



Care Management Overview

Step 1

Client Communications and Enrollment

The Member Experience

July 11, 2013



Introductions

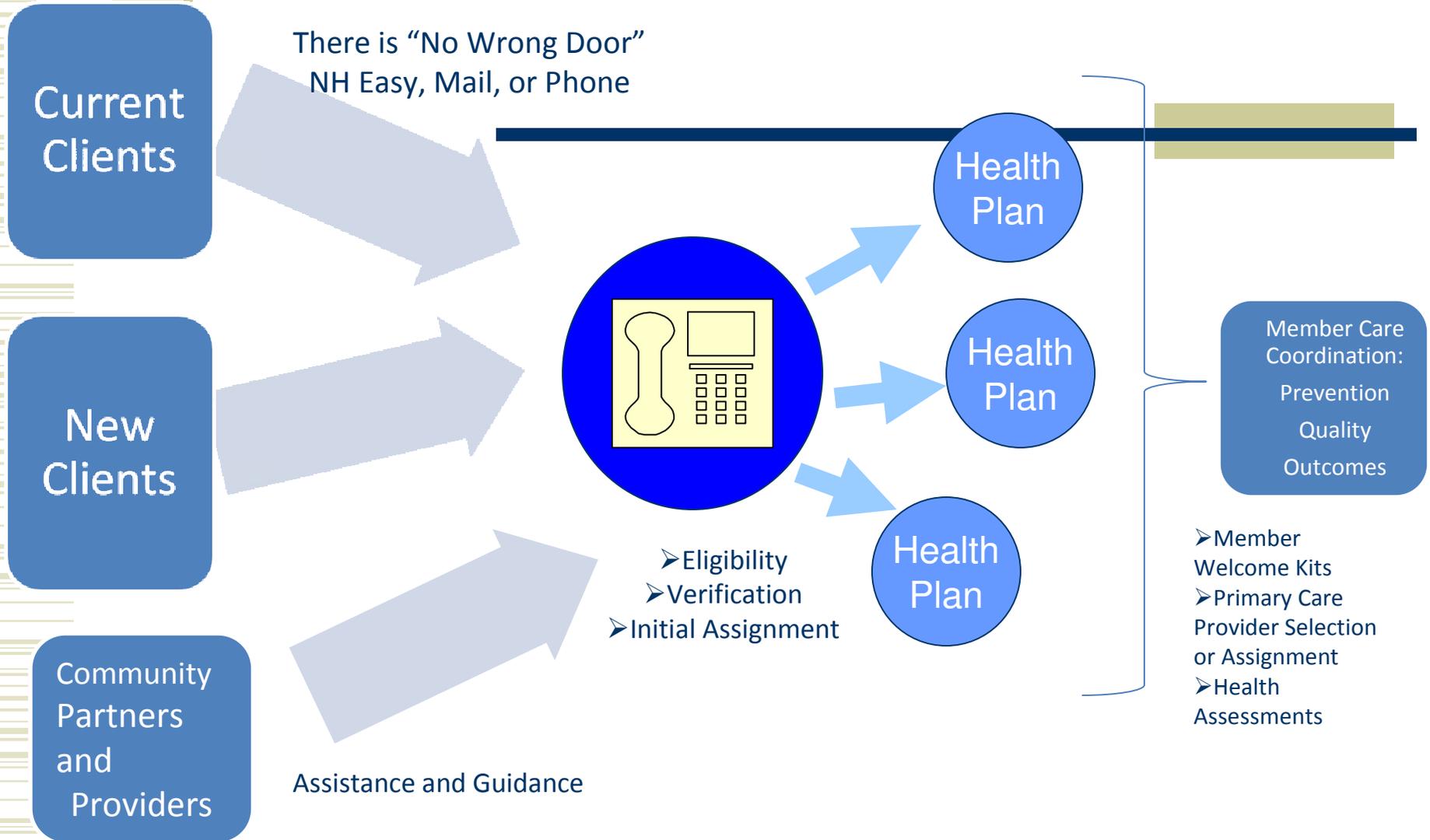
- ◆ Mary Ann Cooney
 - Associate Commissioner, Office of Human Services
- ◆ Carol E. Sideris
 - Director, Division of Client Services
- ◆ Betsy Hippensteel
 - Administrator, Medicaid Client Services



Overview

- ◆ Enrollment Process
- ◆ Client Communications Strategy
- ◆ Client Enrollment Process
- ◆ Readiness
- ◆ The Member Experience

Medicaid Care Management Enrollment Process





Client Communication Strategy

Engage - Learn - Act

Multiple communication channels & consistent messaging to Engage each client, provide the information to Learn and the guidance to Act.

- ◆ Coordinated with Health Plans, Provider Communications, and Public Information Office.
- ◆ Complemented by Provider training.



Communication Channels

- ◆ Mail: Letters, Enrollment Guide, Posters
- ◆ Website: Client specific site with MCM icon link
- ◆ Social Media: evaluating options for Facebook, Twitter, YouTube
- ◆ Traditional Media: Press, TV, Publications
- ◆ Telephone: Pre-recorded messaging
- ◆ On-line Systems: NHEasy Splash page, Web mail
- ◆ Public Forums
- ◆ Call Center: One-on-One Assistance



Client Enrollment Options

◆ #1. Enrollment Call Center

Toll Free: 1.888.901.4999

M-F 8:30 – 7:00

- Voice mail during non-business hours
- Language services

A Personalized and Easy Way to Enroll



Client Enrollment Options

- ◆ #2. NH Easy on-line enrollment
 - <https://nheasy.nh.gov/> to set up an account

- ◆ #3. Paper enrollment
 - PO Box specific to Care Management submissions



Other Enrollment Supports

- ◆ Medicaid Client Services Unit
 - Designated as the contact point to respond to and address any client concerns
 - Care Management enrollment responsibility
 - Continued support of Fee-for-Service clients
- ◆ District Offices
- ◆ Community Partners



Client Enrollment Readiness

- ◆ Enrollment Call Center trained Sept 2012; refresher August 2013.
 - Program and Communications, Health Plans, Systems, Scripts.
 - Call Center Performance Metrics established.
- ◆ District Office staff training August 2013.
 - Protocols to provide personal assistance.
- ◆ State office staff training August 2013.
- ◆ Community Partners education (initiated September 2012 and continuing with Provider education plan).
- ◆ Ongoing engagement with Health Plans, Communication Groups, Staff and Community Partners.
- ◆ Systems coordination with Health Plans tested and ready.

The Member Experience To Date

- ◆ I knew of multiple community information sessions for me and/or my provider to attend to learn about Care Management and what it means to me.
- ◆ I received two different mailings which gave me updated information on Care Management progress - provider network adequacy and approvals from the federal government. After the last mailing, a group of individuals requested an information session and it was provided to them.
- ◆ I made a call to Medicaid Client Services with questions I had regarding program implementation when I received the update letters. The Medicaid Client Services staff advised of progress and any action required of me. It appreciated being able to speak with someone.
- ◆ The DHHS Care Management website information was provided to me in each mailing I received. I can view Health Plan contracts, care management program specifics including the three steps to implementation. This site is updated regularly.
- ◆ I have been reading updates in the local newspapers about progress with Care Management, and have also heard updates on the radio.
- ◆ I know more information is coming, and at this time I do not need to do anything.



The Member Experience Coming Next

- ◆ I will receive all of the information needed to enroll in a Health Plan, and will have personal assistance provided to me.
- ◆ I will be asked to complete a customer phone survey when I have completed enrolling through the call center.
- ◆ I will see and/or hear notifications on TV, in District Offices, on phones while call-waiting, on web mail received, in my provider office if s/he chose to use these resources in the office. These notifications keep me aware of what I need to do, how to do it, and when it needs to be done. I am also reminded of when and what I need to do by mail in addition to these other communications.
- ◆ I will be advised that I can make changes to my Health Plan and/or Primary Care Provider if I need to.
- ◆ I will have access to communication materials on the DHHS and Client specific website. Facebook and Twitter are available to me to follow.



The Member Experience Coming Next

- ◆ I can continue working with my community organization/provider to assist me if I so choose – they understand the program.
- ◆ I will receive Frequently Asked Questions (FAQ) about Care Management, and Health Plan side-by-side comparison information.
- ◆ I will have access to the Primary Care Provider directory for each Health Plan to help me make a choice.
- ◆ If I do not choose a Health Plan, I know one will be assigned to me.
- ◆ At any time I have a question, I know I can call Medicaid Client Services and get the help I need.



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What Questions Do You Have?