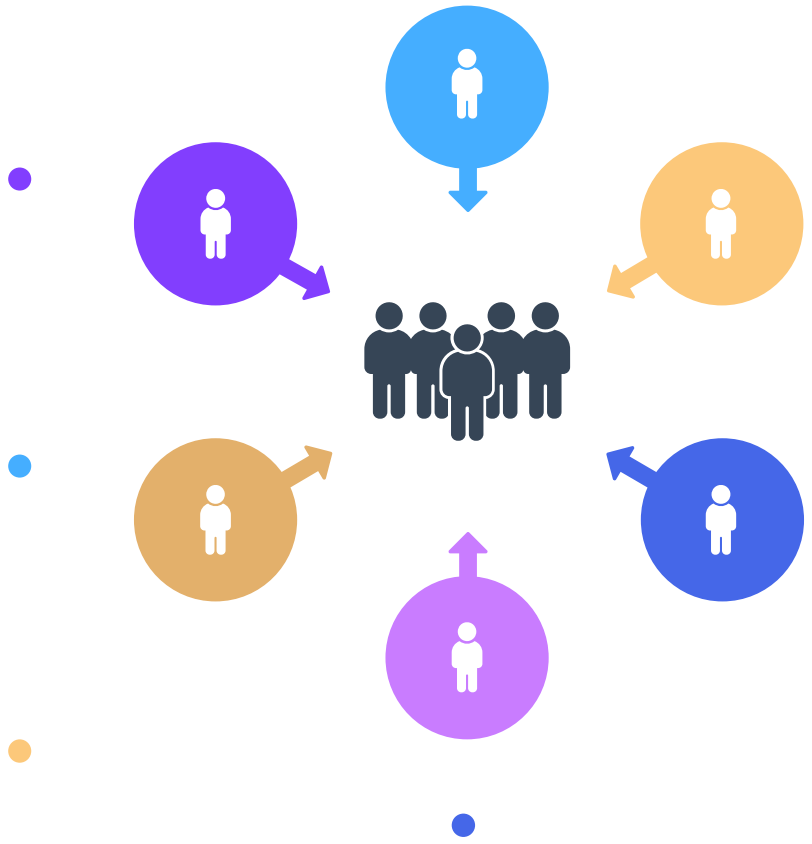
How the Biden Administration has sought to strengthen O&E

Medicaid Eligibility and Enrollment Proposed Rule

Facilitate enrollment of new applicants, particularly for duals

Align enrollment and renewal requirements for most individuals in Medicaid

Modernize recordkeeping requirements to ensure proper documentation of eligibility and enrollment



Eliminate access barriers for children enrolled in CHIP by prohibiting:

- premium lock-out periods,
- waiting periods
- benefit limitations

Timeliness requirements for redeterminations of eligibility in Medicaid and CHIP

More seamless transition between programs

Beneficiary protections related to returned mail

"Fix to the Family Glitch"

Finalized Oct 2022; effective Dec 12, 2022

Allows dependents and spouses of people that have "affordable coverage" to now utilize the ACA's tax credits

- Before – **even if the family coverage offered by the employer** did not meet the ACA's affordability standards, could not get financial assistance on the Marketplace

Positively affect about 200,000 previously uninsured enrollees and another 1 million already-insured

Notice of Benefit and Payment Parameters 2024

- Bumps percentage of FQHCs QHPs have to contract within the service area to 35%
- SEP option for people losing Medicaid or CHIP coverage to gain coverage on Marketplace
- Permit door-to-door enrollment by assisters
- Health insurance enrollee protections

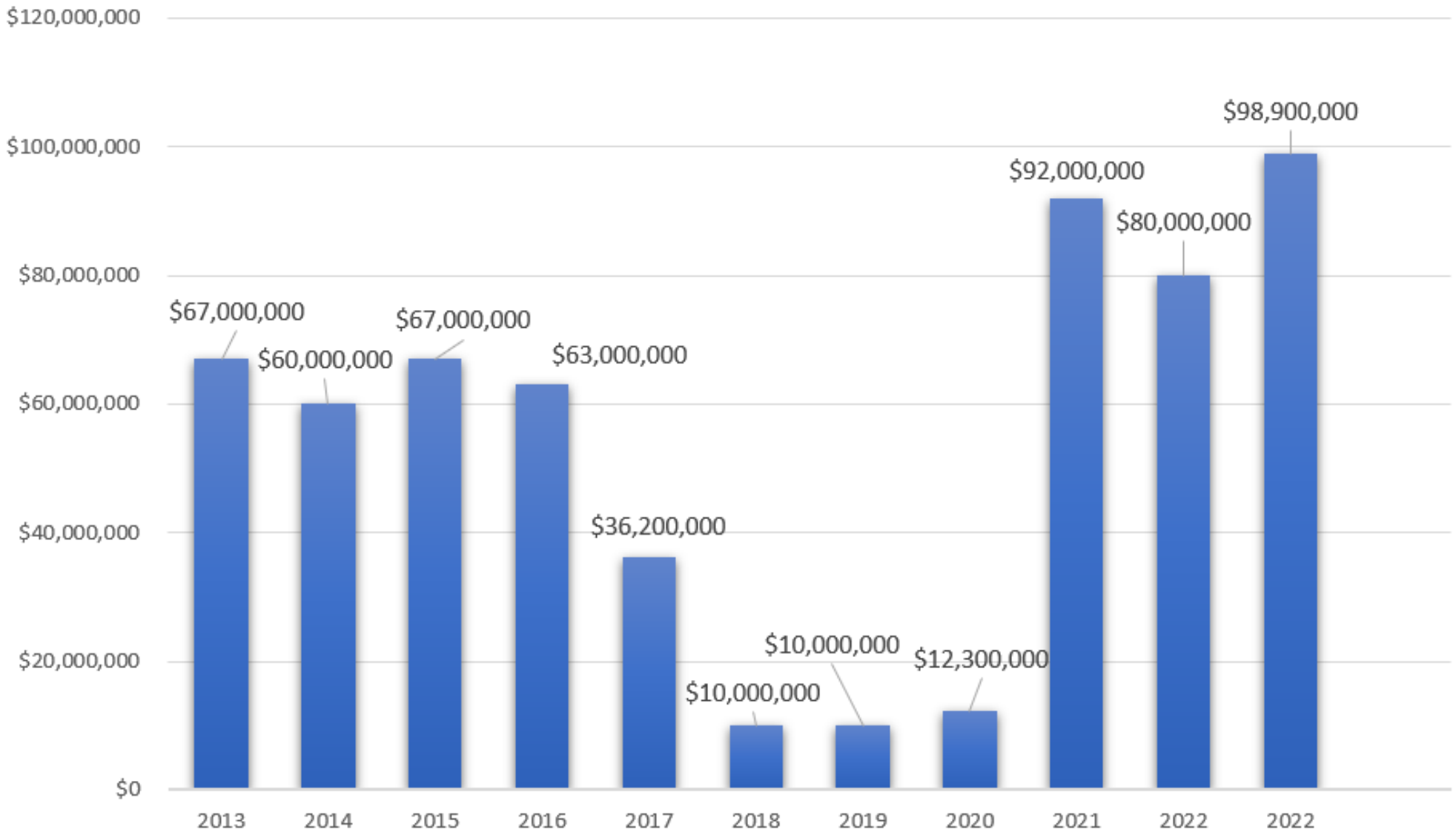
O&E Funding Streams

O&E funding within our 330 grant

Statutory Language: Section 330(b)(1)(A)(iv) Defines Enabling Services

- Non-clinical services that do not include direct patient services that enable individuals to access health care and improve health outcomes.
- Case management, referrals, translation/interpretation, transportation, ***eligibility assistance***, health education, environmental health risk reduction, health literacy, and ***outreach***.

History of Navigator Program Funding



Other Sources of Funding

- Connecting Kids to Coverage (CKC) O&E grants
  - Children eligible for Medicaid & CHIP
  - 2022: $49M to 36 orgs in 20 states

- Grants through State-Based Marketplaces (if in a SBM state)

NACHC O&E Regulatory Advocacy Asks

O&E Regulatory Asks

- More funding from CMS!
- Prioritize reimbursement for community health workers (CHWs) and case managers – outreach and enrollment workers
- Outstation eligibility workers at FQHCs
- Compliance with ECP standard by QHPs
- Increasing data sharing between agencies, with States
    - Example: States and Indian health care system

O&E Regulatory Asks

1. More funding from CMS!
2. Reimbursement for CHWs and case managers as outreach and enrollment workers
3. Continue to simplify paperwork and pre-populate forms as much as possible
4. Increasing data sharing between agencies, with States, to enhance enrollment

Arizona Alliance
FOR COMMUNITY HEALTH CENTERS
Primary Healthcare for All

NACHC P&I

Making the Case to C-Suite

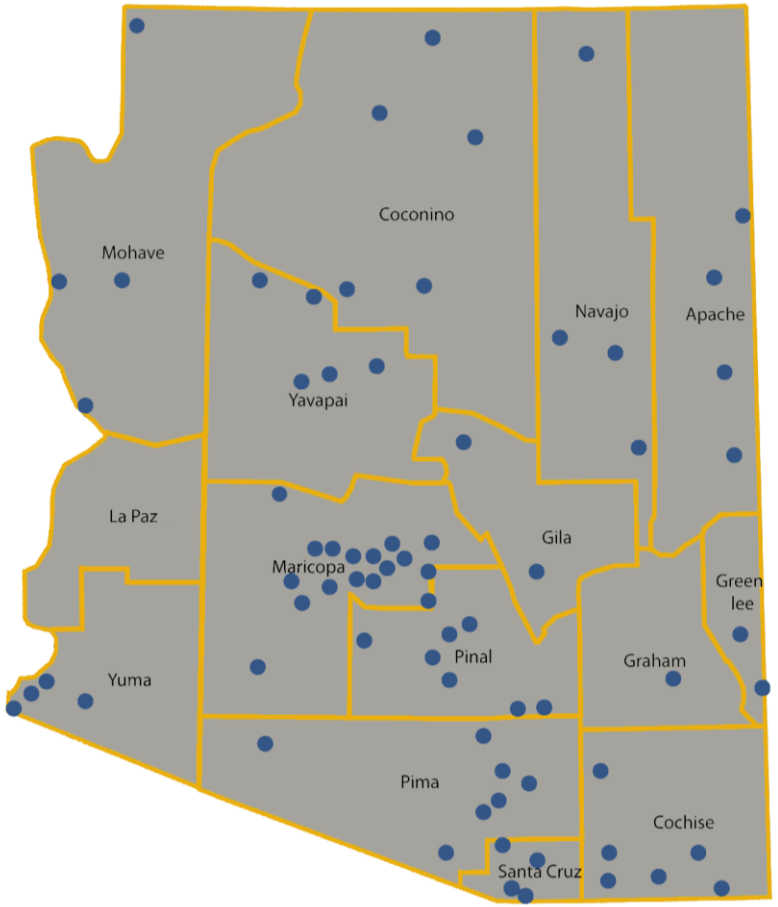
3/9/2023

Making the Case to C-Suite

- Additional Funding Opportunities
- Building an Enrollment Center Culture
- Tools that Enrollment Departments can use
- Community Engagement through an Equity Lens

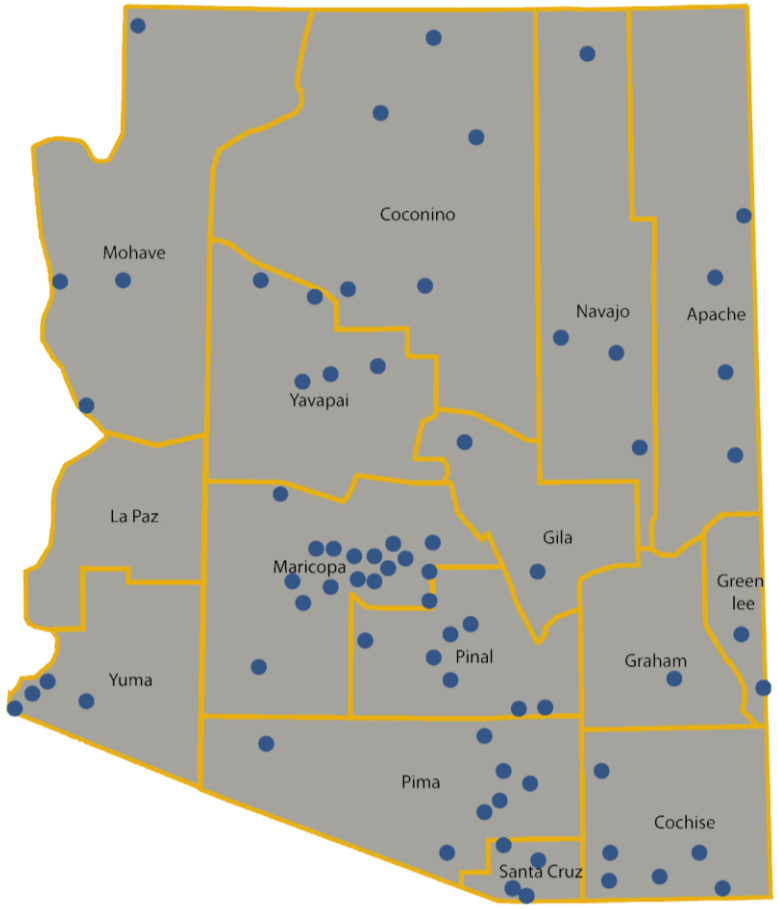
AACHC

- Primary Care Association (PCA) in Arizona since 1985
- **23** Health Center Grantee and 1 Look-Alike
- **175+ sites** in rural and urban communities across Arizona



Arizona at a Glance

- Federally Facilitated Marketplace (FFM)
- Medicaid/CHIP programs work through Managed Care Organizations (MCO)
- Over 2.4 million people on Medicaid
- Enrollment teams use two websites to assist with electronic applications
  - Health-e-Arizona Plus (Medicaid & CHIP)
  - Healthcare.gov (Marketplace)



Funding

Connecting Kids to Coverage Grant

- Cooperative Agreement funded through Centers for Medicare & Medicaid Services
- Focus on outreach and enrollment for Medicaid and CHIP within three specific groups
  - Kids
  - Parents/Caretaker
  - Pregnant Individuals

Connecting Kids to Coverage Grant

- $1.5 million dollar grant
- Three-year project period: 7/19/2022 to 6/30/2025
- 11 sub recipients
  - 8 health centers
  - 3 community-based organizations
- Focus on building relationships
  - Schools
  - WIC
  - Early childhood programs
  - Child care

Navigator Grant

- AACHC is the sole Navigator grantee for the state of Arizona and has been receiving funding since the inception of the grant in 2013
- Cooperative Agreement with Centers for Medicare & Medicaid Services.
- Focus on two areas for outreach and enrollment for two programs
  - Marketplace
  - Medicaid/CHIP

Navigator Grant

- FY 2022 Award Amount: $3,040,145
- Three year grant: 8/27/2021 to 8/26/2024
- 10 Sub recipients
  - 6 health centers
  - 4 community-based organizations
- Priority is to do Marketplace outreach and enrollment
  - Open Enrollment Period (10 weeks)
  - Special Enrollment Periods

Building an Enrollment Centered Culture

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Enrollment Centered Culture/Environment

- **Communication is KEY!**
  - Relationships
  - Department Organization
  - Information/Reports

Tools

- PointCare
  - Supports health centers with the ability to manage their Medicaid and self-pay populations.
  - Data hub for clients in which you enter information and what programs they apply for (Medicaid, CHIP etc)
  - PointCare will then run verification through the state for approved or pending status which allows for increased reimbursement

Tools

- Health centers can then go back into their EHR and look at billable visits
- Things to consider
  - Startup cost
  - Monthly payment
  - 2 year contract
  - Do you already have something in place that can give you the status of someone's application?

Community Engagement

Community Engagement Through an Equity Lens

- Engaging with community starts by understanding the dynamics of the people who live around your health centers
- Recognizing your own privilege and biases before interacting with a community
- Recognizing that you are not there to “fix” them
- Communities know the best solutions and should be the drivers when making decisions

Going Forward

- Consider other types of funding for your eligibility staff
- Implement tools such as PointCare
- Look at your community engagement to bring in more patients

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Thank you!

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Making Outreach and Enrollment an Integral Part of the Healthcare Delivery System

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PENNSYLVANIA ASSOCIATION of COMMUNITY HEALTH CENTERS
"Supporting access to affordable, high quality health care"

COMMUNITY HEALTH CENTER
FQHC QUALITY SM

Making the Case to C-Suite to Invest More in Outreach and Enrollment

Today's Session

- The Pennsylvania Experience
- The Enrollment Landscapes
- The Opportunities

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Making the Case

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Some Quick Facts on Pennsylvania Community Health Centers

- Serve more than 1,000,000 people annually in PA at more than 390 sites with locations in 54 of Pennsylvania's 67 counties
- Provide more than 3 million visits annually
- Contribute more than $500 million to economies of local communities and provide more than 3,500 FTE jobs in PA

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Some Quick Facts on Pennsylvania Community Health Centers

- 235,203 Children under 18
- *135,214 Uninsured*
- 108,533 Older Adults 65+
- 26,076 Homeless
- 183,006 Hypertension
- 89,337 Diabetes
- 56,357 Asthma Patients
- 12,138 Agricultural Workers
- 14,231 Veterans

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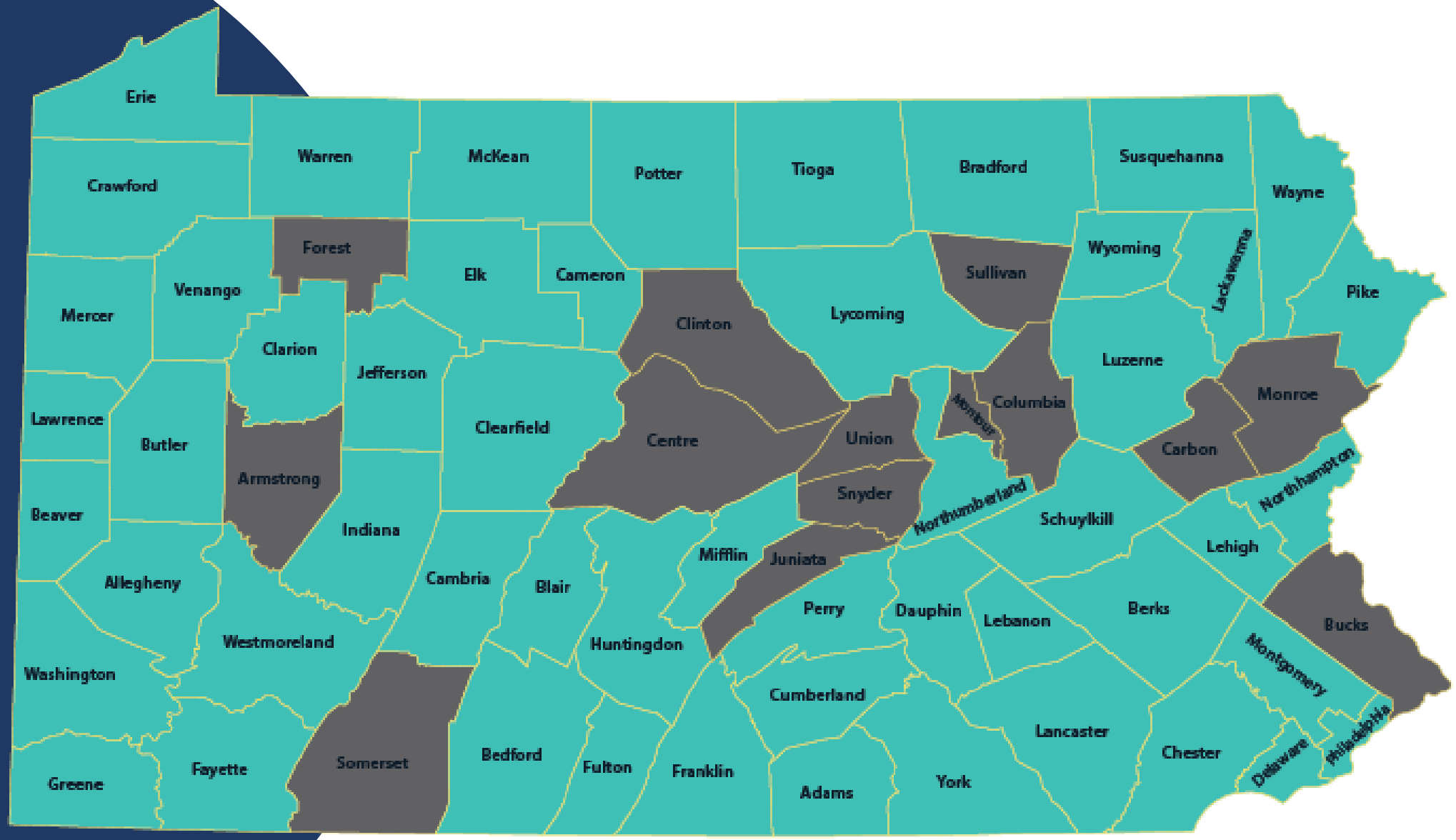

*Counties without health centers appear in grey

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Some Quick Facts on Pennsylvania Health Insurance

- 5.5% Uninsured
- 3.6 Million on Medicaid
- Almost 130,000 on CHIP

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Affordable Care Act Enrollment Timeline

2013
Federally Facilitated Marketplace (FFM)

HealthCare.gov
Get Coverage Keep or Update

The FFM opened for enrollments starting October 1, 2013 and closed in 2019.

2015
PA implements true Medicaid Expansion

Pennsylvania expanded Medicaid as of January 1, 2015, a year after it first became available under the ACA.

2020
State-based Marketplace on Federal Platform (SBM-FP)

Pennsylvania switched to a state-based exchange on the federal platform (SBM-FP) as of the fall of 2019 for the 2020 Open Enrollment Period.

HealthCare.gov
Get Coverage Keep or Update

2021
State-based Marketplace Pennsylvania Insurance Exchange (Pennie)

Pennie was created in 2019, launched in 2020 for the 2021 Open Enrollment Period.

pennie
connecting Pennsylvanians to health coverage

The Landscape

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Data Sources

- UDS
- Census and Federal Data
- State Reports
- Electronic Medical Record/EHR

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Opportunity
Missed
Taken

PA Health Center Investment in O&E

- 43 Health Centers participating in Assister Services Contract
- 130 Enrollment Assisters
- Over 49,000 Assists

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The Mission and the Margin

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Opportunities

Health Centers are Dependable

Converting Existing Patients

Uninsured
Medicaid
Marketplace
Self-pay

Partnering with SHIPS

Newly Insured Patients

Non-Traditional Funding

Retroactive Medicaid Recovery

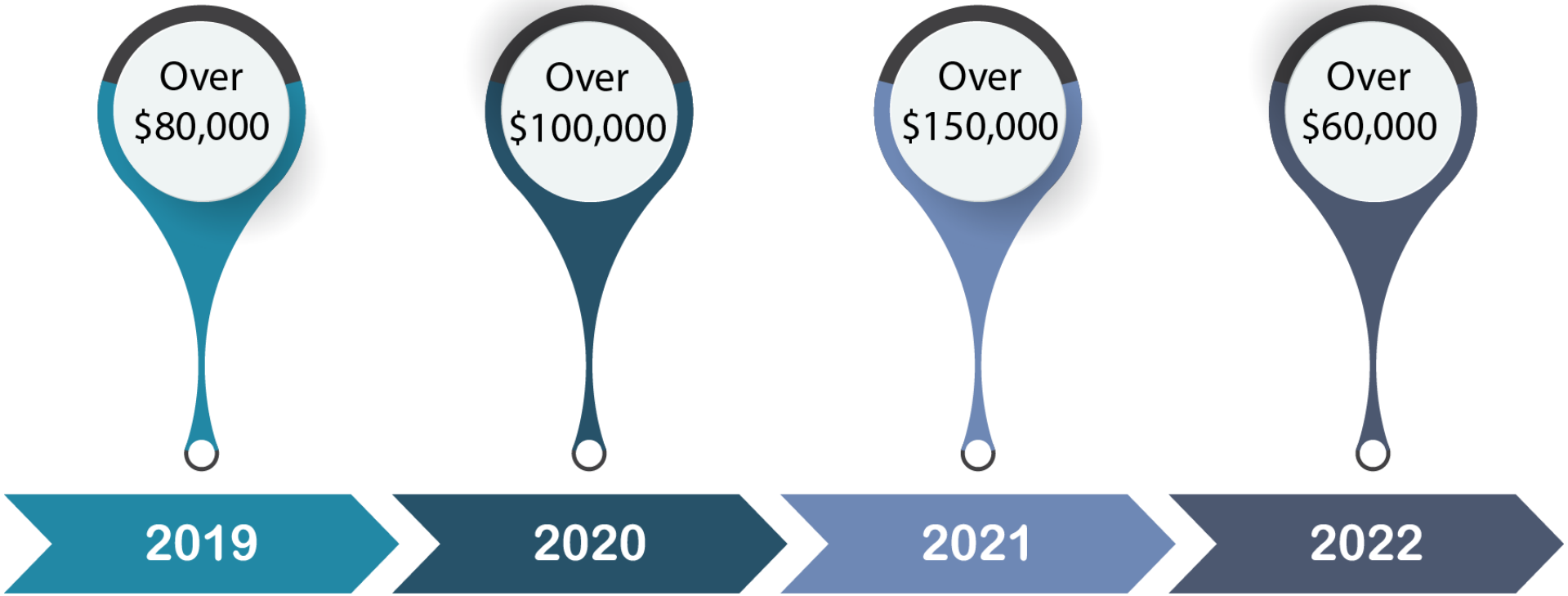
Investment in a Dedicated Knowledgeable Workforce

Leveraging Marketplace Policies

Managed Care Organizations

Example - Retro Medicaid Recovery

Medium Sized Urban Health Center



Outreach, Enrollment and Engagement

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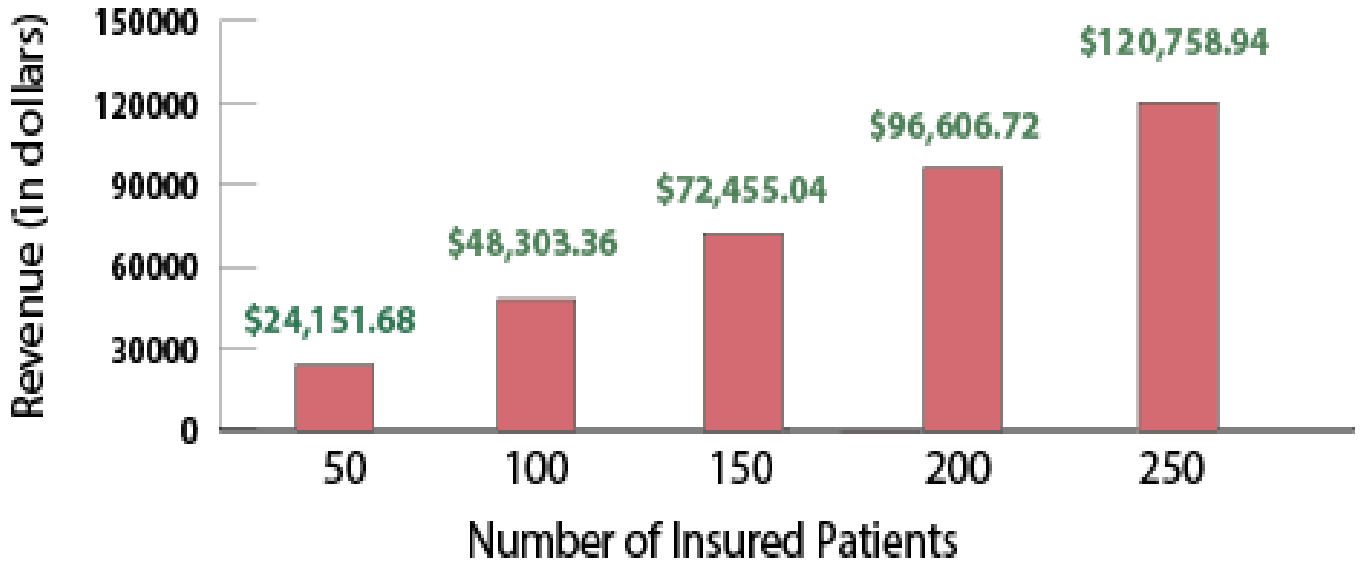
New Patient Outreach

Potential New Patient Revenue

For every 50 insured patients, your estimated annual revenue is $24,151.68**

**Based on an average of 2.24 visits per year (HRSA 2021 UDS Data) and a median medical PPS rate of $215.64



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Building the Case

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Win - Win

- Additional Funding for Health Center Programs
- Additional Revenue for non-clinical services
- Additional Engagement to New Patient
- Additional Opportunities for Partnering
- Additional Services for Patients & Non-patients

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The Big Picture

- Communities rely on CHCs as Medical Homes, places of stable quality care, and as a bridge to needed services like Health Insurance Coverage

- Connecting Patients to Care and Coverage is essential to lasting health outcomes.

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Continue to be a solution

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THANK YOU!

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