

**Channels for input**

- Written comments
- Small group sessions
- Stakeholder comment letters and reports
- Exchange Board meetings

**Next steps for incorporating input**

- Development work being conducted by Ogilvy and RHA
- Exchange Board program and policy planning

<b>Marketing, Outreach, Enrollment and Retention Input Process</b>	

**Small group sessions**

- Small group sessions convened by the Exchange, Department of Health Care Services, Managed Risk Medical Insurance Board and Office of the Patient Advocate
- 17 sessions convened around the state
- Separate sessions convened for consumer advocates, providers, county representatives and brokers
- Participants serve or represent over 25 California urban and rural counties

**Written comments**

- Written comments submitted by over 30 individuals and organizations

# Stakeholder Perspectives on Success

## **Successful coverage expansion**

- Focus on core competencies needed for successful launch in 2014
- Recognize Exchange should expand focus over time to delivery system reform, health improvement and linkages to other programs

## **Enrollment success**

- Estimates ranged from 20% of eligible individuals enrolled by the end of 2014 to 100% by the end of 2019
- Affordability of products, effective outreach and simplicity of enrollment systems will impact success

# Stakeholder Perspectives on Marketing, Promotion and Outreach

## **Strategies for reaching target populations**

- Understand the priorities of target populations
- Tailor marketing and outreach to target populations
- Use clear and simple messages

## **Key considerations**

- Prioritizing marketing and outreach efforts
- Timing for marketing and outreach
- Beware not being seen as “another government program”
- Need for balanced risk pool
- Connection with human services

# Stakeholder Perspectives on Marketing, Promotion and Outreach

## Top outreach and marketing activities

- Tell the stories of real people
- Leverage existing, trusted community networks
- Use social media to reach young adults
- Work with schools to encourage coverage
- Work with colleges and universities to reach young adults
- Use ethnic media
- Give providers outreach tools
- Tailor outreach strategies for rural communities
- Tailor outreach strategies for small businesses
- Other marketing and outreach strategies to explore
- Special marketing and outreach for SHOP

# Stakeholder Perspectives on Marketing, Promotion and Outreach

## **Strategies to maximize early enrollment**

- Maximize use of auto- or pre-enrollment (e.g., LIHP, Family PACT)
- Maximize enrollment in insurance affordability programs by working with entities that serve potentially-eligible individuals (e.g., DMV, schools, Franchise Tax Board)
- Maximize enrollment among individuals who use health services by working with providers

# Stakeholder Perspectives on Marketing, Promotion and Outreach

## **Need strategies to Maximize Retention**

- Simplify program rules
- Access to care critical to affirming value of coverage

## **Effective Messengers and Messages**

- Stories from people who benefit from coverage expansion
- Trusted community leaders provide clear and consistent messages

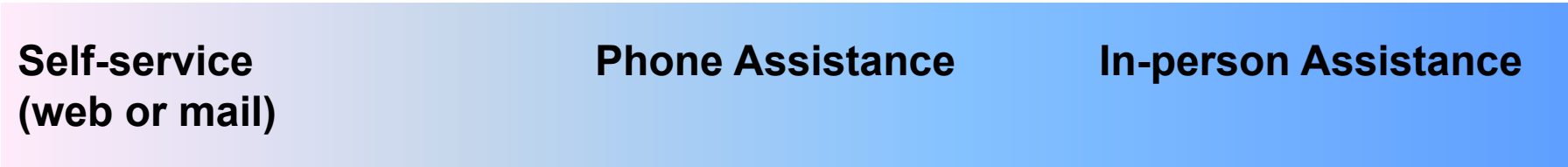
# Stakeholder Perspectives on Enrollment Assistance, Navigators and Health Insurance Agents

## **Perspectives on entities' roles in providing enrollment assistance**

- Balance the need for in-person assistance with cost
- Need all hands on deck
- Different groups start with different core competencies
  - Counties – public program eligibility
  - Consumer groups – public program eligibility and benefits
  - Brokers – private plans and benefit design variation
- Use existing trusted sources
- Diversity of perspectives on roles



**Supporting applicants across the continuum of assistance**



**Key considerations**

- Need for assistance will change over time
- Be ready for high need in early years
- Need to clarify scope of assistance (eligibility to enrollment to use of care to retention)

# Stakeholder Perspectives on Enrollment Assistance, Navigators and Health Insurance Agents

## **Methods of payment for enrollment assistance**

- No payment
- Flat application payments
- Grants
- Premium-based commissions

## **Key considerations**

- No “one size fits all” payment system
- Consider hybrid payment models (e.g., flat payments and grants)

## **Requirements and performance standards**

- Need for rigorous initial and ongoing training and strong performance standards

**For More Information:**

Visit our stakeholder webpage at  
<http://www.hbex.ca.gov/stakeholders>