# August 2024 Partner Engagement Session Notes & Takeaways

## Care Share Health Alliance

## Reaching the Remaining Unenrolled

- Meeting people where they are literally, not just metaphorically
  - o Dollar General, thrift stores, food banks, shelters for the unhoused
  - Local pharmacies
  - Implementing street outreach methods used by Community Health Workers (CHWs)
  - Back to School events
  - National Night Out events
  - Postcard Outreach
- There is also outreach work to be done for folks who have Medicaid through Expansion but don't yet realize it
  - Substance-use clinics are a good opportunity
- NCCHCA, CSHA, and NCNC previously reached out to other states who recently expanded Medicaid to hear about their successful approaches
  - One highlight they mentioned was explaining Medicaid's specific benefits, particularly dental coverage
- Joining events that are established, well attended, provide services to the community, and that are hosted by trusted organizations
  - Ex: mobile dental clinics held by FQHCs
  - o Ex: health fairs or back to school events hosted by faith-based organizations
- Building trust takes time, and entails getting involved in your community and becoming a regular/ consistent presence at events
- Collaborating with DSS offices will be key
- Addressing fears around Public Charge will be important for the final 100k eligible individuals
- Making Medicaid Expansion information available in a variety of languages
- Do we have demographic information about the 100,000 eligible individuals who have not yet enrolled?
  - Unknown at this time

## Tailored Plan Launch

Everyone is still learning because this is so new!

- The multiple delays of the launch have created confusion for some folks
  - Plus, lots has changed in Medicaid over the past year (Medicaid Unwinding and Medicaid Expansion) so the changes can be difficult for folks to keep up with
- Some service providers have been explaining the Tailored Plan launch to patients and communicating changes
- Outreach materials for Tailored Plans:
  - Understanding what materials are already available (from NC DHHS, the NC Medicaid Enrollment Broker, etc.)
  - Need for materials that clearly explain what has changed and who is impacted
  - Need for materials that are accessible for folks with a 6<sup>th</sup> -grade reading level
- Challenge: folks moving counties and potentially having to change their Tailored Plan (there is only one Tailored Plan offering per county)
- In communities, there is more name recognition of the specific provider (ex: Trillium) than "Tailored Plans"
- Some beneficiaries have expressed that there is a stigma associated with receiving a Tailored Plan
- Clarity about the plan assignment process: if someone were to apply for Medicaid today and get approved, do they get assigned a tailored plan automatically or do they get assigned a standard plan and later transition to a tailored plan
  - How are eligible tailored plan beneficiaries identified? When helping people enroll, how can enrollment assisters help someone enroll directly there instead of having to move over from a standard plan?
  - Can we still utilize the online submission forms for tailored plans on NCMedicaidPlans.gov? (Was a means for beneficiaries to be moved from standard plan to tailored plan)
- One issue folks seem to be encountering so far is that their preferred providers are not in-network with their tailored plan, but they can continue seeing them out of network until the end of January
- Resource Needed: An outline of what services you must enroll in a Tailored Plan to receive (a list of specific, tangible services) and how to decide if a Standard Plan or Tailored Plan is a better fit

### Other Approaches:

 Keeping a list of local primary care offices that are accepting new patients helps folks who get Medicaid know where to look- calling multiple offices and having high wait times or being told they aren't accepting new patients can cause folks to feel frustrated or discouraged