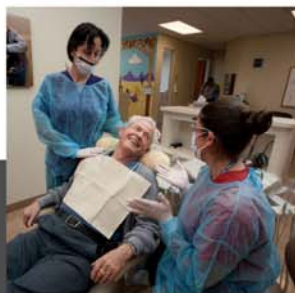




NATIONAL ASSOCIATION OF

Community Health Centers



America's Voice for Community Health Care



America's Voice for Community Health Care

The NACHC Mission

The National Association of Community Health Centers (NACHC) was founded in 1971 to promote the provision of high quality, comprehensive and affordable health care that is coordinated, culturally and linguistically competent, and community directed for all medically underserved populations.

Re-Imagining Care: Ensuring Access to Coverage During a Pandemic and Beyond

NACHC National Webinar
July 9, 2020




Engage with your peers using the Chat feature.

Pose questions in the Q&A area. Let us know which speaker to direct your question to. You can also email us at Preparedness@nachc.org.





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Our NACHC Team



Tom Van Coverden
President and CEO, NACHC



Rachel A. Gonzales-Hanson
Senior VP, Western
Operations, NACHC



Ted Henson
Director of Health Center
Performance and Innovation,
NACHC

Health Centers' Critical Role Providing Outreach & Enrollment

Health Centers play a pivotal role in connecting uninsured and underinsured individuals and families to health insurance and care.

Health Center assisters and staff have experienced considerable changes in the services they provide – and how they provide them – as a result of COVID-19

Impact

Total Health Centers O&E Assists (2018 UDS Data): 4,746,179!!

Assists Definition: customizable education sessions about affordable health insurance coverage options (one-on-one or small group) and any other assistance provided by a health center assister to facilitate enrollment.

Traditional Job Titles

- Certified Application Counselors (CACs)
- Navigators
- Enrollment Eligibility Staff
- Outreach Workers
- Peer/Health Educators

Normal Duties

- Enrollment into Coverage
- Health Insurance Literacy
- Connect to Care
- Health Education
- Community Outreach/In-Reach
- Case Management
- Enabling Services

Regulations/Policy

- Federal
 - Healthcare.gov
 - CAC-Designated Organization (CDO) Refresh Application
 - Navigator Funding
 - Special Enrollment Periods

Regulations/Policy

- State
 - Medicaid Expansion
 - State-Based Marketplaces
 - State Policies/Requirements

Impact of COVID-19

Virtual / Tele-Assists, Outreach, & In-Reach

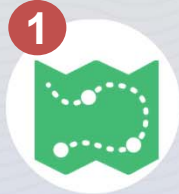
Massive Unemployment Led to Initial Spike in Demand for Enrollment Assistance

Other Duties as Assigned: Contact Tracing, PPE management, case management, etc.

Changing Policies: Special Enrollment Periods, Presumptive Eligibility, Expanded Medicaid, etc.

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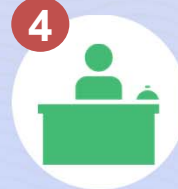


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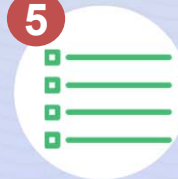


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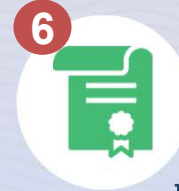
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Outreach & Enrollment Learning Collaborative

- **Who:** 15-20 enrollment assisters, certified application counselors (CACs), CMS-certified Navigators, and other staff.
- **What:** A work group comprised of O&E staff to share challenges, best practices, resources, etc.
- **Where:** Monthly virtual meetings
- **When:** Sept 2020 – June 2021
- **For more information:** Contact Ted Henson thenson@nachc.org or sign up via this webinar's evaluation



Today's Speakers



Ashley Shoemaker, MPA

Director of Outreach and
Enrollment, Family Health Centers,
Louisville, KY



Cassidy Hayes, MPH

Public Health Project Manager, Caring
Health Center, Inc.



Tia N. Whitaker

Statewide Director, Outreach &
Enrollment at the Pennsylvania
Association of Community Health
Centers (PACHC)

Ashley Shoemaker, MPA

Director of Outreach and Enrollment, Family Health Centers, Louisville, KY



Ashley Shoemaker is the Director of Outreach and Enrollment at Family Health Centers in Louisville, KY. A Kentucky native, Ashley has been involved with outreach and enrollment efforts since the implementation of the Affordable Care Act and is committed to making sure every Kentuckian has access to quality, affordable health insurance. Her department has helped nearly 35,000 Kentuckians enroll in health insurance since 2013.

Ashley graduated *summa cum laude* with a Bachelor of Arts in Psychology from Asbury University and Master of Public Administration from the University of Louisville.

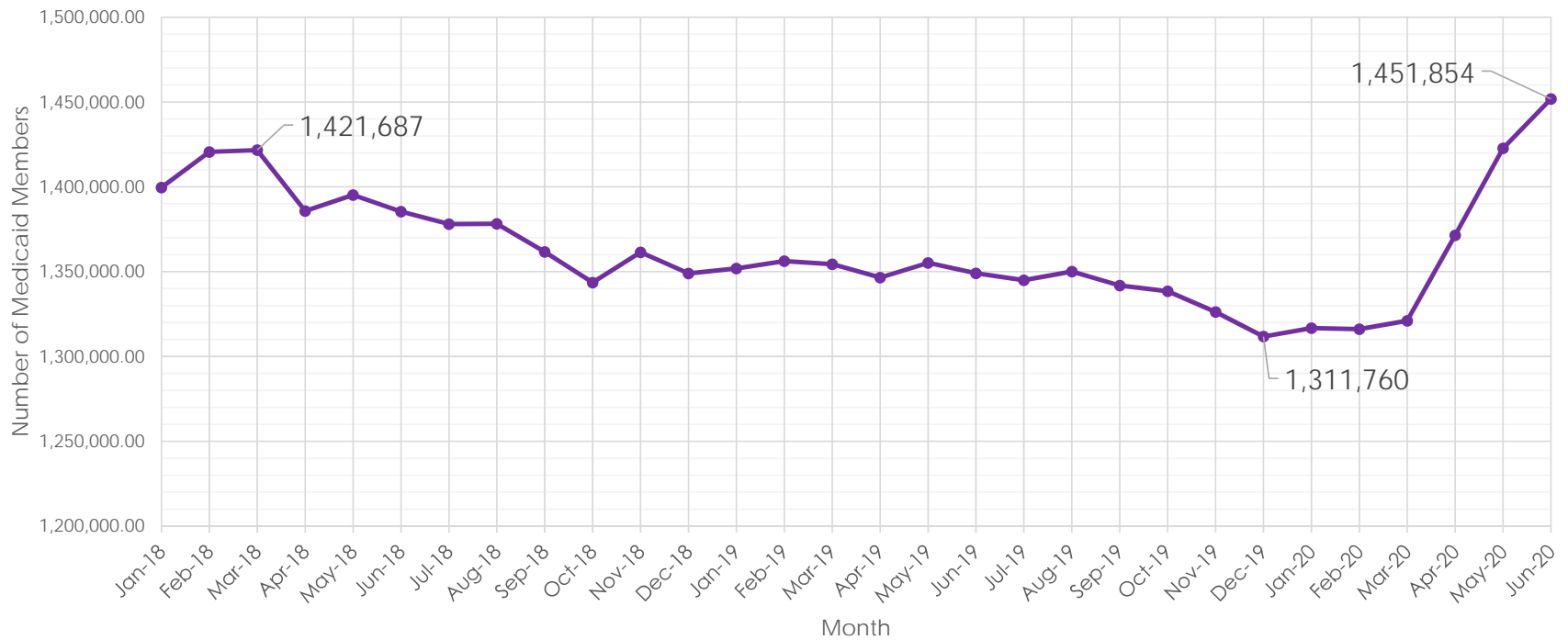
Family Health Centers

- ▶ FHC's Mission: To provide access to high quality primary and preventative care services without regard to the ability to pay
- ▶ 8 Locations in Louisville area, including:
 - ▶ Phoenix Healthcare for the Homeless
 - ▶ Americana Refugee Health Program
- ▶ Nearly 45,000 patients served per year
- ▶ Outreach and Enrollment:
 - ▶ 5 FT CACs, 1 Administrative Assistant
 - ▶ Enrolled nearly 35,000 Kentuckians in healthcare coverage since 2013



The State of Medicaid in Kentucky

Kentucky Medicaid Membership 2018-2020





COVID-19 State Policy Changes

- ▶ Verification due dates extended 90 days
- ▶ Client statement accepted as verification of income and loss of employment
- ▶ Recertifications extended 90 days
- ▶ Benefits terminations stopped except in the cases of voluntary withdrawal from the program, moving out of state, or the individual becoming deceased

Temporary Medicaid due to COVID-19

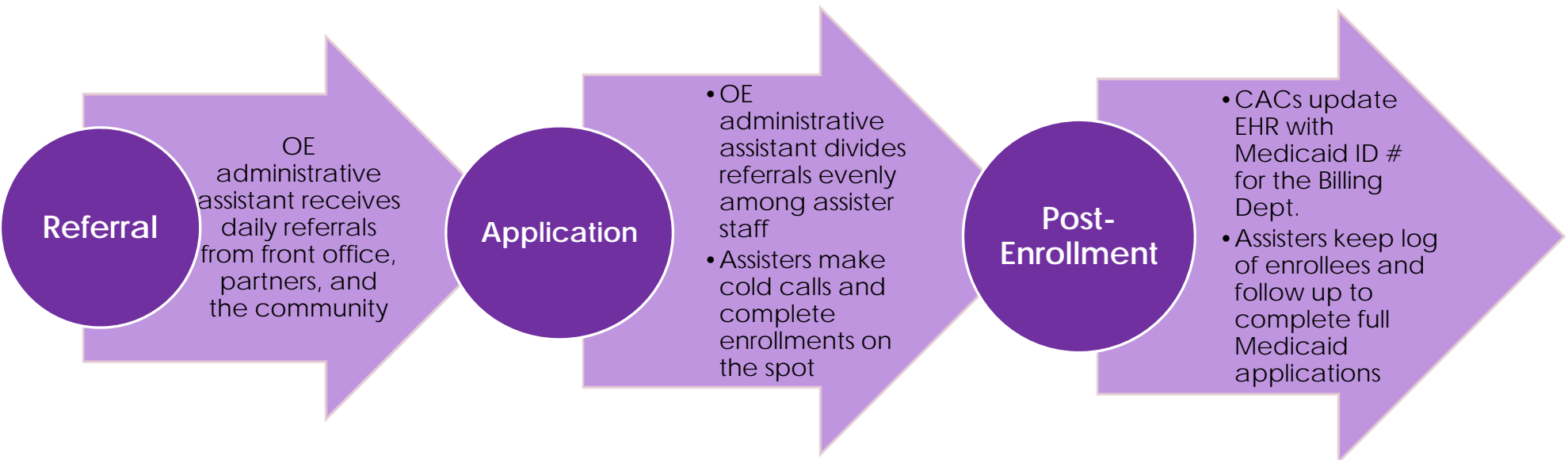
- ▶ Gave IPAs/CACs/Navigators the ability to conduct Presumptive Eligibility (PE) applications
- ▶ Relaxed PE guidelines on income, citizenship, calendar year, and existing insurance
- ▶ Extended coverage period to up to 90 days
- ▶ **Update as of 7/1:** extended PE coverage an additional 90 days until 9/30



Conducting Outreach and Enrollment Efforts Through Telework

- ▶ OE staff began working from home in March and April when Temporary Medicaid applications began
- ▶ Use cell phones and laptops with remote access to EHR system
- ▶ Conduct enrollment applications telephonically
- ▶ Receive daily lists of uninsured patients from front offices and reach out to patients within 1-2 days of visit with a “warm call”
- ▶ Track enrollments on spreadsheet for future follow-up

Workflow Processes



Next Steps

- ▶ Follow up with temporary Medicaid enrollees to complete full Medicaid or Marketplace application
 - ▶ Use enrollment spreadsheet to reach out to PE enrollees whose coverage is ending soon
 - ▶ Utilize loss of temporary Medicaid as a qualifying event, opening up a Special Enrollment Period for Marketplace coverage
- ▶ Continue new temporary Medicaid enrollments

Best Practices

- ▶ Communication with the State and community partners
 - ▶ Stay up-to-date on policy changes
 - ▶ Report system issues to the state
 - ▶ Engage community partners to spread the word
- ▶ Accountability and teamwork
 - ▶ EHR schedules visible to all team members
 - ▶ Rapid referrals to other team members
 - ▶ Schedule reconciliation and spot-checking enrollments
- ▶ Organizational buy-in
 - ▶ Success requires interdepartmental team effort, including front offices, billing, IT, and support from executive staff

Cassidy Hayes, MPH

Public Health Project Manager, Caring Health Center, Inc., Springfield, MS



Cassidy Hayes is a public health administrator with passions for health equity and systems change. Cassidy leads the development, implementation, oversight, and evaluation of a range of community-responsive programs, policies, and special initiatives at a large Federally Qualified Health Center (FQHC) in Springfield, Massachusetts, including public benefits navigation, health access, and outreach programming. Cassidy also designed and oversees the center's reproductive health clinic.

Cassidy has a background in program design, community-based participatory research, and health communication. She holds a Master of Public Health (MPH) degree from the University of Massachusetts Amherst.

About Caring Health Center, Inc.

- Federally Qualified Health Center (FQHC) and Section 330 grantee; initially founded in 1976, opened in 1995.
- Located in 3 culturally-diverse neighborhoods of Springfield, MA: South End/Metro Center, Forest Park, and Indian Orchard/Pine Point.
- Provides primary care, pediatrics, dentistry, behavioral health, reproductive health, nutrition, care coordination, and social support services to 21,000+ patients annually.
- Patient Population:
 - 21,000+ patients served annually.
 - Culturally and racially/ethnically diverse.
 - Primarily low-income, under-insured, or uninsured.
 - Immigrant and refugee groups.
 - 35+ languages.
 - Medically Underserved Area (MUA) and Health Professional Shortage Area (HPSA).
- Operates the largest MA Department of Public Health (MDPH)-funded Refugee Health Assessment Program (RHAP) in MA, and the only such program in the 4 western counties of MA.

About the Navigator Program

- Certified Navigator organization through the MA Health Connector since 2013.
- Trained and certified by the MA Health Connector to assist the public with health coverage enrollment and navigation of Health Safety Net, MassHealth (Medicaid), subsidized market plans (ConnectorCare), and unsubsidized market plans (Health Connector).
- Team of 5 Outreach & Enrollment Navigators.
- Bilingual; personal familiarity with immigrant and refugee experiences.
- Speak 3 languages (English, Spanish, Arabic) and utilize staff interpreters (10+ languages), language line, and iPad for additional language needs.
- Provide Supplemental Nutrition Assistance Program (SNAP/Food Stamps) enrollment and navigation through partnership with MA Department of Transitional Assistance (DTA).
- Focus outreach and engagement to populations most at-risk for falling out of coverage and care including:
 - Immigrant and refugee communities.
 - Communities with low English literacy or limited technological access.
 - Communities experiencing changes in life circumstances (e.g., homelessness, unemployment, graduation, re-location, transition from prison to community, or emancipation).

About the Navigator Program

- Cross-trained and collaborate with Community Health Workers (CHWs), Interpreters, Front End and Clinicians to deliver “enabling” services (e.g., health education, health literacy, referrals to community support services, initiation into primary care, and translation).
- Provide community resources and referrals in response to existing and emerging social needs (e.g., food, housing, utilities, legal, immigration, domestic violence, tax assistance).
- Conduct translated “Health Insurance 101” workshops, health center tours, and other educational activities for diverse groups (e.g., newly-resettled immigrants, worker’s unions, community groups).
- Conduct 150+ public outreach engagements/year; partnerships include:
 - Local community colleges and public schools.
 - Unemployment agencies, career development centers, worker’s unions, and layoff events
 - Prison health care systems.
 - Immigrant and refugee resettlement agencies.
 - Community leaders, events, and coalitions.
 - Food access initiatives.
 - Social service agencies.

COVID-19 Response

- On March 13, agency transitioned all non-essential/non-medical staff to remote status until further notice. Agency and program leadership engaged in intensive contingency planning, resulting in a rapid transition to remote status.
- During the following days/weeks, the health center rapidly implemented telehealth services, developed intensive infection control and clinical protocols, and transitioned to a skeleton crew service delivery model.
- **Disclaimer:** This presentation highlights key operational workflows that enabled the transition to remote service delivery for Outreach & Enrollment staff. It is not all-inclusive and does not include the many other workflows, policies, and contingency plans developed to address other aspects of the COVID-19 crisis (e.g., epidemiological, clinical, public relations, fiscal, telehealth, facilities, infection control, etc.).

COVID-19 Response

- Broadly, we can attribute Outreach & Enrollment success to 3 main factors:
 - **Factor 1: Close communication with state and advocacy organizations** (e.g., MA Health Connector, MassHealth, MA League of Community Health Centers, Mass Law Reform Institute, MA DTA) around evolving program directives, enrollment best practices, and emerging needs.
 - **Factor 2: Strong interest/flexibility to embrace non-traditional approaches to Outreach & Enrollment** (e.g., multi-lingual educational video outreach campaigns, cross-training and c-
-utilization of staff, extensive TA for members with limited computer literacy, creative workarounds for drop-off of paper documents).
 - **Factor 3: Strong program and agency infrastructure** (e.g., grant funding, equipment, train
staff, operational response, workflow development).

Evolving Program Directives

- Maintained close communication with state and advocacy organizations (e.g., MA Health Connector, MassHealth, MA League of Community Health Centers, Mass Law Reform Institute MA DTA) around evolving program directives, enrollment best practices, and emerging needs.
- Many provisions and flexibilities were granted to members and assisters to support enrollment health coverage and alleviate navigational challenges.
- Received an abundance of information – 1,000's of emails, calls, updates, etc. Set up a shared team GoogleDrive to organize share updates (e.g., eligibility flexibilities, special workflows, policy/advocacy news, community resources).
- For comprehensive MA member and assister changes:
 - **MassHealth: Eligibility Flexibilities:** <https://www.mass.gov/doc/masshealth-eligibility-flexibilities-for-covid-19-0/download>
 - **MassHealth: COVID-19 Assister Guidance:** <https://www.mass.gov/doc/covid-19-assister-guidance/download>
 - **Mass Law Reform Institute: Guide to Changes Affecting MassHealth, Health Connector, Health Safety Net:** <https://docs.google.com/document/d/1ZdhIIAs7PG06EMmpKAshcusXIRMVKXrSyByyAkh/edit>

Evolving Program Directives

- **Key Beneficial Changes in MA:**

- **Extended Open Enrollment** through MA Health Connector (currently through July 23).
- MassHealth/Health Safety Net **Termination Moratorium:** No terminations for failure to renew, respond to Requests for Information (RFI), etc.
- **Delay in April terminations;** option for **premium deferral** through MA Health Connector.
- **Expanded presumptive eligibility** for Health Safety Net.
- **Deductible hardship waivers** for MassHealth Standard and CommonHealth.
- **Flexibility to self-attest** (in lieu of submitting physical documents) for certain MassHealth eligibility factors (MA residency, pregnancy, etc.).
- Flexibilities to allow Navigators to submit applications, designation forms, etc. using **verbal/email attestation instead of signatures.**
- SNAP/Food Stamps: **Supplemental benefits; extra pandemic benefits** for children, suspension of 3-month limit for Able-Bodied Adults Without Dependents (ABAWD).

- **Results:**

- Far fewer members got terminated.
- Members were able to enroll for longer, and without signing/faxing documents.
- Navigators can provide most assistance from home, without face-to-face interaction or in-office equipment (e.g., print, fax, scan, etc.).

Infrastructure, Operations, & Workflow

- Existing infrastructure and resources included:
 - Information Technology (IT) department with existing vendor contracts.
 - Navigator laptops.
 - Well-trained team; comfortable with enrollment work; strong community presence and trust.
 - Project Director experienced in policy, technology; member of Leadership Team.
 - Fully grant-funded (e.g., updates, funding for technology, avenue to provide feedback).
- Essential IT actions included:
 - Purchased and re-imaged 150+ laptops.
 - Purchased headsets and white noise-makers to ensure privacy in family/home settings.
 - Established Virtual Protected Network (VPN) for security; to enable access to agency servers.
 - Installed software on 150+ laptops:
 - Microsoft Office
 - Mitel Phone Application
 - SOPHOS Encryption Software (Security)
 - Fax Server
 - Trained staff extensively on use of remote software and technology.

Infrastructure, Operations, & Workflow

- Developed new organizational workflows and policies to guide/ensure privacy and HIPAA compliance, supervision, communications, and safety.
- Created a shared GoogleDrive for Leadership Team, including a Workflow Directory with hyperlinks to workflows, corresponding documents, and staff roles/responsibilities.
- **HIPAA and Privacy Workflows:**
 - **Remote Access Checklist & User Agreement:** Policy containing a screener to assess staff readiness, commitment and confirmation of ability to uphold HIPAA practice at home; requirements for equipment utilization and maintenance of remote equipment; all remote staff read/signed in HR system.
 - All remote staff required to complete HIPAA training in HealthStream (HR training database).
 - All remote staff required to submit a photo of their HIPAA-compliant home workspace to be reviewed by Privacy Officer.
- **Communication Workflows:**
 - Workflows and checklists to manage the purchase, installation, training, and deployment of remote IT equipment to 150+ staff.
 - Communication workflows/phone trees to direct, triage calls between departments.

Infrastructure, Operations, & Workflow

- **Supervision Workflows:**

- **Remote Supervision Workflow:** Agency protocol and organization chart completed by each program/department head detailing plan for remote communications, supervision, IT oversight, tech dissemination, phone tree/back up designations, and call routing/accountability.
- **Remote Productivity Reporting Form:** Standardized template for staff to complete and send to supervisors once weekly; saved in shared Leadership Team folder.

- **Safety Workflows:**

- Workflow for processing of incoming and outgoing mail/documents (e.g., sterile handling & distribution, HIPAA-compliant dropbox).
- Workflow for transporting/processing documents offsite (e.g., preparing mass mailings) to ensure sterile handling and distribution.
- Curbside pickup arranged for all pick-ups or deliveries amongst staff; laptop assistance provided outside.

Infrastructure, Operations, & Workflow

- **Navigator-Specific Workflows:**

- Faxing Fridays: One Navigator goes onsite for a designated 2-hour timeslot each Friday to fax/process and documents on behalf of team; sort through patient dropbox; and gather/return home office supplies to rest of team.
- Cheat sheets/guides to organize and simplify state-level assister/member provisions and updates.
- Hour-long team calls 2-3 times/week to report barriers, discuss solutions, and coordinate with Project Director to provide technical assistance, organizational updates, and computer training to team; and for team members to relay key messages from state-level and assister calls/emails.
- Switchboard workflow to transfer calls or send emails to Navigators according to an algorithm (e.g., language, issue priority).
- Role adaptations: Navigators assigned to reporting/data, note-taking, Spanish calls, Arabic calls, and community resource directory management.
- Community Resource Directory: Compiled comprehensive list of 80+ community resources (e.g., legal, DV, food, housing) in response to increased social needs.

Recommendations: O&E Preparedness

- **Technology Kit:**

- Purchase laptops in advance.
- Install software to enable phone/switchboard capabilities (Mitel), fax server, EMR, VPN, and encryption software.
- Make sure staff can access Assister Portal (if you use one) – there may be glitches at first that require you to delete cookies, make settings adjustments, etc.
- Get safe laptop cases and store laptop, mouse, charger, WiFi hotspot, and headset in each case.
- Add a white noise machine.

- **Privacy Assurance:**

- Establish an agency Virtual Protected Network (VPN).
- Create a Remote Access User Agreement and adapt as standard policy agency-wide.
- Train all staff on remote access guidelines and requirements.
- Have staff pre-designate/plan a HIPAA-compliant home workspace.
- Identify online HIPAA trainings to assign all staff once annually, and at initiation of remote access programming.

Recommendations: O&E Preparedness

- **Training:**

- Increase computer literacy of staff through trainings on laptop use, Zoom meetings, server web navigation, Microsoft Office, software navigation, secure email measures, and email use.
- Transition paper-based documents into protected servers, and train staff on document management, file-naming conventions, etc.

- **Supervision/Communications:**

- Establish/maintain a strong chain of command to ensure teams have a supervisor who understands and advocates for their needs; documents and acts on community needs/trends.
- Develop a contingency plan for voicemail retrieval/call forwarding for remote staff.
- Develop clear guidelines and expectations for supervisors; designate consistent team meetings
 - Allow staff to report barriers, discuss solutions, and coordinate cases.
 - Allow supervisors to provide technical assistance, organizational updates, and computer training to team.
 - Allow team members to discuss key messages from state-level and assister calls/email.

Tia N. Whitaker

Statewide Director, Outreach & Enrollment at the Pennsylvania Association of Community Health Centers (PACHC)



Tia serves as the Lead Health Insurance Enrollment Navigator for Health Center-based in-reach, outreach and health insurance enrollment for Pennsylvania. PACHC is the sole State Navigator Grantee for the Health Insurance Marketplace for the current enrollment period. Tia coordinates education, training, and networking to address challenges and identify best practices for Enrollment Assistants employed by Community Health Centers and like-mission providers in the state addressing Marketplace, Medicaid, CHIP and Medicare Special Programs.

Tia was appointed by Governor Tom Wolf to the Pennsylvania Insurance Exchange (Pennie) Authority. The authority is a state-affiliated entity that is creating, managing, and maintaining Pennsylvania's Health Insurance Exchange, set to launch November 1, 2020. She was also appointed to the CMS Advisory Panel on Outreach and Education (APOE). The APOE is charged with advising the Secretary of the U.S. Department of Health & Human Services (HHS) and CMS concerning strategies for developing and implementing outreach and enrollment programs for individuals enrolled in, or eligible for, Medicare, Medicaid, CHIP, the Health Insurance Marketplace and other CMS programs.

Tia is the Vice President of the Central Pennsylvania Coalition United to Fight Cancer, (CATALYST), a board member of The Danny Lansanah Tackling Success Foundation which is focused on encouraging and supporting youth in their journey to pursue happiness, success and a momentous life, and AMiracle4Sure, a non-profit organization offering education, mentorship and advocacy to individuals and their children as they successfully transform their lives after incarceration. Tia holds an Associate Degree in Theology from Life Christian University, an Associate Degree in Human Resources and a Bachelor of Science degree in Business Administration from Central Pennsylvania College.



Supporting Pennsylvania's health centers in increasing access to quality primary health care for ALL
Innovative Outreach and Enrollment Practices - Ensuring Access to Coverage During a Pandemic and Beyond
Tia Whitaker, Statewide Director, Outreach and Enrollment

About PACHC

- ▶ Pennsylvania's Health Center serve more than **888,000** people annually at more than 300 sites with locations in 52 of Pennsylvania's 67 counties
- ▶ Serve **1 in 14** Pennsylvanians, **1 in 5** individuals on Medicaid or uninsured
- ▶ Provide nearly **3 million** visits annually
- ▶ Contribute more than **\$500 million** to economies of local communities and provide more than **5,000 FTE** jobs in PA





Pennsylvania Findings on Health Centers' Response to COVID-19 Week of June 26, 2020*

*Data represents information provided by health centers from a single, specified reporting date. Summary information across report dates is not comparable due to differences in which health centers responded for a given report date.

Pennsylvania's CHCs continue to adapt to meet the testing needs of their communities.

To learn how community health centers (CHCs) are responding to the COVID-19 pandemic and the impact the pandemic is having on CHCs, Pennsylvania CHCs respond to weekly surveys conducted by the Health Resources and Services Administration (HRSA). These findings illustrate a point-in-time (not cumulative) snapshot of an unprecedented and evolving situation.



have the ability to test for COVID-19



have drive-up/walk up testing capacity

During the week of June 26, Pennsylvania CHCs had:

1,490 patients tested for COVID-19

116 patients test positive ¹

0 staff test positive

5% of health center staff unable to report to work due to COVID-19 ²

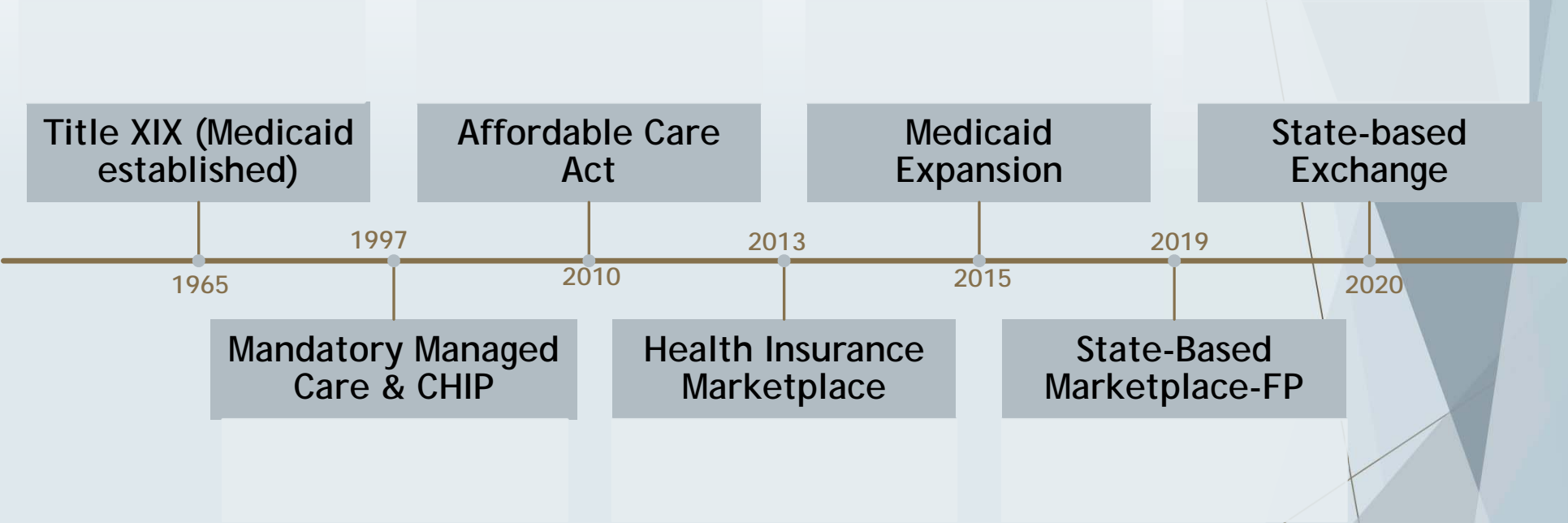
18 health center sites temporarily closed due to COVID-19

Ensuring Access to Coverage

- ▶ Navigator Services
- ▶ Health Insurance Navigator Grantee since 2013
- ▶ More than 80 Navigators and Certified Applications Counselors (Exchange Assistants)
- ▶ Medicaid Expansion in 2015
- ▶ Act 42 of 2019

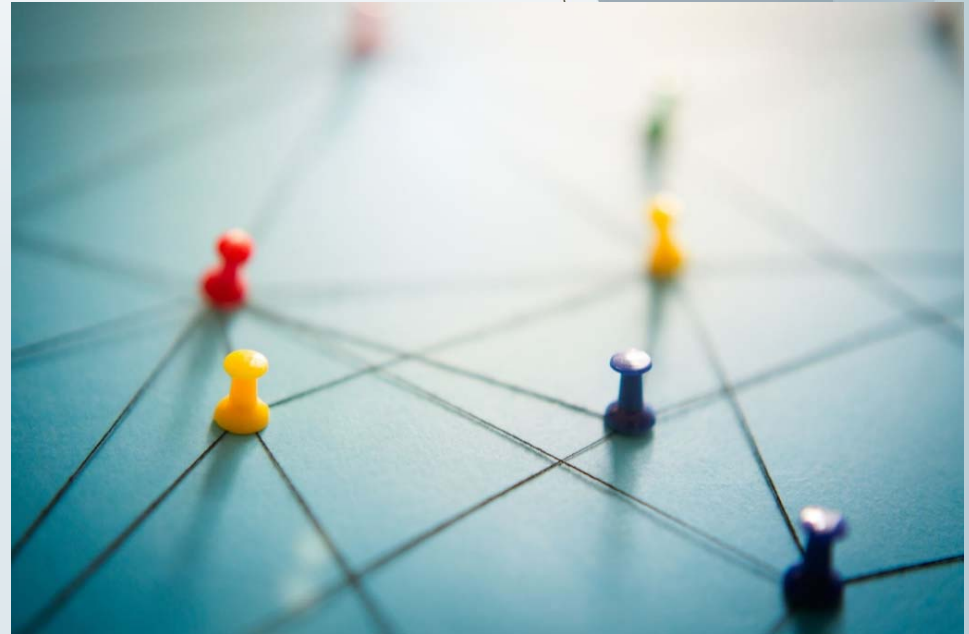


Ensuring Access to Coverage



Enrollment Assisters during COVID-19

- ▶ Contact Tracing
 - State Specific
 - Concern about when HRSA considers in scope or not
- ▶ Community Health Workers
 - ▶ Roles and responsibilities
 - ▶ Social Determinants of Health
 - ▶ Value Add



Response to COVID-19

- ▶ **Transitioning and Redefining Enrollment Assistance**
 - ▶ **Remote Assistance Best Practices (Virtual and Telephonic)**
 - ▶ Pre-screen and Prepare Before Actual Enrollment Appointment
 - ▶ Obtain and Retain Consent
 - ▶ Ensure Privacy and Security
 - ▶ Become Subject Matter Experts
 - ▶ Know Networks and Plans



Contact Information

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NATIONAL ASSOCIATION OF
Community Health Centers®

Thank you

COVID-19 Resources Found at nachc.org/coronavirus/



Centers for Disease Control Coronavirus (COVID-19) resources page – includes strategies for optimizing the [supply of PPE](#)



Health Resources and Services Administration (HRSA) Health Center Program COVID-19 Frequently Asked Questions (FAQ) – includes Federal Torts Claim Act (FTCA) updates



Centers for Medicare and Medicaid Services (CMS) FAQs – includes information on diagnostic lab services and hospital services



NACHC's Coronavirus webpage – information, event postings, and resources for health centers; NACHC also manages the resources below



NACHC's Elevate learning forum – evidence-based practices, tools and protocols for the health center response to COVID-19

Health centers sign up @ bit.ly/2020ElevateCHC

PCAs, HCCNs, and NCAs sign up @ bit.ly/2020ElevatePCA-HCCN-NCA



Health Center Resource Clearinghouse Priority Page COVID-19 –training events and tailored materials for serving special populations healthcenterinfo.org



Consolidates information from many sources in an easily-searchable format; enables health centers, PCAs, and HCCNs to share info and questions

To join, contact Susan Hansen at shansen@nachc.org.

Have more questions?

Email us at
Preparedness@NACHC.org
and we'll get them answered!