Obamacare signups begin with different outreach strategy

By: ARIELLE LEVIN BECKER | November 2, 2015

The first year Janet Carlson and her team from a Cornwall nonprofit helped people sign up for coverage under the federal health law, they assisted a lot of professionals—small business owners and others who were computer-savvy, familiar with insurance and just needed a little guidance.

Last year, for the second round of Obamacare signups, Carlson helped many with more intense needs: some who said they’d never been to a doctor, weren’t sure why they needed insurance or had little comfort with insurance or medical terminology.

“I suspect that the folks this year are going to be pretty high-touch,” said Carlson, executive director of the nonprofit PharmaCares. But Carlson will be something of an anomaly during this open enrollment period, one of just a handful of people formally charged with going out to find and sign up the uninsured. Her team’s efforts are being funded by the Sharon-based Foundation for Community Health.

Related: Obamacare Q&A: What you need to know for open enrollment

Instead, officials at Access Health CT, the state’s health insurance exchange, plan to base their efforts to reach the uninsured more heavily on reaching “influencers,” community leaders who hold sway with those who still haven’t gotten coverage and can point them to a place to sign up.

It’s a shift that officials at the exchange hope will help to make headway in reaching a smaller, harder-to-reach population of uninsured, but one that has left some proponents of in-person outreach concerned that some could be left out, particularly those in rural corners of the state and people who don’t speak English or Spanish.

Who’s still uninsured in Connecticut?

Research suggests that the majority of Connecticut’s uninsured are African-American or Hispanic, said Andrea Ravitz, the exchange’s marketing director. Others are people who don’t speak English or Spanish.

A recent analysis by the Kaiser Family Foundation estimated that 28 percent of uninsured Connecticut residents were eligible for Medicaid and another 25 percent would qualify for discounted coverage through the exchange.


Imam Kashif Abdul-Karim knows many people who still aren’t covered. Some are immigrants who speak Urdu, Farsi or Arabic and can struggle to find translators to help them sign up or get medical care.

Others earn slightly too much to qualify for Medicaid but can’t afford to buy insurance, even at discounted rates. The Muhammad Islamic Center of Greater Hartford, which Abdul-Karim leads, recently took up a collection for a man who fell into that gap and couldn’t afford critical medication.

Abdul-Karim also knows many people who became insured under the health law.

“Things are definitely better off than they were,” he said. “But the issue is, is it the best it could be? And obviously not, because there’s still a lot of people who were left out.”
A new strategy

Access Health officials say reaching the uninsured remains a key part of their mission. But they have the added task of trying to convince more than 95,000 current customers to keep their coverage, even if they’re among the many who didn’t use it. (http://ctmirror.org/2015/07/22/survey-36-of-ct-obamacare-customers-havent-used-their-insurance/)

And the exchange has a smaller marketing budget to do that. It plans to spend $4 million during open enrollment, down from just under $7 million last year and close to $17 million during the first open-enrollment period.

In addition to advertising, this year’s plans include providing in-person enrollment assistance at storefronts in New Britain, New Haven and five other locations, hosting six enrollment fairs, providing access to brokers through the exchange’s call center and in-person enrollment locations, and relying on more than 500 people at hospitals and community health centers who have been trained to help people sign up. There will be information on enrollment in CVS pharmacies, libraries and other places.

The exchange is also trying to enlist the help of community leaders who could serve as conduits to the uninsured and help nudge them to sign up. Access Health has been holding “community chats” with local leaders including librarians, elected officials and clergy.

A common theme in the early chats, CEO Jim Wadleigh said, is that many of those leaders hadn’t known what the exchange was.

“This is how we’re truly going to get to those people who don’t want to be found, or who are hard to find,” Wadleigh said.

Ravitz said Access Health is working to reach out to immigrants, including having representatives at naturalization ceremonies and possibly working with immigration lawyers and others involved in immigration issues.

The exchange will also emphasize the role of insurance brokers who can recommend specific plans to potential customers, Ravitz said.

“After two open enrollments, if people have not signed up, there might be more hand-holding needed to be able to complete the enrollment process,” she said.

Is it enough?

But some have raised concerns that having fewer people seeking out the uninsured could leave out those who need the most help.

“We know from previous experience that especially the most vulnerable people who need help, at this point, they’re probably not getting it,” said Alta Lash, executive director of United Connecticut Action for Neighborhoods and a member of Access Health’s consumer experience and outreach advisory committee.

While Carlson’s outreach work in Litchfield County is continuing with foundation money, two other foundations that supplemented previous “shoe-leather” outreach efforts (http://ctmirror.org/2014/10/07/foundations-chip-in-to-help-people-sign-up-for-obamacare/) are not doing so this year. One, the Connecticut Health Foundation, had been in talks with Access Health to create a year-round consumer assistance program, but that never came to fruition.

The foundation still sees a need for in-person assistance, Vice President of Policy and Communications Elizabeth Krause said.

“We had been hopeful a public-private funding partnership would produce a new year-round consumer support solution this year, but it did not come together with funding cut on the public side,” Krause said.

At a glance: Open enrollment

When: Nov. 1 through Jan. 31

Who: People can sign up for private insurance and Medicaid. There is no deadline for signing up for Medicaid. People can sign up through Access Health CT, the state’s health insurance exchange, or buy plans sold outside the exchange through insurance companies or brokers. People who qualify for tax credits to discount their premiums can only get them if they buy plans through the exchange.

Penalty: If you don’t have coverage in 2016 and don’t qualify for an exemption, you’ll be fined $695 per person ($347.50 for kids) or 2.5 percent of your household income, whichever is higher.

Access Health CT:

Call center 1-855-805-4325
Monday-Friday 8 a.m. to 6 p.m.
Saturday 11 a.m. to 3 p.m.

www.accesshealthct.com

In-person assistance free at:

Access Health CT Enrollment Centers
55 Church St., New Haven
200 Main St., New Britain
Women’s Center of Greater Danbury
8 West St., Danbury
Raymond Main Library
840 Main St., East Hartford
United Community and Family Services
47 Town St., Norwich
Ferguson Library – Main Branch
One Public Library Plaza, Stamford
Opportunities Industrialization Center
77-79 Bishop St., Waterbury

Eva Bermudez, an organizer with the union CSEA, helped Maxime Calixte sign up for health insurance during the first open enrollment period in late 2013. She helped nearly 1,000 people sign up in the first year. ARIELLE LEVIN BECKER / THE CT MIRROR

http://ctmirror.org/2015/11/02/obamacare-signups-begin-with-different-outreach-strategy/
Access Health officials have questioned the effectiveness of previous outreach efforts, which provided grants to people or groups to assist with signups. While some who received grants were successful, Wadleigh said others didn’t even pick up the computers needed to enroll people. And he said it proved more effective to offer enrollment help during set hours at fixed locations, including libraries and Department of Labor offices.

Wadleigh acknowledged the concern that the exchange could miss some of the uninsured, including those who wouldn’t otherwise seek out an enrollment location. But he said reaching “influencers” could help avoid that. It will be impossible for the exchange to reach the remaining uninsured on its own, he added.

“A lot of the push that we're doing in this third open enrollment is, ‘This is a state effort, we really need everybody to help rein in the last few percentages of uninsured,’” Wadleigh said.

**Finding the uninsured in Litchfield County**

These days, Carlson rarely goes out without hearing questions about health insurance. “At this time of year, going to the post office or getting a sandwich is very risky for us,” she joked.

Carlson and her four colleagues work closely with town social service workers, who refer people they work with who don’t have coverage. They plan to hold sign-up events in each town and take individual appointments.

Last year, they signed up more than 350 people, and answered questions for many more, Carlson said.

The first year, Carlson envisioned a process that would work with military efficiency. She was wrong.

“It’s intensely personal,” she said. Often, people going through the sign-up process talk about what’s on their mind, like illnesses in their family or their own health problems. It’s humbling, she said. “People have a lot on their minds.”

“I’ve never gotten so many hugs in my life from doing a job,” she said.

**Comments**

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