Communication Strategies to Reach Oregon Health Plan Members

Presented by Olivia Stone, Metropolitan Group
Oregon Public Health Association Conference
October 2017
The Need

Help Oregon Health Plan members understand and use their benefits.

This project was supported by Funding Opportunity Number CMS-1G1-12-001 from the U.S Department of Health and Human Services, Centers for Medicare & Medicaid Services and the content provided is solely the responsibility of the authors and do not necessarily represent the official views of HHS or any of its agencies.
Research Methodology

• Review of Oregon Health Plan member communication materials
• Interviews with experts
• Four focus groups with members (Newberg & Portland)
• Discussions with eight Collaboratives + CCO Member Engagement & Outreach Committee
Lost in the Journey

- Transition points cause confusion
- Perception of sudden, unexplained changes
GETTING CARE
with Oregon Health Plan through your Community Partner

1. Apply
2. Get approved
3. Get your OHP ID card
4. Become a member
5. Report changes
6. Renew each year

It's free to apply for OHP. Get help from a community partner. These are local organizations trained to help people apply for OHP. Find one by visiting OregonHealthCare.gov or calling OHP.

Most people find out right away if they are approved. If you do not find out right away, OHP needs more information.

You'll get a letter and your OHP ID card in the mail. You can see any provider who takes OHP.

Open letters from OHP and do what they say. Call OHP if you have questions.

Your CCO is a group of doctors, dentists, counselors, hospitals, health plans and community organizations that care for people on OHP.

As soon as you get your CCO card in the mail:
• Call your CCO to choose your primary doctor and dentist.
• Call your doctor and dentist to schedule an appointment and get to know them.

Fee-for-service (FFS)
If you are a fee-for-service member, you are not in a CCO.
You can see any doctor or dentist who takes OHP.

Be sure to tell OHP any changes in your job or family.
Open letters from OHP and do what they say.
Call OHP Customer Service if you have questions.

As an OHP member, you have the right to:
• Be treated with respect and dignity.
• Choose your doctor, dentist and others.
• Get care when you need it.
• Get free rides to OHP-approved appointments.
• Have an interpreter, or have a friend or helper come with you.
• Hear all your treatment options, including OHP-covered and non-covered.
• Help make decisions about your health care.
• A referral or second opinion.
• Help without a referral for behavioral health, family planning and addiction services.
• Make complaints, and get help to appeal if services are denied.
• Call the OHP Ombudsman—the person who helps OHP members if they have a problem—if your CCO and OHP cannot help you. 1-877-642-0450 (TTY 711).
• Get a list of all your rights; by calling OHP.

OregonHealthCare.gov
OHP Customer Service
1-800-699-9075 (TTY 711)
24-hour OHP Nurse Advice Line
(FREE for OHP members) 1-800-562-4260

You can get this document in other languages, large print, braille or a format you prefer. Contact the (Program Name) at 971-673-0249 or email (email here). We accept all relay calls or you can dial 711.
Getting started with the Oregon Health Plan (OHP)

1. **Apply.**
   - Go to OregonHealthCare.gov to see your options for applying.
   - **If you need help,** contact an OHP-certified community partner.
   - To find one:
     - Visit OregonHealthCare.gov
     - Call OHP Customer Service at 1-800-699-9075 (TTY 711).

2. **See if you qualify.**
   - OHP will process your application. You will get a letter if OHP needs more information. If you have not heard if you qualify within 45 days, call OHP Customer Service at 1-800-699-9075 (TTY 711).

3. **Use your benefits.**
   - If you qualify, you can see a doctor, get emergency care and fill prescriptions right away — even before you get your OHP ID card.

4. **Connect with your CCO.**
   - A week or two after your OHP coverage begins, you will get a welcome packet from the CCO managing your health care.
   - **Call your CCO:**
     - If you do not receive the welcome packet.
     - To find a doctor.
   - **Call OHP Client Services at 1-800-273-0557 if:**
     - You need help reaching your CCO.

5. **Renew each year.**
   - You need to renew your OHP every year so you don’t lose coverage. OHP will send you a letter when it is time to renew.

To request this document in other languages, large print, braille or a format you prefer, call OHP Customer Service at 1-800-699-9075.
Simplify and streamline information

- Low literacy standards
- Use visual cues
- Establish info hierarchy
- Set of essential info
Members’ Info Hierarchy

**English**
- Plans
- Coverage
- Providers
- Rights
- How to get help

**Spanish**
- Services
- Where to get services in Spanish
- Coverage
- Rights
Congratulations on your pregnancy! Oregon Health Plan can help you get the prenatal care you and your baby need while you are pregnant. And it can cover your delivery and your baby’s health care needs. Here is what you need to do.

**Before You Have Your Baby:**

1. **Tell OHP when you find out you are pregnant**
   - **If you are already an OHP member:**
     - You can probably get special benefits through OHP while you are pregnant. Call OHP as soon as you find out that you are pregnant and say that you would like to report a pregnancy. You don’t need to provide any proof that you are pregnant.
   - **If you are not an OHP member yet:**
     - Call OHP as soon as you find out that you are pregnant. They can help you fill out an application over the phone. Applications for pregnant women are reviewed and approved much faster than other applications.
     - OHP is open to pregnant women who earn up to $1,881 each month as an individual or $3,848 as a family of four. If you qualify for OHP your coverage will begin on the date you applied. You will be assigned to a Coordinated Care Organization (CCO), which is the group of doctors and hospitals that will provide your care.
   - **What if I forgot to call OHP and I am going to deliver my baby soon?**
     - You should still call OHP or update your information online. Tell OHP the date that you found out you were pregnant. We will make sure that any prenatal care you received before then is covered, and that your delivery is covered.

2. **Make sure your prenatal care provider is in your Coordinated Care Organization (CCO)**
   - Your primary care physician (PCP) may want you to see another provider for your prenatal care. This provider will probably be an OB-GYN. Before you make an appointment, check to make sure this new provider is in your Coordinated Care Organization (CCO). You can find this information in your CCO handbook. If you lost it, call your CCO to request a new one.

3. **Find out what care your CCO offers**
   - Many CCOs have great programs for pregnant women and new mothers. Call your CCO to learn more.
   - Some CCOs do not cover circumcision or midwives. If your CCO does not cover these services but you want them, call OHP to find out if you can change to another CCO.

You can probably get special benefits through OHP while you are pregnant. Call OHP as soon as you find out that you are pregnant and say that you would like to report a pregnancy. You don’t need to provide any proof that you are pregnant.

**What if I forgot to call OHP and I am going to deliver my baby soon?**

You should still call OHP or update your information online. Tell OHP the date that you found out you were pregnant. We will make sure that any prenatal care you received before then is covered, and that your delivery is covered.

**After You Have Your Baby:**

1. **Reapply for OHP for yourself**
   - The OHP coverage you have while pregnant is different than regular OHP. It lasts for 60 days after you have your baby. Before that 60 days ends, OHA will review your information to make sure you are still eligible for regular OHP. After this happens, you will get one of these letters in the mail:
     - **Combined Notice of Eligibility:** This letter will tell you if you are still eligible for regular OHP or not. If you are still eligible for OHP, you do not need to do anything else. If you are not eligible for OHP, visit OregonHealthCare.gov to find a new health plan.
     - **Request for Information:** This letter means that OHA needs more information to find out if you are eligible for OHP. Call them right away at 1-800-699-9075 (TTY 711).

2. **Make sure your baby is covered by the Oregon Health Plan from birth**
   - **If you are an OHP member:**
     - Call OHP or ask the hospital to send a newborn notification to OHP. Most hospitals will send OHP a newborn notification automatically, but it is best to double check. If they do not, call OHP right away.
     - Tell them that you had a baby who needs OHP coverage. Your baby is eligible for coverage from birth and all the care that he or she receives will be covered.
     - Your baby will be assigned to the same CCO that you are.
   - **If you are not an OHP member:**
     - Fill out an OHP application for your baby. There are four ways to do this:
       - Call OHP to fill out an application over the phone.
       - Apply online at OregonHealthCare.gov
       - Fill out a paper application. If you do this, write “urgent – newborn application” on the top to get it processed quickly.
       - Visit one of our community partners. They can fill out the application with you and help you get coverage for your baby. Find a community partner close to you on our website: OregonHealthCare.gov

You can probably get special benefits through OHP while you are pregnant. Call OHP as soon as you find out that you are pregnant and say that you would like to report a pregnancy. You don’t need to provide any proof that you are pregnant.

**What if I forgot to call OHP and I am going to deliver my baby soon?**

You should still call OHP or update your information online. Tell OHP the date that you found out you were pregnant. We will make sure that any prenatal care you received before then is covered, and that your delivery is covered.
Language Challenges

- Literal translations
- High literacy level
- English acronyms
- Multiple languages overwhelming
Translation Best Practices

• Simplify
• Establish consistency
• Vet translations with community partners
Communication Channels

Preferred format

- 1:1 for English-speakers
- Written for Spanish speakers
- All prefer mail over email/online

Behaviors

- English speakers call customer service
- Spanish speakers seek in-person help
Implementation

**Tools:**
- “Getting started with OHP” infographic
- Shared health care iconography with CCOs
- Updated glossary

**Simplification:** Revise OHP member handbook

**Collaboration:** Joint OHA-CCO member communications workgroup
What can you do?

- Use new Oregon Health Plan tools
- Simplify and streamline
- Agree to shared standards/protocol
- Agree to shared terminology
Thank you!

Metropolitan Group
the power of voice
metgroup.com