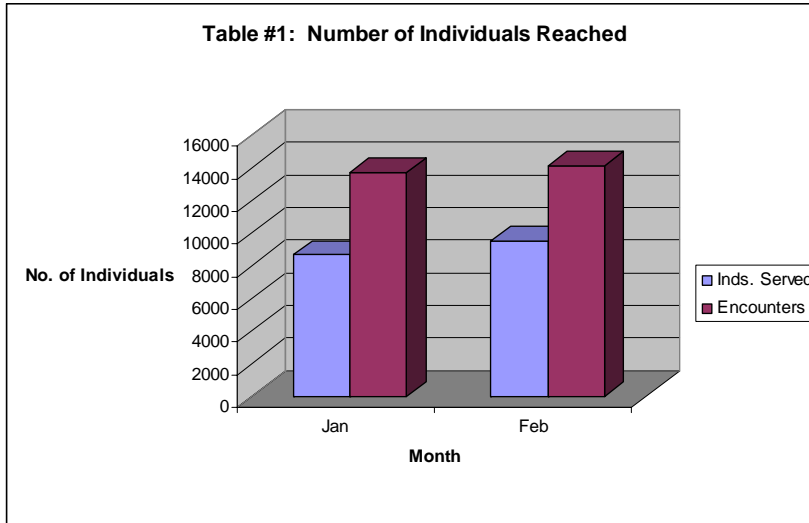


Connecting Consumers with Care/ Outreach and Enrollment Grants
Monthly Reporting: February 2010

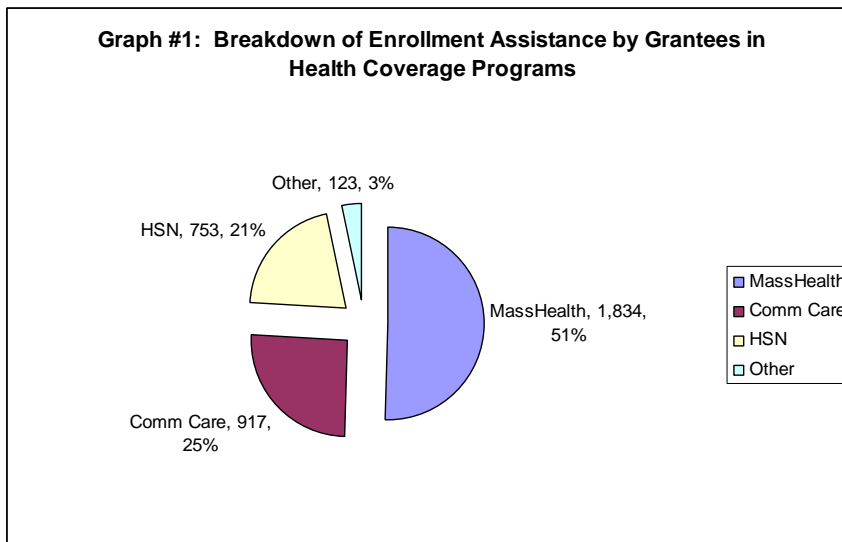
Overall Figures

- In February, a total of **9,499 individuals** were served by 23 funded organizations, 838 more than in January. Grantees also had **14,114 encounters** in the past month (see Table 1), 366 more than in the previous month.



Enrollment Figures

- Of the 9,499 individuals served, **1,688 were assisted with applying** for public health insurance. The Virtual Gateway served as the predominant vehicle by which 1,545 clients were assisted with enrollment, with the remaining applications submitted through RealBenefits and paper applications. A total of 82% of individuals assisted were between the ages of 19 and 64.
- MassHealth remains the most common program for which individuals qualify, with **1,834 individuals deemed eligible for coverage**. Nine hundred seventeen individuals were deemed eligible for Commonwealth Care (111 more than in January), 753 for the Health Safety Net, and 123 for other programs, which include Prescription Advantage and Medicare D (see Graph 1). Seventy-nine percent of all individuals approved for coverage were between the ages of 19 and 64.



- Grantees assisted clients with referrals to numerous other state programs. In February, the Medical Security Program had the most number of referrals with 498 individuals assisted. Grantees also made referrals to Commonwealth Choice (115 individuals), QSHIP (112 individuals), the Fisherman's Partnership (2 individuals), and the Insurance Partnership (2 individuals).

Maintenance & Retention of Health Coverage

- Grantees provided a significant type of service in **assisting 1,186 clients to complete annual redeterminations** in February, the majority of which were completed via paper ERV forms.
- A total of 100 individuals were deemed eligible for Commonwealth Care, but for whatever reason, did not enroll. This is over 70 more people than in the previous month.
- **A total of 1,718 people were assisted with reviewing the affordability schedule** to determine whether they would be subject to a waiver under the individual mandate, 483 more than in January.

Ensuring Health Care Access

- A total of **977 individuals were referred to a primary care provider**, 231 less than in the previous month.
- A total of **1,527 individuals were given information on minimum creditable coverage**, 538 less than in January.

Effective Outreach Strategies & Positive Experiences with Clients

- Three grantees implemented collaborations with the faith-based community this past month. The Joint Committee for Children's Health Care in Everett coordinated a meeting of religious leaders and discussed ways in which the organization could serve their patrons. The Manet Community Health Center worked with a local religious order after being connected by the Weymouth Food Pantry, and worked to ensure that many of their recent immigrant members had health coverage. Finally, Stanley Street Treatment and Resources participated in a Community Health Network Area (CHNA)-organized effort whereby local Brazilian ministers were engaged to obtain information for their members, many of whom are undocumented and wary of applying for health insurance from a state agency.
- Our grantees have been assisting many individuals and families who fled Haiti after the country's devastating earthquake. Both the Joint Committee and Manet Community Health Center have helped connect many who have recently arrived in Massachusetts.
- A number of grantees highlighted the effectiveness of word-of-mouth in connecting them with more clients who need assistance. African Community Health Initiatives assisted a woman who they connected with during outreach at a day care center to apply for MassHealth. She subsequently brought back four co-workers who needed assistance with health coverage. Tapestry Health connected with two Tibetan residents whose neighbors brought them in for assistance. After a really positive experience with their organization, the clients assured that they would spread the word and connect other Tibetan family and friends with their services.

Positive Experiences with State Agency or Partner Organization

- The Revere MEC and a supervisor at the Springfield MEC were praised for their efforts this month in helping grantees resolve complex issues for their clients.
- The Medical Security Program was very responsive to the urgent medical needs of a client served by the Vineyard Health Care Access Program.
- One grantee expressed her appreciation for the information provided at the recent round of MassHealth Training Forums on Prescription Advantage.
- Finally, Child Care Resource Center has developed a collaboration with the Center for Studying Health System Change.

Challenges and Resources Needed

- The Taunton MEC was mentioned by a number of grantees as generating a number of different challenges. First, calls are now being transferred to the Revere MEC after callers have had to wait as long as 20 to 30 minutes. However, this approach to minimizing wait times has been disruptive. Often the Revere MEC workers are not able to assist with issues already being handled by the Taunton MEC. Another grantee that works specifically with the Taunton MEC expressed concern about a policy that requires bank statements of direct deposits to demonstrate unemployment status. It is unclear which documents will consistently be accepted, and it makes many individuals have to track down extra paperwork at their local Workforce Development office.

- Long wait times were also reported at the Springfield MEC. Grantees also expressed concerns that documents faxed to the Springfield MEC sometimes have not shown up in the My Account Page system for many weeks afterwards. The Tewksbury MEC was also highlighted as having increased wait times when calling into their offices.
- Finally, there remains confusion on how to ensure clients obtain the most appropriate coverage from either the Medical Security Program or Commonwealth Care depending on a client's unemployment status. Many are not clear that they are eligible for MSP when they already have Commonwealth Care. Others do not know that they need to send in a copy of a Commonwealth Care denial in order to push along their application to MSP. Our grantee strongly recommended that MSP include language in their application materials directing applicants to include a denial letter.

Monthly Health Access Environment Highlights

Research/Findings

- The Division of Health Care Finance and Policy released results from its latest ***Employers Health Insurance Survey***, which reported a continued increase in the rate of employer-sponsored coverage over the past two years. The cost of premiums, however, continues to burden employers and has an impact on their ability to contribute to their employees' plans.