
Community and Partner Workgroup (CPWG)

Meeting 14
January 26, 2023

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Meeting Objectives

1. Continue to build relationships among members
2. Discuss CPWG recommendations survey results
3. Discuss ex parte renewals
4. Provide updates on online dashboard and language line

Agenda

- Welcome and introductions
- Updates and follow up
 - CPWG recommendation survey results
- Ex parte renewals
- Online dashboard updates
- Language line data update
- Wrap up

Introductions

Please share your:

- Name
- Pronouns you use
- Any needs you might have to help you participate fully

Updates and follow-up

CPWG Recommendations Survey Results

Survey Results

9 Recommended (unanimously)

9 Flagged for further discussion

4 Mixed results (recommended, not recommended and flagged)

Survey results: Recommended

1. To the maximum extent possible allowable by CMS, ensure continuous enrollment while eligibility is verified. This will allow individuals struggling to navigate the renewal process or unable to reach the ONE eligibility system customer service phone line time to resolve concerns.
2. Extend deadlines up to 90 days for medical assistance program (MAP) enrollees and increase the promotion and use of accessible application assisters to give people the time and additional support needed to correctly apply for coverage and respond to requests for information.
3. Inform clients who have been denied coverage about navigational assistance resources they can use to help transition to another form of coverage.
4. Streamline and simplify the redetermination processes and related communications. Seek to minimize stress and burden for consumers in this process.

Survey results: Recommended, continued

5. Identify and implement strategies to provide additional time and resources to people who face additional barriers when trying to understand notices and what is required of them to verify eligibility, such as people disabilities, elderly persons, and people with limited English proficiency.
6. Provide support and resources tailored to the specific needs and circumstances of migrant and seasonal farm workers.
7. Use feedback from and the voice of trusted community partners to understand experiences of OHP members going through redeterminations.
8. The state legislature, through OHA and ODHS should ensure funding continues for current Community Partner organizations who are certified OHP assisters and expand funding to new organizations to fill in the geographical and cultural gaps where assisters currently aren't reaching.
9. The workgroup recommends that OHA and ODHS develop and disseminate content that CCOs and Providers can use to share notices through their own communication channels such as MyChart.

Survey results: For further discussion (mixed results)

1. Recommend that ODHS prioritize limited caseworker time to do outreach and assistance with redeterminations for anyone who has not responded to redeterminations requests for information, and de-prioritize re-assessment of Service Level Priority (SLPs) for people already found eligible and getting services. (SLP is number assigned to someone assessed for long-term services and supports that reflects their level of need for help with activities of daily living)
2. Review of member appeals in response to eligibility denials by language, race and ethnicity, to determine if members with limited English proficiency or other populations are less likely to appeal eligibility denials.
3. Maximize the use of Community Based Organizations (CBOs) and other community partners organizations that partner with the agencies by increasing the scope of the support they can provide to medical/ Oregon Health Plan enrollees to include other ONE Eligibility benefits. To achieve this ODHS should prioritize changes to the ONE Eligibility System to allow community partner application assisters to assist with other ONE System eligibility benefits beyond Medicaid/ OHP and should fully implement this change during the first six months of 2023.

From 1/25 Medicaid Advisory Committee Meeting

- If a person changes CCOs, will authorizations that are in process automatically extend to the next CCO?



Ex Parte Renewals

Ex Parte Renewals

- Ex parte renewals are often known as automated renewals or passive renewals.
- Oregonians receiving OHP coverage must have their eligibility evaluated on an annual basis.
- SNAP does have a periodic recertification process, but it is not aligned with medical programs' renewal date.
- Oregon performs “automated renewals” whenever possible. An automated renewal is initiated by the Agency.
- The Oregon Eligibility (ONE) system compares information contained in the beneficiary’s case record to the Federal Data Services Hub and automated electronic verification sources available to the agency to perform data matches and verify eligibility criteria.

Ex Parte Renewals

- **Automated renewal** allows many OHP members' eligibility to be determined through an automated process (informing members of the specific verification needed, if necessary); they do not have to complete a full OHP application.
- **Automated renewal performs the same verification checks as manual processing.** When automated renewal is run, the ONE system interfaces with the Federal Data Services Hub (FDSH) and gathers available information about earned income (through the Verify Current Income, or VCI, database), social security administration income (SSI/SSB/SSDI), unemployment compensation income, incarceration status, Medicare status, and citizenship/immigration status. The agency receives the most recent data available from those sources and compares to what has been attested for eligibility. Information on the case that's used for other programs, like SNAP, is also used to verify attested information when possible.
- **Households are renewed on time with a renewal decision** that does not require member or worker intervention.

Ex Parte Renewals

- States have the option to pursue Centers for Medicare and Medicaid Services' approval to use other electronic data sources during automated verification checks, such as IRS data. However, this is not being pursued at this time, and will not be possible prior to the 'unwinding' renewal activity beginning in April.
- Oregon does not prioritize any verification sources over another; if client attested information can be considered verified via any available verification source, that verification is used. For example, if an individual's attested income was not verified via FDSH but is supported by verified SNAP case data, the SNAP case data will be used as verification. The same is true in reverse; if SNAP data is not available for verification but FDSH is, FDSH data will be used as verification.

Ex Parte Renewals

- **OHP households experiencing Automated Renewal** receive a notice describing the eligibility decision and effective dates, and a summary of the information the state used for the decision. No action is necessary for this group, unless:
 - They've been requested to verify specific case information;
 - They need to tell us about an inaccuracy on their case summary, or
 - They've experienced any other changes that must be reported
- **Some OHP households who were not eligible for the automated renewal process will receive a renewal packet** to which they must respond for their coverage to be renewed.
- **Automated renewal is required by the Affordable Care Act** (42 CFR 435.916 – Periodic renewal of Medicaid eligibility), and Oregon began working toward implementation when the ACA went into effect; Automated renewal has been fully implemented since late 2017

Automated Renewal Processes

All medical benefits are evaluated for automated renewal. If the automated renewal process is successful, members will receive a Notice of Eligibility via mail informing them that their benefits will continue.



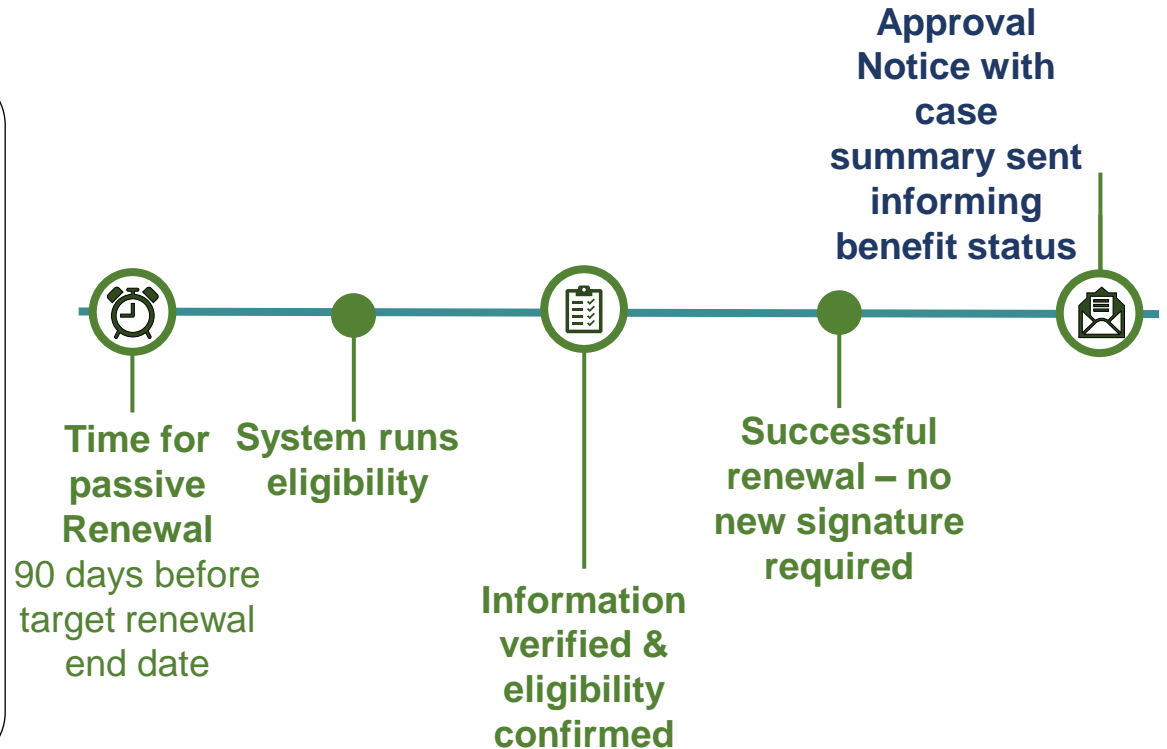
Likely Populations

- Those with current, updated information
- Meet all eligibility requirements
- Able to verify information via electronic data and sources in the ONE system
- Social Security Income Program Recipients



Eligibility Factors

- Financial income (including individuals with \$0 income)
- Household size
- Additional factors, ad hoc



Passive Renewal With RFI Processes

If additional individual information and/or verification is required, the state can issue a request for information (RFI). If the response is received by the deadline, the renewal process is successful, and the member receives a Notice of Eligibility via mail informing them of their eligibility results. If a response is not received, it may result in loss of benefits.



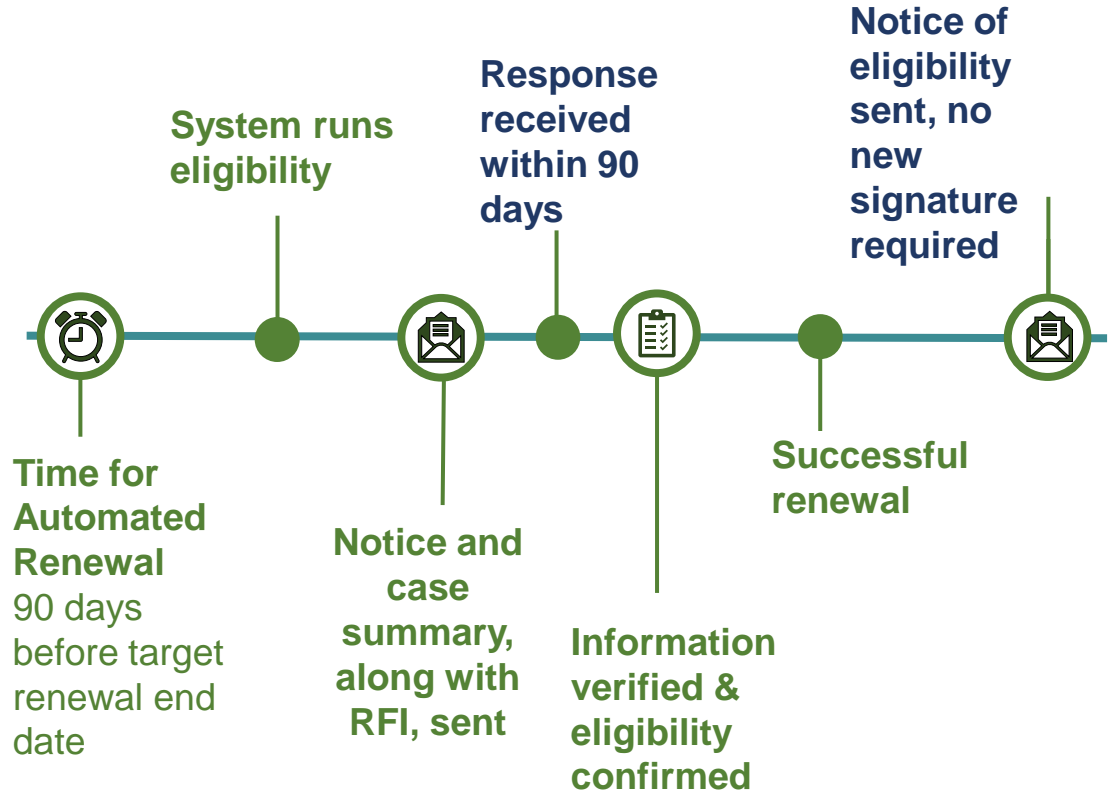
Likely Populations

- Those with current, updated information
- Meet all eligibility requirements
- Able to verify information via electronic data and sources in the ONE system
- SSIR individuals



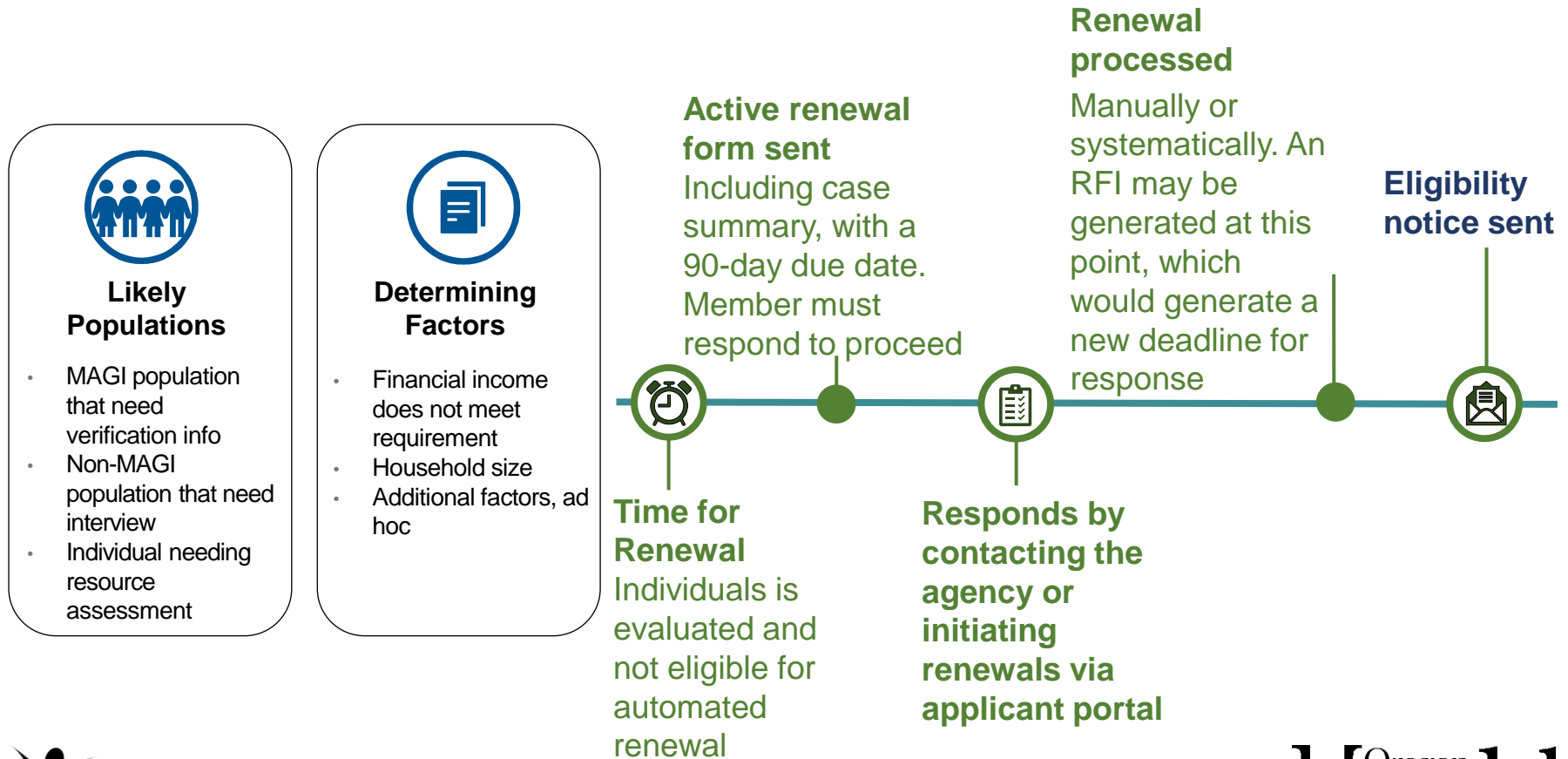
Eligibility Factors

- Financial income
- Household size
- Additional factors, ad hoc



Active Renewal Processes

If the system is unable to process an automated renewal, the case is placed into active renewal. Active renewal forms will go out 60-days prior to the renewal date containing a reply by date that is 90-days out.



Stretch break

- Let's take a 5-minute break – make sure to mute your microphones



ONE Eligibility Dashboard

Sharing data about eligibility application and determinations for medical, food, cash and child care benefits

ONE Eligibility Dashboard

- Focus on medical renewals
- Statewide and county views
- Provides data on community and population impacts to identify disparities to inform action plans
- Designed for accessibility
- Expected to roll-out by April 1, 2023

Dashboard sample: Landing page

Overview of the impact of the PHE Unwinding

Overview of who is receiving benefits - Case



Page 1: Overview of the impact of the PHE Unwinding 2: Medical coverage - maintained, disenrolled & why 3: Keeping up with and supporting the work

Overview Cases & Individuas Medical Renewals Overview Medical Renewals Initiated Medical Renewals Completed

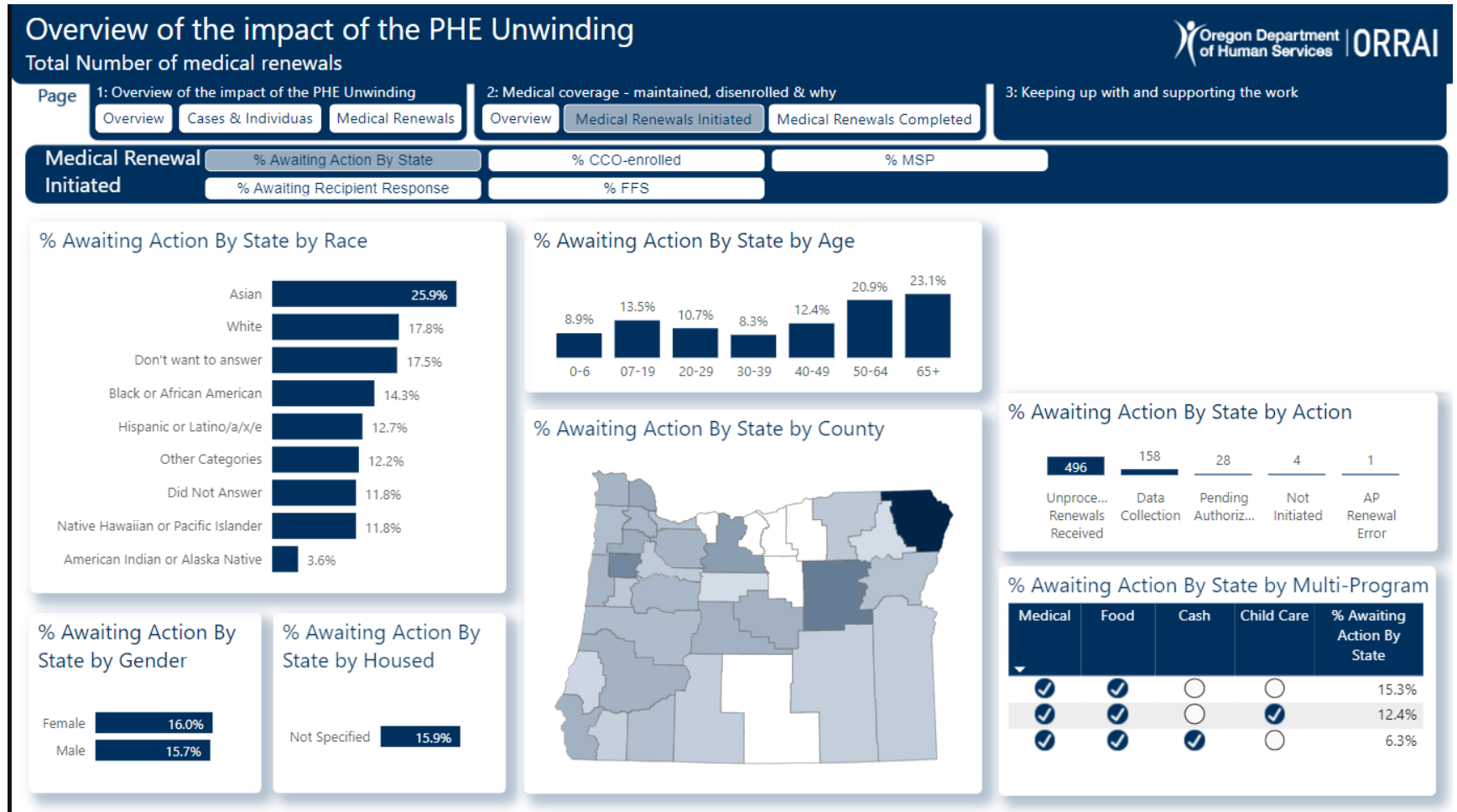
Communication objective:

People across Oregon will be impacted by the PHE Unwinding. Over the next 14 months, we will process a large number of renewals and you will be able to see the progress through this dashboard. OHA and ODHS are working closely with community partners to make sure everyone who can receive benefits continues to do so. However, when this process is over, some people will no longer be enrolled in benefits. This can happen for several reasons: no longer qualify due to increased income, insufficient information provided to check eligibility, or not being able to get in touch with beneficiary to provide updated information. OHA and ODHS will work to minimize barriers to receiving benefits and help those that do not qualify find other solutions. Some people who are no longer eligible for Medicaid benefits will obtain coverage through other sources, like the Marketplace.

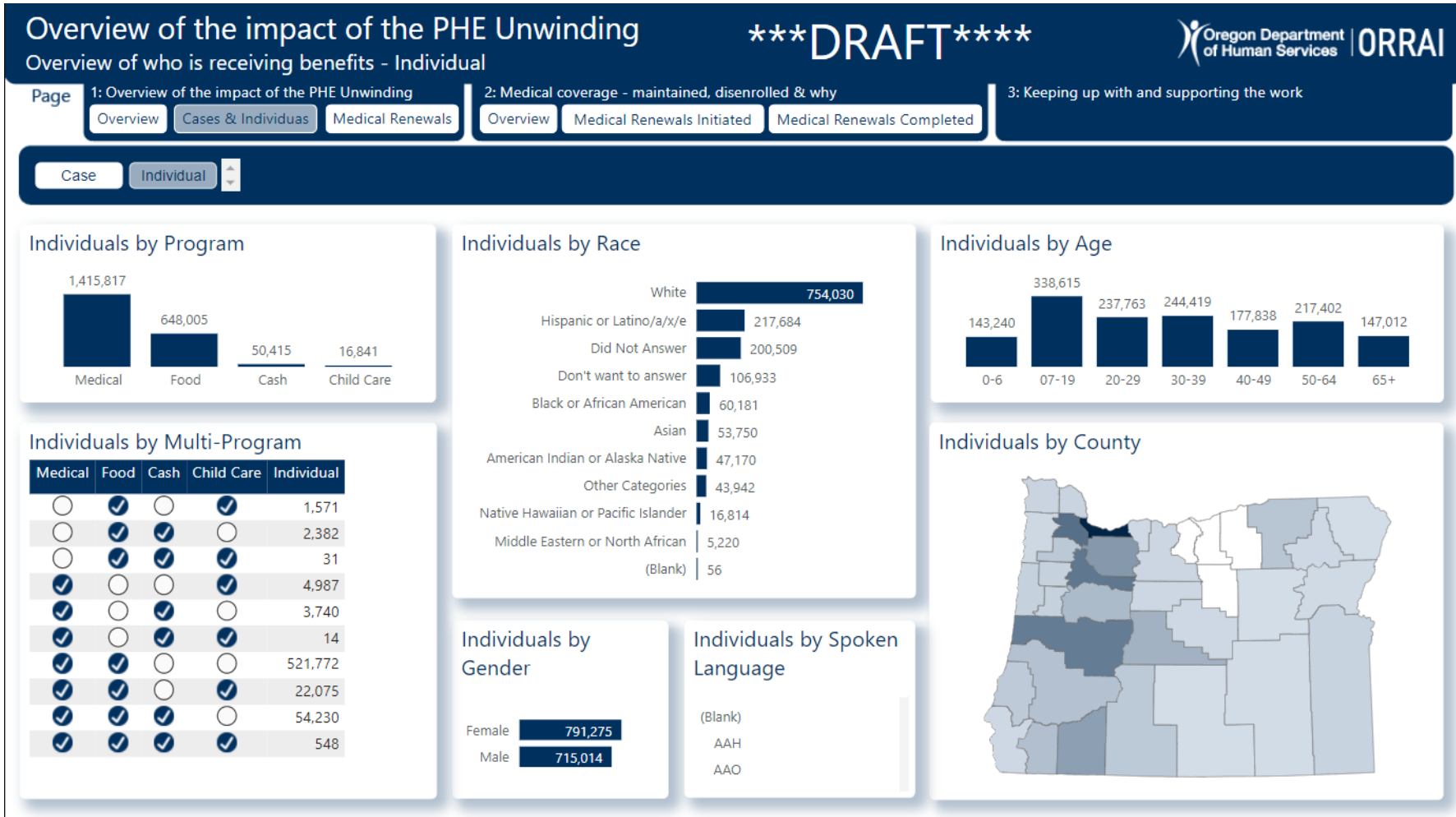
In this section, you can see detailed information about who receives benefits in Oregon, how many medical renewals remain, how many are in progress, and how many have been completed. You can also see information about which communities and populations are impacted.

Total Statewide		Total Medical Renewals			
Individuals	Cases	Not yet started	Begin in next 60 days	Initiated but not complete	Complete
654,099	426,479	314,128	294,427	4,396	11,500

Dashboard sample: Medical renewals overview



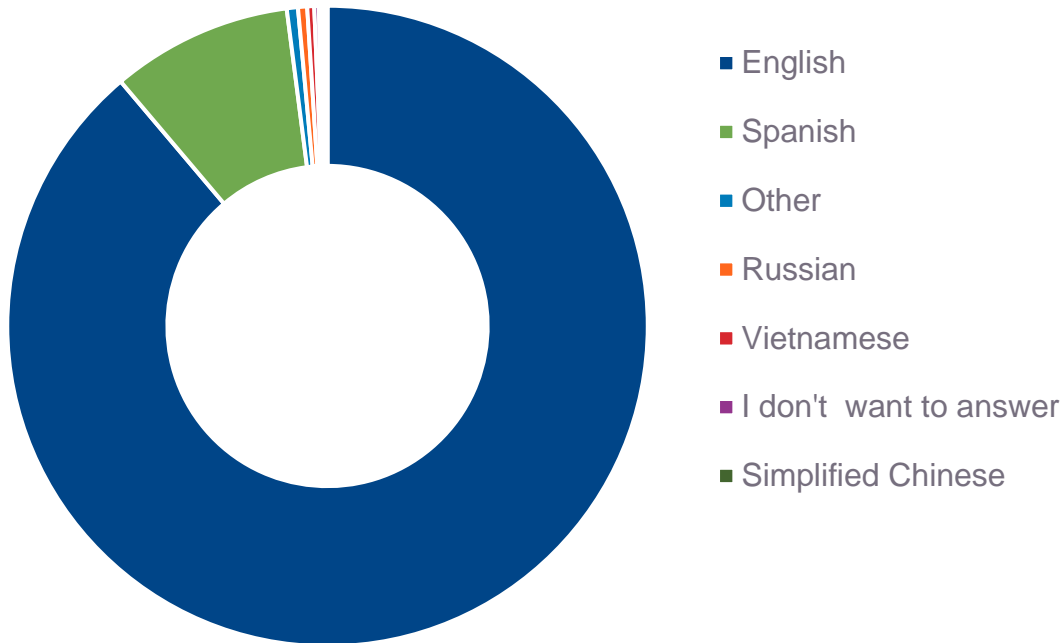
Dashboard sample: Individuals view



Language access

Developing an array of services responsive to language and other communications needs

Preferred written language for people receiving benefits through the ONE system

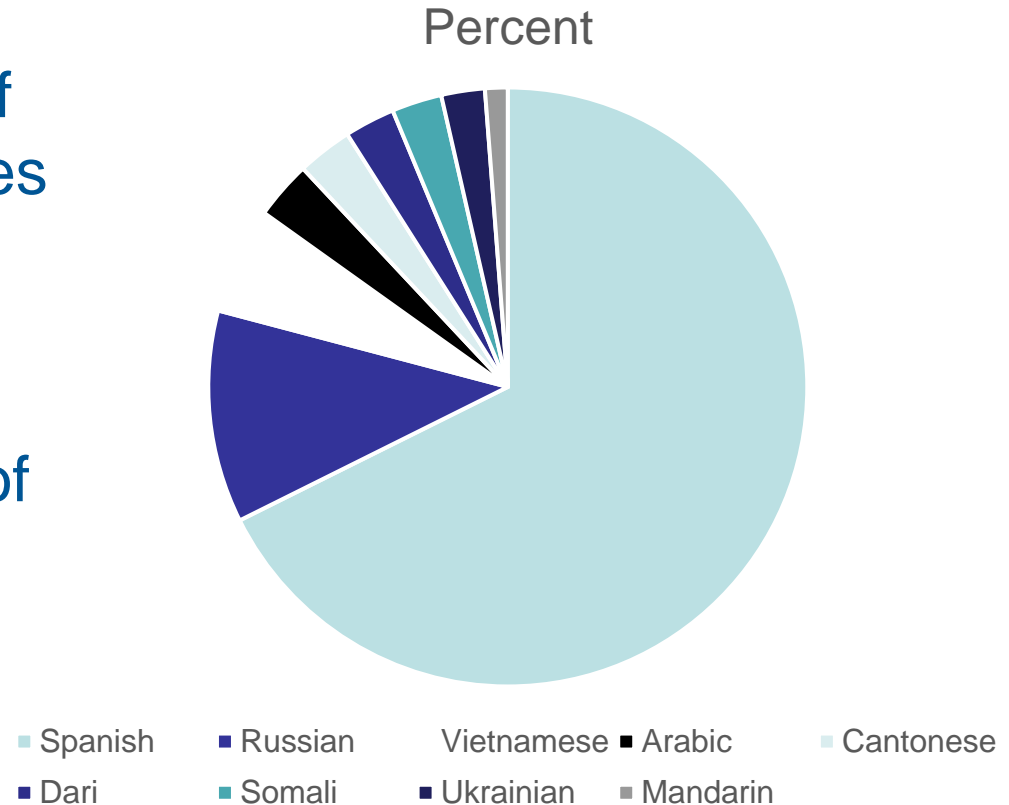


Highlights

- 1.5 million people receiving benefits through the ONE system
- 98% chose English and Spanish
- Russian, Vietnamese or Simplified Chinese were each selected by 0.50% or less of the people receiving benefits
- Other languages were each selected by 0.10% or less of people receiving benefits

ONE Customer Service Center Calls by Language

- Reflects telephonic use of outside interpreter services for 2022
- 41,199 calls
- 99 languages
- Accurate representation of interpreter use
- Does not include new Language Lines



Top 9 languages. All other languages were less than one percent of total calls.

Language Access

In Person

- I speak cards in local offices for in-person visitors to identify preferred language
- Bilingual staff in local offices
- Prescheduling of in-person interpreters from outside vendors
- On-demand telephone or video interpretation
- Assistive listening devices, real-time captioning, American Sign Language for people who are Deaf and Hard of Hearing


By Phone

- Bilingual ONE Customer Service Center Staff
- ONE Customer Service Center language specific phone queues in Spanish, Russian and Vietnamese
- Bilingual staff in local offices
- ONE Customer Service toll-free lines in 16 languages
- Telephone interpretation
- Accept all relay calls for people who are Deaf and Hard of Hearing
















Alternate formats

- Written document translations and alternate formats
- Typical requests include agency publications, marketing materials, forms and written communication. This can include website content, electronic communications and legal documents

I-Speak Language Card



Europe

Albanian Tregoni me gjuhë tujë tuaj. Do të themërin një përshkrim. Përkohësi do të marrë falas për ju.	Shqip	
Armenian Ձեզ ամէկ տէր ձեզ կարգի իր հարկանքի ձե կարգի կը ամալ. Տարածուող կը արժանանքի անձան.	Հայերէն	
Basque Euskara ezinbatu. Jarmian izantzaile bati detutako dugu. Iratxizaleak dotso zerbitzua eskaintziko dira.	Euskara	
Bosnian Pokažite svoj jezik. Prevodilac će biti pozvan. Prevodilac je obavešten bez troškova za vas.	Bosanski	
Bulgarian Позволяте вижнете езика. Ще бъде извикан преводач. Преводачът е осигурен безплатно за вас.	Български	
Croatian Pokažite svoj jezik. Prevoditelj će biti pozvan. Prevoditelj je obavješten bez troškova po vas.	Hrvatski	
Czech Ukažte na váš jazyk. Bude zavolán tlumočnick. Tlumočník je pro vás bezplatný.	Čeština	
Danish Ukázte na váš sprog. En tolk vil blive tilkaldt. Tolkens tillydtes uden omkostninger for dig.	Dansk	
Dutch Wijze uw taal aan. Wij zullen u een tolk geven. De service van de tolk is geheel gratis.	Nederlands	
Estonian Ostake oma keele. Vastava tõlgiga võetakse tšendat. Tõlgi teenused on teie jaoks tasuta.	Eesti keel	
Finnish Osoita massi kielisi. Kääntäminen tulkkin paikalle. Tulkin kyttyis sinulle ilmaiseksi.	Suomi	
French Pointez votre langue et on appellera un interprète qui vous sera fourni gratuitement.	Français	
German Zeigen Sie auf Ihre Sprache. Ein Dolmetscher wird gerufen. Der Dolmetscher ist für Sie kostenlos.	Deutsch	
Greek Αδείξτε τη γλώσσα σας και θα καλέσουμε ένα διαρτημένο. Ο διαρτημένος σας παρέχεται δωρεάν.	Ελληνικά	
Hungarian Mutasson rá az Ön nyelvére. Tolkot fogunk hívni. A tolmács az Ön számára díjtalan.	Magyar	





Europe — continued

Icelandic Besta á þitt tungumál. Þú getur birt á ták. Tákunum er þér að kostnaðslausu.	Íslenska	
Italian Puntare sulla propria lingua. Un interprete sarà chiamato. Il servizio è gratuito.	Italiano	
Lithuanian Nurodykite savo kalbą. Bus pakviestas vertėjas. Vertėjas jums bus suteiktas nemokamai.	Lietuvių	
Macedonian Покажете на јазикот на кој зборувате. Не поканиме преводител. Врзурга на преводителот се бесплатна.	Македонски	
Norwegian Peik på ditt språk. Vi tilkaller en tolk. Tolkens arbeider uten at det koster deg noe.	Norsk	
Polish Pokaż swój język. Nie będziemy wzywać tłumacza. Tłumacza zapewniamy bezpłatnie.	Polski	
Portuguese Indique o seu idioma. Um intérprete será chamado. A interpretação é fornecida sem qualquer custo para você.	Português	
Romanian Indicați limba pe care o vorbiți. Vi se va face legătura cu un interpret care vă este asigurat gratuit.	Română	
Russian Укажите язык, на котором вы говорите. Вам будет вызван переводчик. Услуги переводчика предоставляются бесплатно.	Русский	
Serbian Покажите свој језик. Преводилац ће бити позван. Преводилац је обавештен без трошкова за вас.	Српски	
Slovak Ukáže na vašu reč. Zavoláme tlumočníka. Tlumočník je pro vás bezplatný.	Slovenčina	
Spanish Señale su idioma y llamaremos a un intérprete. El servicio es gratuito.	Español	
Swedish Peka på ditt språk. En tolk kommer att tillkallas. Tolkens arbete är helt kostnadsfritt.	Svenska	
Ukrainian Вкажіть мову, якою ви говорите. Вам буде викликаний перекладач. Послуги перекладача надаються безкоштовно.	Українська	
Yiddish צײַג אױס די שפּראַך וואָס דיין שפּראַך איז. אױס די שפּראַך וואָס דיין שפּראַך איז וועט איר זײַן פֿאַר אױסגעבן אױס די שפּראַך וואָס דיין שפּראַך איז.	ייִדיש	




Pacific Islands

Fijian Deda na domo vosa. Ni sa vakaravaki izi e dua na dau vakadawa vosa. Ne dau vakadawa vosa e saga ni samu.	Vosa Vakaviti	
Ilocano Bado yo ti ma yo. Masawaan ti maym nga manggapetaran. Ni manggapetaran ka tumatang ladaayo nga sam yo a bayad.	Ilokano	
Indonesian Tunjukkan bahasa Anda. Jurubahasa akan diadakan. Jurubahasa diadakan tanpa Anda dibebani biaya.	Bahasa Indonesia	
Malay Tunjukkan bahasa anda. Jurubahasa akan disediakan. Jurubahasa akan disediakan tanpa anda dikenakan bayaran.	Bahasa Melayu	
Marshallese Kwidok Kajin Eo Am. Im Reraj Kir Ri-nokok Eo. Ri-nok Eo Enaj Ejojok Widen Ilo An Ri-nok Eo.	Kajin Majöl	
Samoan Pefaiño len gaga. O le a vala'ua se fa'ama'i'upu. Ua amua se fa'ama'i'upu e amua ma se tau e se tofigaina.	Fa'asamoa	
Tagalog Ituro po ang inyong wika. Isang tagasalin ang ipagkaloob nang libre sa inyo.	Tagalog	
Tongan Tuh'i mai ho' o lea fakafuina. 'i ui le fakasamoa. 'Okia tu' otongai kis koe 'a o fakatomua.	Les Faka-Tonga	



North America, South America, and Caribbean

French Pointez vers votre langue et on appellera un interprète qui vous sera fourni gratuitement.	Français	
Haitian Creole Lanje dwèt ou sou lang ou pale s epi n ap rele you entèprèt pou ou. Nou ba ou sèvis gratis la gratis.	Kreyòl	
Portuguese Indique o seu idioma. Um intérprete será chamado. A interpretação é fornecida sem qualquer custo para você.	Português	
Spanish Señale su idioma y llamaremos a un intérprete. El servicio es gratuito.	Español	




I-SPEAK:
Language Card

Use this I-SPEAK Language card to determine which language a client speaks.

The I-SPEAK Language Card lists languages grouped by their geographical region where they are commonly spoken.

- Locate the region where you think the speaker is from on the I-SPEAK Language Card. (E.G. Africa, North America and so on)
- Show the person the languages for that region.

The message underneath each language says:

English	English	
Point to your language.		
An interpreter will be called.		

- Call the Telephonic Interpretive Services number on your MSC 9961 reference card and follow the instructions.
- If you are unable to identify the language for the client call a Telephonic Interpretive Services representative and they will be able to help you.

IMPORTANT: Interpreters interpret from English into hundreds of languages. Not all languages are listed on this card. This list is subject to change based upon client need.



Staff supports for assisting people in multiple languages

- ODHS interpretation guide quick-reference icon on all agency computers
- Language Access Service Guide with service options, instructions, legal and policy information, and training resources
- Office of Equity and Multicultural Services hosted quarterly workshops for ONE Customer Service Center staff about ODHS language services in 2022

2023 CPWG proposed meeting topics

January 12	January 26	February 9	February 23	March TBD
<ul style="list-style-type: none">• Non-MAGI populations• Application Assistors	<ul style="list-style-type: none">• Discuss recommendations• Ex parte renewals• Online dashboard• Language Line	<ul style="list-style-type: none">• Continue recommendations• Bridge Plan	<ul style="list-style-type: none">• Overview of draft report• Met Group updates	<ul style="list-style-type: none">• Final Report• Wrap-up

QUESTIONS FOR CPWG:

- Building in time to discuss final recommendations
- Include the Bridge / Basic Health Program in February, as additional meeting, or at March meeting?
- Proposed final meeting date: March 16

Thank you!

Feel free to reach out if you have any questions or need any support.

Appendix

Slides that we might want to come back to.

Consensus Decision-Making

Thumbs up, Thumbs sideways, Thumbs down



Fully Agree



Fully Disagree



Could go either way

Fist to Five



5 fingers = Fully Agree and will champion

4 fingers = I'm fine with it

3 fingers = I see minor issues we can resolve later

2 fingers = I see minor issues we need to resolve now

1 finger = I see major issues that we need to resolve



Fist = I can't support this

Upcoming CPWG Recommendation Areas

2022

2023

Oct. 27	Nov. 10	December	January	February	March
<ul style="list-style-type: none">• Unhoused population• Populations that prefer a language other than English	<ul style="list-style-type: none">• Met Group• Non-MAGI populations – people with disabilities	<ul style="list-style-type: none">• Continue non-MAGI – dual eligible• Marketplace Assisters• Application assistors	<ul style="list-style-type: none">• Pregnancy and Newborn population• Online dashboard	<ul style="list-style-type: none">• Bridge Plan• Overview of draft report	<ul style="list-style-type: none">• Final Report• Wrap-up

QUESTIONS FOR CPWG:

- Do we need to add additional topics?
- Do we need to add a second meeting in January?
- Do we need to add a second meeting in February?

Draft Timeline and Workplan

Month	Work
May 26, 2022	Mtg 1 – Review background and redetermination process
June 2022 - 2 mtgs, TBD	Mtg 1 – strategies for obtaining and updating contact information Mtg 2 – strategies for outreach and communication
July 2022 – 2 mtgs, TBD	Mtg 1 – strategies to maximize navigation assistance Mtg 2 – strategies to minimize loss of coverage
August – September 2022	Review plan and responsiveness to input
October 2022 – January 2023	Monitoring and oversight of redetermination process
February – March 2023	Review and endorsement of report to legislature

Draft Working Agreements

- We will focus on equity
- Show up with good intentions and be accountable for what you say and do
- Commit to addressing and repairing any harm we cause one another
- Listen respectfully to each other
- Make sure everyone's voice is heard/Share the microphone
- Be respectful to each other
- Commit to being uncomfortable
- Know that we are greater together
- Avoid using acronyms or explain them when we do

**What is
missing or
what would
you add?**

Draft Group Commitments

- To prioritize attending CPWG meetings
- To review meeting materials ahead of time and come prepared to participate
- To stay present and engaged in meetings to the best of my ability
- To be respectful to other CPWG members and their ideas and viewpoints
- To take the time we need to make sure everyone understands the material and they have the information they need to participate

CPWG Website:

<https://www.oregon.gov/oha/Pages/phe-maintain-coverage.aspx>

The screenshot shows a web browser window displaying the Oregon Health Authority website. The page title is "Provisions under House Bill 4035". The navigation bar includes "OREGON.GOV", "About OHA", "Programs and Services", "Oregon Health Plan", "Health System Reform", "Licenses and Certificates", and "Public Health". The main content area includes the following sections:

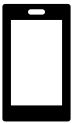
- Provisions under House Bill 4035**
HB 4035 Report to the Legislature: Unwinding the Federal Public Health Emergency
- Creating a "Bridge Program"**
- About the Joint Task Force On the Bridge Health Care Program**
House Bill 4035 requires OHA to create a new "bridge program" to provide an affordable, comprehensive source of health coverage to adults in Oregon with income between 138-200% of the Federal Poverty Level. Implementing this program will prevent coverage loss among some people who would otherwise lose OHP during the unwinding of the Federal Public Health Emergency and will improve coverage continuity by reducing instances of "churn" due to small and/or temporary income gains among OHP members. HB 4035 directs OHA to work with the Legislative Policy and Research Office (LPRO) to convene a Task Force to inform development of this program. Oregon will seek Centers for Medicare & Medicaid Services (CMS) approval before implementation of the program.
[Click here for membership details, upcoming meeting dates and times, and links to meeting recordings.](#)
- Outreach and Communication Strategies with Community Partners**
- About the Community and Partner Workgroup**
As established in HB 4035, the Community and Partner Workgroup (CPWG) advises OHA, ODHS, and DCBS on the development of outreach and enrollment assistance and communications strategies to communicate and assist medical assistance program members in navigating the redetermination process and any transitions to coverage through the health insurance exchange. This work has the dual goals of:
 1. Maintaining the most individuals covered possible so that benefits are not lost, and
 2. Ensuring additional protective measures for identified vulnerable populations, priority populations, and populations and individuals facing health inequities during this transition and process.The CPWG brings together representatives from impacted health systems, community partners, organized labor, individuals enrolled in medical assistance programs, and members of Oregon's Medicaid Advisory and Health Insurance Exchange Advisory committees to advise the state and the departments on the development of outreach and enrollment assistance and communication strategies to communicate and assist OHP members in navigating the redetermination process or transition to coverage through the health insurance exchange.
[Read the charter here](#)
- Members**
Members were selected based on their availability and willingness to attend CPWG sessions, lived experience and subject matter expertise, and in a manner to ensure diversity of perspective and representation of the state. Members representing intersecting identities and Oregon's priority populations were given preference.
- Meeting Info and Resources**

Date	Materials	Notes
May 26, 2022 3:00 pm – 5:00 pm	5.26.22 Materials	5.26.22 Notes

One place to go for information and materials on our work

Recommended Outreach and Communication Strategies

Recommended strategies and avenues for obtaining and updating contact information for medical assistance program (MAP) enrollees – identified by participants of the Oregon Eligibility (ONE) Learning Series Webinar during the 4/27/2022 meeting.



Digital: phone call, email, text message – recommended in 42/76 (55%) responses.

- “A callback line, or callback option within the automated system.” **ONE Customer Service Center will be implementing a call back option later this year.**
- “More frequent check-ins, such as semi-annual courtesy calls, to check in with patients.”



Paper-based communication: poster, flyer, letter – recommended in 14/76 (18%) responses.

- “notices with minimal words--often times, my clients will say that the letter was too long so they didn't read it”
- “Flyers that i can put up in our lobbies would be wonderful. I'm also going to let intake staff know about this so they can direct the client to me.”



Community partner (CP) and OHA outreach- recommended in 14/76 (18%) responses.

- “Cp's can-do outreach since they likely have contacts and connections that are able to access.”
- “CP's attending local events and having information available”



Media platforms: social media, radio, television, other methods of advertising – recommended in 10/76 (13%) responses.

- “In our rural area, Facebook is one of the popular ways to reach our ranchers and outlying small communities.”



Coordinated care organizations (CCOs), healthcare system/provider – recommended in 7/76 (9%) responses.

- “outreach to the member PCP to see if they can add a msg in their system or hand out flyers on how to update (using CP assisters, using 800 numbers)”



Others – recommended in 7/76 (9%) responses.

- “Offer raffle prize, they have to enter contact info to enter/win”

Additional Recommended Outreach and Communication Strategies

A summary of all additional outreach and communication comments and recommendations made by those who utilize medical assistance programs (MAPs), do work related to MAPs or is participating in MAP redetermination work.

Closely collaborate with community-based organizations (CBOs), community-based organizations (CCOs) and community partners (CPs) when preparing and distributing communications and navigation resources to enrollees.

Work closely with OHA/ODHS community outreach programs for communications and engagement planning. Utilize existing infrastructures to support this work.

When able, provide CBOs and CCOs with tips and talking points to use with consumers. This could ease some confusion and burden they may face as their financial state shifts and consumers transition to new plans.

Providing CBOs, CPs, and CCOs with advanced notice of communications that OHA/ODHS is sending to consumers, so they have a heads-up and are prepared to support.

Utilize admin staff at healthcare facilities to obtain updated contact information for people currently receiving services because the staff likely has frequent contact with the patient.

Minimizing stress and burden for consumers by streamlining and simplifying the redetermination process.

“I feel like asking consumers to participate in **overhaul activities needs to be delivered in the most light weight way possible. people are already exhausted** and asking them to do extra is concerning to me.” – Medicaid Advisory Committee (MAC)

“Completely agree with _____ that the **complexity of the redetermination process is as much a factor in churn as income**” – Medicaid Advisory Committee (MAC)

Key Communications to Share Throughout the Redetermination Process

During the 4/27/2022 meeting, Oregon Eligibility (ONE) Learning Series Webinar attendees were asked to list the top 2-3 messages they think OHA/ODHS should highlight for community during the redetermination process.

There were 54 total responses and **almost all suggestions centered around notifying people of the two key actions they must take to avoid losing coverage**, which includes:

1

Responding to notices when they receive them.

- “Letter response is super important so if you are over-income, still respond to keep your other health ins options open, use a CP to help!”
- “If you get a letter and do not respond, you may lose your coverage EVEN IF YOU ARE STILL ELIGIBLE.”

2

Making sure their contact information is up to date.

- “Please communicate with partners during redeterminations. Update your information. No response; coverage will end”
- “if contacted by ohp correspondence to contact by phone 1 800 699 9075 to update their information to avoid loss of coverage”
- “Coverage is important to keep, please make sure to Call your CP to update information.”



Unhoused Populations

Outreach, enrollment assistance and communications strategies

Populations with additional considerations: Houseless Population

At least one individual address, which is identified as 'No Permanent address

- Does the workgroup agree with planned approach for this population?
- Modified: Workgroup recommended spread throughout approach other than in January when Community Partners do federal housing (HUD) applications.
 - Discussion of other approaches
 - Workgroup recommendation:
- Is this a population that the workgroup would like to recommend communication and outreach strategies and approaches for in a future meeting?
 - YES – requested at 7-28-2022 Meeting

Est. cases
47,255



Houseless Population

Planned approach:
Spread-
throughout *other*
***than* January**

Considerations for Redeterminations

- **Sequencing:** Currently planned to spread over the entire redeterminations process.
- **ONE System** has an unhoused modifier. (No permanent address listed)
- **Considerations:** Unhoused very likely to be eligible (based on income threshold), but much more vulnerable to the complexities of the process.



CPWG Summary: Unhoused Populations

July 28th CPWG meeting

What outreach strategies might work?

- **Social media** and **billboard campaigns**
- Working with **community partners and shelters**

Recommendation to partner closely with County Mental Health Programs and other local safety net services to support outreach to unhoused populations.



Sept. 29th CPWG meeting

Considerations

- Estimated cases are **likely underreported**, because many people use business addresses for mail.
- **Community partners** may be good avenues for outreach.

Recommendation to avoid redeterminations in January for capacity reasons, because people are applying for Section 8 assistance.

Barriers / Gaps



- **Update-to-date contact information** a challenge for effective communication
- Can be difficult to get into **contact** and stay in contact
- Lack of housing can **compound stressors**, including health, finances, social supports, etc.
- May struggle with **behavioral health conditions**
- Need for assisters coming **directly to shelter sites & encampments**
 - It's difficult getting a health navigator / enrollment assister on site.
 - Process has become convoluted, making it far more complicated than just requesting a navigator.

Successes & Lessons Learned



Successes

- On-on-one, **relationship-based communications** are effective.
- **In-person visits** from health navigators often most effective.

Lessons Learned

1. Homeless service providers should have similar **access to the ONE system** as community partners.
2. Be aware of the **unique challenges** faced by those in this group when designing processes and providing support.
3. **Partners and shelters** are the best way to communicate with unhoused populations.



COVID Outreach

Lessons learned from COVID vaccine outreach to unhoused populations

COVID Outreach Successes & Lessons Learned

Successful events for the unhoused will rely on 5 primary strategies:

1. **Establish trust.** Unhoused service providers and local health organizations must work together to meet the needs of individuals in this population
2. **Meet people where they are.** It's hard to worry about vaccination when you don't have water to drink, or you are avoiding a violent situation
3. **Multi-purpose events.** Multi-purpose events like a health connect, allow for individuals to receive better services along with vaccination
4. **Provide vaccine outreach early and often.** Better communication means better results
5. **Make the event repeatable.** This ties to building trust and the nomadic nature of individuals in this population

There is no wrong door:

It takes great community partnerships to ensure our unhoused community members have good access to vaccination services

COVID outreach Successes & Lessons Learned

Successful vaccine events for the individuals experiencing houselessness:

•Local Public Health Authority and Community Partners

Klamath LPHC and Community Partners

- Two videos: (health literacy; vaccine education)

•Lane County

- Showing up to encampments each week.

Community Based Organization

•Burrito and vaccine education:

- Eugene

- Vaccine event with hotel rooms

-YCAP, Yamhill County Community Action Partnership



Successes & Lessons Learned

Successful vaccine events for the individuals experiencing houselessness:

Federally Qualified Health Centers

- Drop-in center example:
 - HOPE (Marion & Polk County, Northwest Human Service)
- Walk-in appointments
 - White Bird Clinic: Lane County
- Regional Pharmacy Events with CBO/OHA
 - PeaceCorp outreach, HUD outreach
 - Interpreter Services
 - Pharmacist that had a cultural humility background



Case Study Example – Z Codes & Kepro



COVID-19 vaccines and Z-Codes

Z590	Homelessness
Z591	Inadequate housing
Z592	Discord with neighbors, lodgers and landlord
Z593	Problems related to living in a residential institution
Z598	Other problems related to housing and economic circumstances
Z599	Problems related to housing and economic circumstances, Unspecified problem related to housing or economic circumstances

Oregon Department of Human Services

Youth Experiencing Homelessness
Self-Sufficiency Programs Housing Policy

ODHS

SNAP



- Specialized SNAP Outreach partners who help unhoused persons connect with resources (mailing options, application assistance etc.)
- Eligibility staff work at community drop-in sites to help people apply
- Population-specific CBO partnerships (unhoused veterans, people transitioning out of carceral settings, migrant and seasonal farmworkers)
- Not redetermination related – Restaurant Meal Program POP
- Opportunities to accommodate with communication – text, natural touchpoints (like EBT app), etc. not currently being used.

Employment Related Day Care (ERDC)

- Not redetermination related - Priority processing for those who meet the McKinney-Vento definition of homeless. Families to have their benefits opened using client statement as verification of income and the requirement to have an interview is waived. Family receives benefits more quickly and changes are made when verification is received.

ODHS



TA-DVS

- No redeterminations

Temporary Assistance for Needy Families (TANF)

- Language change from “home visiting” to “community and home visiting,” allows flexibility in location
- Lots of opportunity!

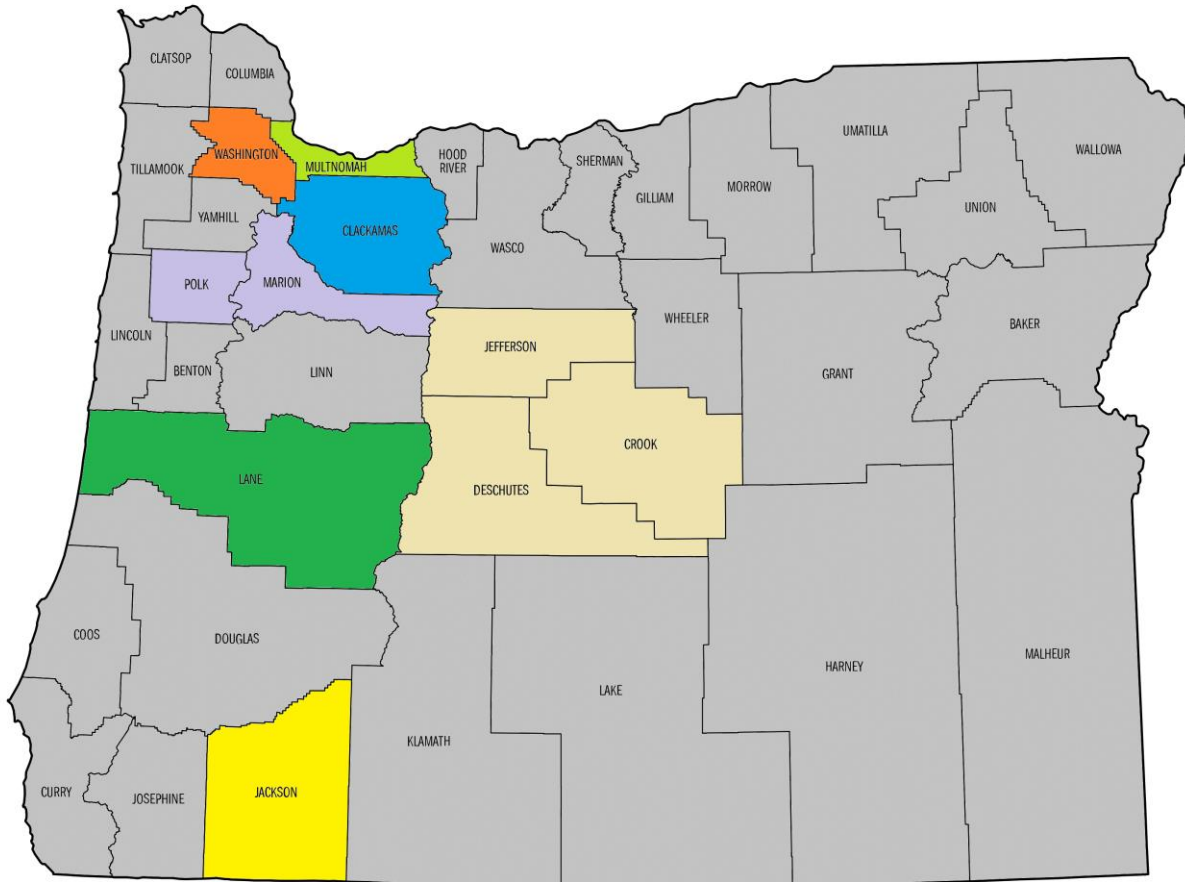
Youth Experiencing Homelessness Program (YEHP)

- YEHP works directly with ~35 youth-serving programs across the State
- Youth homelessness is not the same as adult homelessness
- Connectedness is hard with YEH
- Lack of Trust and Misinformation

Oregon Housing and Community Services

Presentation and discussion: Overview of OHCS work,
Community Action Agencies and Lane County Housing
Information Management System

HUD Continuum of Care (CoC) Organizations



CoC
Contact
Information



Public Health Emergency Unwinding Project

Communications Strategy and Coordination

Overview

July 14, 2022

Robb Cowie, OHA Communications Director

Lisa Morawski, ODHS Communications Director



Agenda Today

- Introductions
- Goals and principles
- National point of view
- Communications approach
- Discussion
- Wrap-up and next steps



The Goal: Preserve benefits

1

Ensure **all people and families eligible for benefits offered through the ONE system receive and continue to receive services in a timely manner** without interruption

2

Give those **no longer eligible for benefits clear direction and coordination** of additional resources

3

Give those who assist people receiving benefits **clear information about how they can help**



Our Principles

Our principles are focused on providing equitable communication to all people receiving benefits



National Point of View



Why communications and outreach matter

BENEFIT RECIPIENTS ARE ALREADY OVERWHELMED

Following all the steps to apply for and maintain benefits can feel like a second job to an already resource-strapped benefit recipients.

MISMANAGING THIS CHANGE CAN LEAVE FAMILIES HURTING

The onus is on us to support people receiving benefits and partner organizations as they're adapting to these changes.

COSTS RISE WHEN THINGS AREN'T CLEAR

When people receiving benefits and partners are confused, their first instinct is to call customer support for help. If customer support staff aren't prepared to help, costs rise even more.

THE POTENTIAL RISKS ARE REAL

Negative experiences can have long-term negative consequences for trust in government.

CHANGE IS A CHALLENGE – AND AN OPPORTUNITY

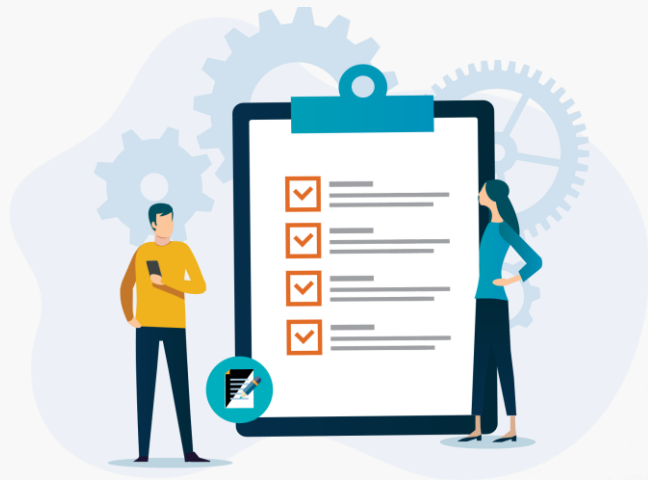
People receiving benefits and partner organizations will be paying attention. Now is the moment to clearly and proactively communicate so we can help them navigate the transition and build trust.

It Takes a Village

States will need to engage and empower a wide variety of partners to successfully communicate and support people receiving benefits.




Communications Approach



Public Health Emergency Ending

How we'll communicate by phase

	Pre-PHE Ending	PHE Ending Notice	Renewal Period
	Fall 2022	TBD	TBD
Objectives	<p>Encourage people to update their contact, income and household information.</p>	<ul style="list-style-type: none"> • Let people know what to expect and how to prepare. • Reinforce importance and urgency of updating their information. 	<ul style="list-style-type: none"> • Encourage people to read their notices and respond if information is needed to continue benefits. • Let people know what they need to do to maintain coverage or seek other services.
Bedrock Strategies	<ul style="list-style-type: none"> • Equip internal staff with scripts and supporting materials to use in every client interaction. • Share information and tools with community partners, providers and assisters so they can help those they serve navigate changes. • Reach people through broad and targeted awareness campaigns, preferred channels, and trusted senders to meet them where they are with the information they need when they need it. 		<ul style="list-style-type: none"> • Coordinate with the Marketplace to ensure people who lose OHP are supported in their transition to a private plan. • Promote the Bridge Plan as an option for those who do not qualify for OHP and cannot access Marketplace plans.
<p>Solicit and use partner, benefit recipient and Community Partner Work Group (CPWG) feedback to identify and address equity issues and improve PHE-unwinding efforts.</p>			



Lessons learned from COVID-19 for more accessible, equitable communications

Work closely with community partners to communicate health information



Create culturally responsive strategies, tools and content



Our COVID-19 Feedback Team wants to learn from you!

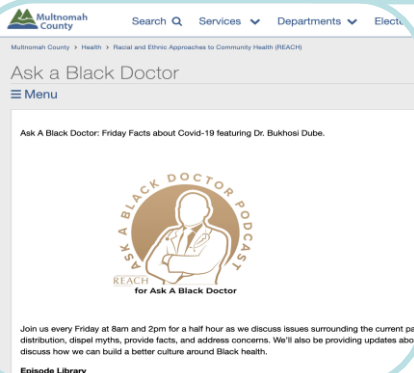
Share your comments, concerns and questions about the Oregon Health Authority's COVID-19 response.

Ways to share

- Fill out and mail this postcard
- Email CHA.Feedback@dhsosha.state.or.us
- Leave a voicemail at 503-945-5488
- Submit feedback online: <https://govstat.us.egov.com/CHA-OR-COVID-19-feedback>

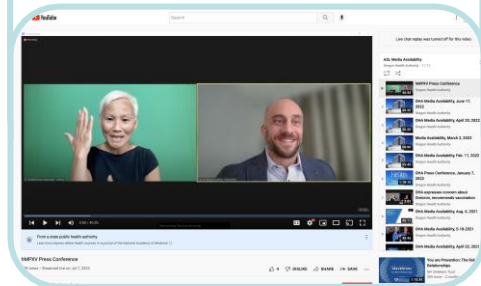


Solicit and use feedback from beneficiaries and partners to improve operations, communication and outreach



Work with providers who come from community to serve as trusted messengers to engage people they serve

Build accessibility into our channels and tools



Barriers and risks identified by CPWG

Challenge

Project Approach

"One size does not fit all"

- Use a variety of channels to reach people receiving benefits
- Equip trusted messengers in community to help

Culturally responsive communications

- Apply lessons learned during pandemic
- Equip trusted partners in communities to carry messages using a variety of channels

Confusing notices and messages

- Develop communications in plain language
- Revising medical notices
- Equip staff and partners to answer questions

Accurate contact information

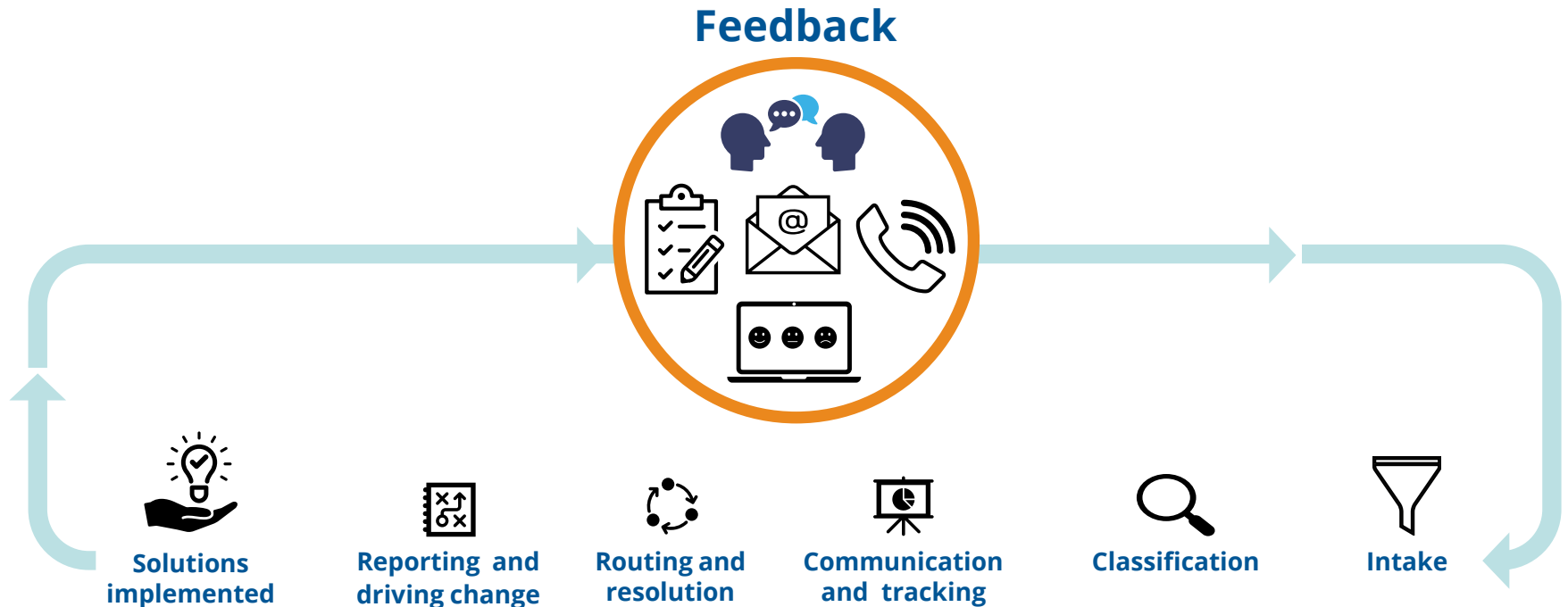
- Multipronged effort to encourage people to update their contact information
- Staff to verify with every contact; give CCOs ability to make updates
- Use proven outreach approaches for people who are unhoused

Mistrust of information sources

- Equip trusted partners in communities to carry messages using a variety of channels
- Utilize information sources with name or brand recognition
- Conduct outreach in community settings like libraries

How we'll use feedback to improve our work

Core objective: Ensure feedback from people receiving benefits, CCOs, providers and partners is woven throughout communications messages, strategies and tactics throughout the PHE unwinding.



Tactical overview

External Website

One-stop-shop for critical, phase-specific information, calls to action, and resources for various external audiences.

Benefit Recipients

Partners & Providers

Staff

Earned Media

Proactive use of news releases and other existing media outreach channels, and timely response to media inquiries.

Benefit Recipients

Partners & Providers

Benefit Recipient Communications

Letters, email, text messages, FAQ, Applicant Portal Message Center.

Benefit Recipients

Social Media Advertising

Broad awareness campaigns across various state and partner-owned social media platforms to boost reach.

Benefit Recipients

Partners & Providers

Paid Media Campaign

Broad awareness campaigns across paid media to increase understanding and action related to Oregon's PHE unwinding.

Benefit Recipients

Partners & Providers

Partner Toolkit

Toolkit with customizable content to inform partners of changes and equip them with tailored resources to educate and support the people they serve.

Partners & Providers

External Partner Webinars

Recurring touchpoints for key staff to share the latest information, answer questions, and solicit feedback related to Oregon's PHE unwinding efforts.

Partners & Providers

Internal Communications

Internal website, training, all-staff messages, staff scripts, presentation toolkits, leadership meetings and briefings.

Staff

Discussion Questions

- What are some of the communications outreach lessons you learned during the pandemic?
- In reflecting on your own interactions with people receiving benefits, which of our tactics or tools will be most helpful?
- What else should we consider?



Next Steps

- Incorporate CPWG feedback into our overall communications and outreach strategy
- Follow-up with CPWG in August

Workgroup recommendation questions and considerations

- What risks or barriers to communication and outreach exist for this populations?
- What has worked well?
- What is essential for us to consider or implement for this populations?
- Would this population benefit from front determinations, end determinations, or redeterminations across the entire time period?

