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BENEFITS COUNSELING TIPS: PREPPING FOR OPEN ENROLLMENT

September 2017

The 2018 Marketplace Open Enrollment will be 45 days in most states, significantly shorter than in previous years. In addition, funding for advertising and outreach for this year's open enrollment has been cut drastically by the federal government. As insurance carriers in some marketplaces have exited, there is concern about how to most efficiently and effectively educate and support consumers leading up to and during open enrollment. Local and state efforts may play a bigger role in leveraging resources to successfully enroll consumers this year, especially in rural communities where resources are typically limited.

To better understand how rural communities are approaching the shorter open enrollment period, the Georgia Health Policy Center facilitated a discussion with rural community-based programs, funded by the Health Resources and Services Administration's Federal Office of Rural Health Policy. These rural community-based programs shared their approaches and tips to outreach, education, and enrollment for the upcoming open enrollment period. This brief summarizes their tips.

APPROACHES TO THIS OPEN ENROLLMENT PERIOD



Build on what exists

Based on lessons learned from previous open enrollment periods, experienced benefits counselors offer the following recommendations:

- **Partner:** Partner with community agencies to link to their customers (e.g., aging and disability resource center, economic support agencies, other government agencies that may not do enrollment directly but that work with populations likely to participate in the health insurance Marketplace).
- **Spread the word:** Entities like chambers of commerce and insurance agents have established channels of communications and audiences. These partners can help get the word out about open enrollment by integrating messages into their channels.
- **Share information:** Provide information, messaging, and materials to health educators and others doing community-based work. For example, provide community health workers with information about how to make appointments for benefits counseling and train them to make referrals for consumers looking for information.
- **Scale efforts:** Take advantage of economies of scale and consider conducting joint outreach and enrollment planning with other Certified Application Counselors (CACs) and Navigators in the area. Conduct shared training events with staff and volunteers from other entities in the region, including hospital financial counselors, who may be able to refer consumers to you or provide information to consumers.



Update your messaging and modes of delivery

- Employ billboards, posters, and other publicity to inform people of the shorter open enrollment period with contact information for assistance.
- Utilize targeted mass messaging to inform consumers and move them to action.
 - One community is mass text messaging, informing recipients of the shorter open enrollment period. The text messaging application, available through [Qualtrics](#), can import contact information of those who previously enrolled.
 - Use personalized, quarterly emails to share information, ask for feedback, send reminders, and schedule appointments. (Recipients can opt out of emails at any time.) Specific suggestions include:
 - Using concise, simplified language
 - Using bullet points
 - Including a call to action
 - Sending emails through a familiar person's email to personalize contacts
- Identify key messages that have resonated with consumers and share with colleagues:
 - "Health care is expensive, but you might as well get insurance while you can."



Work smarter, not harder

- Reduce the number of events, especially larger-scale ones, in order to be more available to make appointments and assist people.
- Identify facilities for appointments. Think about those local facilities that are most likely to attract walk-ins, and designate at least one staff member there for walk-ins.



Prepare people with simple messaging and strategies to work with media

- Example: Cover Missouri has examples for simple messaging, tips on how to ask questions in a different way, and simple worksheets to support counseling and messaging.



Plan ahead

- Ensure that staff complete all required training in advance.
- Call all consumers from last year and book appointments in advance.
- Conduct pre-enrollment check-up calls over the phone to make sure passwords and other information, including income, is still correct.



Use data to inform actions

- Look at ZIP codes and areas that had low enrollment last year to target outreach and education efforts.
- Enroll America transferred their enrollment data to **Young Invincibles**. They have a free scheduling system (Get Covered Connector) for any enroller who does not have access to one.



Prepare for the possibility of limited carriers and its impact on consumers

- Engage consumers one-on-one to look at options and prices that will be available for the next year. Use a calculator to discuss all options and numbers in a detailed way so they can make informed decisions.
- Review your records from last open enrollment to identify those consumers who may need to shop for a new insurance carrier. Reach out ahead of open enrollment to advise them of upcoming changes in the local market and set up counseling and enrollment appointments. Programs like **Acuity Scheduling** allow you to export the data to a spreadsheet to look at who is still covered and set up appointments.

ENSURING ACCESS TO CARE: WORKING WITH PROVIDERS



Education and Information

- Take time to inform providers at health centers, hospitals, and large primary care groups of your outreach and enrollment services — if they know you are a resource, they will send their patients to you when it is needed.
- Use internal newsletters and communications in clinics, hospitals, and health care systems to inform staff about open enrollment and contacts for Navigators and CACs.



Use clinical locations as opportunities for information sharing

- Provide pamphlets with contact information for enrollment assistance at local clinics, provider offices, and hospitals.
- Advertise open enrollment dates and contact information at entrances to hospitals and clinics.
- Ahead of open enrollment, meet with clinic/hospital financial and administrative staff weekly and make sure they have income guidelines, rules, and can access the schedule of CACs.
- Taking advantage of “closed-loops” referrals: For those who work alongside or within health centers, the providers are in-house, so they know who needs assistance. Signage can be placed in all exam rooms to prompt patients and providers.
- Health departments are a good source of referrals — if patients fall outside income eligibility for Medicaid, they can refer them for counseling and enrollment assistance.

We would like to thank the grantees of Health Resources and Services Administration’s Federal Office of Rural Health Policy that shared their experiences. For more information about these organizations, [click here](#).

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