
RESEARCH BRIEF:

PRIMARY RESEARCH ON ELIGIBILITY AND ENROLLMENT IN LOUISIANA MEDICAID

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Prepared by: Adaptation Health with the support of the Louisiana Department of Health

Louisiana Medicaid members receive and process information about their enrollment and eligibility in various ways. This brief explores and captures the voice of the member on the current state of communication between Louisiana Medicaid and members along with sharing communication preferences, and helping to define the future opportunity.

Key Findings

This research identified several key themes in existing communication challenges with Medicaid members further described below.

1. The deadlines to return information creates confusion and does not give people enough time to respond.
2. Most people found the content of the letters to be clear and recognized that there is important information contained in them.
3. The communication dosage is an important consideration beyond the content and receipt date. Ideal solutions should create the correct balance between informing and engaging members while not overwhelming them.

4. Members spoke heavily about various ways in which they understand information, indicating a need to be considerate of process.
5. Lastly and most critically, there is no single communication channel preferred by members. People spoke about various ways they prefer to receive communication indicating the need to be more comprehensive in channel and approach.

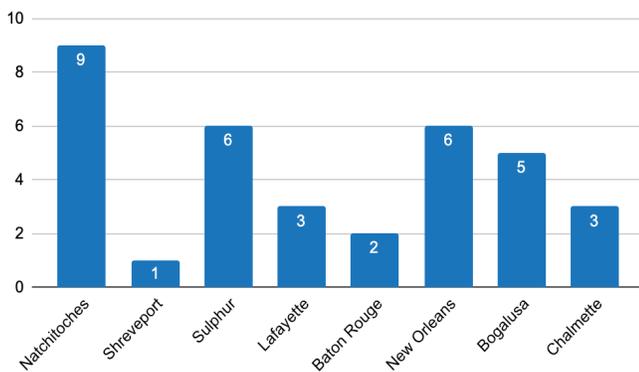
The Project

The [Louisiana Department of Health](#) (LDH) has partnered with Adaptation Health on the [Louisiana Medicaid Innovation Challenge](#) to support the Medicaid program in identifying market-ready solutions to engage members through the appropriate use of technology, providing superior customer service to the population it serves, and maintaining its status as a high-performing national leader in Medicaid eligibility simplification, streamlining and program integrity.

Throughout the Fall of 2019, Adaptation Health worked with 12 healthcare organizations across Louisiana to gather information on the current state of communication with Medicaid members, learn more about member communication preferences, and understand the process by which these people manage ongoing communication

with LDH regarding eligibility. Louisiana Medicaid members interviewed were identified as those having either lost their or their child's coverage in the past year or received excessive or confusing mail from LDH. Participants self-selected to join focus groups or signed up for phone calls directly through the provider staff. Demographic information was collected but all personal information was kept anonymous. Overall, 35 members were interviewed and in-person focus groups were held across Louisiana in Natchitoches, Sulphur, Lafayette, New Orleans, Chalmette, and Bogalusa.

Locations of Participants



Current State Review

Responding to Deadlines

A strong theme found consistently in the research is the uncertainty created through the present communication strategy. Currently, Louisiana Medicaid members receive information about their eligibility and enrollment through the mail. The research highlights that through this process there are potential gaps or lapses in communication (as perceived by individuals) that create a lack of understanding as to the overall eligibility needs among LDH. **Much of that uncertainty and obvious anxiety comes from the deadlines and the requirements to respond to information sent through the mail regarding eligibility and enrollment in the program.** As one participant explained,

There really isn't a warning that you need to do x, y, and z before you could lose your Medicaid.

Another person said,

I get a letter that looks like this, that tells me if I do not submit anything by this deadline my child will get cut off. I rely on Medicaid, okay? Both my girls are disabled.

This same group respondent shared,

...you might get something three days before it's due back and then you're scrambling trying to hurry up and get it back and wondering why it's dated that, you're just now getting it.

Prompting another person in her group to say,

Or you're like me and just throw your hands up, and say I'll do it later; I can't do it in the next three days.

As voiced by respondents, receiving slower communication through the mail can exacerbate these problems. In some cases people opened the letter just a few days before the deadline. In such an instance a woman reported,

I got the letter but the date was the day before. And I'm like wait, that was yesterday, I'm getting the letter today. Like that was yesterday's date!

The content within the letters is not seen as much of a problem compared to the amount of confusion about the information timing, potential misinformation, and lack of warning or prior notification.

The Content of the Letters

In spite of the difficulties regarding the necessary steps, requirements, and deadlines, the language and format of letters seemed fairly straight forward for most people interviewed in terms of understanding. Most respondents found the letters to be easy to understand (per grade level language) and could tell that there was important information contained in them. One person found, “[the letters] concise,” and another, “self-explanatory.” This person thought they were easy to understand, “...because they break it down,” and “let you know what you need.” In a separate group discussion a participant also added:

Because they kind of break it down with what it's for, what information they need from you, when they need it by, and also it's an example of the type of proof that they need.

Another respondent further stated,

I feel it's easy to understand they got your name, they tell you what they need, they tell you the due date of it, and then they explain it to you in detail of why they need it or what you could be eligible for whenever you send all of your information in.

Yet the significance and the potential ramifications of the letters made some feel, “super [overwhelmed],” and “freaked out,” adding,

I would probably read this and have to read it 50 times to be able to understand it.

This builds to the core of the research findings, **that there is no single reported communication channel that is preferred by all respondents.**

Issues with Current Communication

People reported receiving conflicting messages in the letters and in some cases, respondents reported receiving too many letters with various levels of importance and urgency which added to the confusion. **There are mixed responses in the amount and dosage of communication to people, with various perceptions of how this should work.** As one person shared,

I got letters all the time too, but I wouldn't really open them because most of the time it wasn't nothing important. But like the week before they were saying that [my daughter] was ineligible for Medicaid [that is] when I got it and I'm like why didn't they say something before? This is a week before!

Another added that she did receive letters but,

...didn't respond to it because [she] kept receiving them, it wasn't just the one.

Another respondent admitted,

I thought it was junk mail to be honest and I threw the first one away.

This member received multiple conflicting and confusing letters and detailed,

...there was one, then one saying we were cut off, then one say we were back on. Then I received one saying I was off, and it was still on.

Conflicting information continued to be an issue among others still.

This woman said,

I just got some letters a little while ago that I had to call them to make sure that I was covered because the letter I got was I wasn't covered.

Yet she did not lose coverage,

...when I called them, they said they didn't know why I got that letter.

There are variations in the amount of communication and the sense that the communication is potentially misleading or false. This can lead to active or passive ignorance of the messaging and information. [The single-channel communication approach does not appear to work for everyone and there are mixed responses in the number of and dosage of communications people want to and need to receive.](#)

No Communication or Prior Warning Received

Still there were instances where respondents reported that they did not receive any notification or letter and found out they were no longer covered on Medicaid only at the clinic, pharmacy, or their appointment. A mother in Lafayette said that she,

...found out through [her] DME (Durable Medical Equipment) request. When they tried to submit a request for [her] daughter's trach and feeding supplies.

A person in Washington Parish shared,

I walked in the drug store to get some medicine and it was very much needed and I was told my coverage ended on November the 30th. And they had sent me absolutely no paperwork telling me any of this or anything like that.

Another mother in Baton Rouge said,

...I took my son to urgent care, that's when I found out he no longer had Medicaid.

A family found out at a doctor's appointment and when asked how she responded she replied,

...they stopped going to see the doctor during that period of time because I had no way to pay for them.

The cases of members not receiving any prior notification shows the [need for multiple channels and a further opportunity to improve the process.](#)

Members' Communication Preferences

As stated throughout this brief, respondents' communication preferences are mixed. [Some respondents preferred mail, while others email, and still others to text messages, or phone calls.](#) As explained by one respondent,

...with emails I can save it, I can store it, I can search it and reference back to it.

While someone else said, "phone, because I don't have email." Still another added,

...if they want information from me, I'd rather be on the phone with them on speaker to where I can actually go get the information that they need.

A phone call was preferred for this member because, "...even when I get the letter, I'm still going to call you." This person explained,

I just don't prefer to talk on the phone. I don't like it. I mean, I'd just much rather email back and forth, fax if I need to rather than talk to someone. I watch it ring.

Similarly, this participant replied,

[On the phone there is] sometimes miscommunication and they won't be able to understand you and I feel like through email it's more of a straightforward process and you know what you need, and you can just gather up and email it back to them.

And still some indicated a preference towards text messaging,

Text. I mean, it's modern. Everybody has cellphones now to me. I mean, everybody does. Mail, you just never know because it's snail mail on purpose it takes longer to get it.

[A common theme throughout all of the communication preferences was a need for authenticity and feeling of legitimacy in the delivery.](#)

Scams, stealing of personal information, or being taken advantage of were all expressed by members and influenced communication preferences. This woman preferred letters, and when asked why she said,

Because we have a lot of sales scam businesses going on and you don't know who you're talking to the right ones or the wrong ones.

When discussing different forms of communication this person noted,

So much scamming going on I'd be nervous if I responded to certain stuff.

One woman called the number listed on the letter and explained,

I gave them my name. They wanted my social security number and I said they weren't getting it. Because I didn't know who I was talking to.

Thus, a new communication medium must quickly build trust and legitimacy with the population it is serving to be successful.

Need

As found through this research, [the preferred method of communication is mixed, and there is no one form that works well for every member, or even a clear majority of members](#). Phone calls, texting, email, chatbots and letters were all preferred channels of communication for some, but still faced push back from others. While some people preferred to be able to read the information others wanted to speak with someone, and for those that preferred receiving an email, others noted limited internet or technology access.

Most people indicated that they would respond to important information sent through the mail but people clearly stated that mail should not be the only channel that LDH uses to contact them regarding important information. [The issue in urgency, frequency, and dosage are potentially impacted by an improper communication strategy. In order to drive engagement, there is likely a consideration to how, in what way, and in what dosage communication should be made to individual members](#). Finally, authenticity and fear of scams was a common theme and participants expressed a need for communication to look and feel legitimate.

Conclusion & Next Steps

The Louisiana Medicaid members interviewed as part of this process clearly indicated they wanted to receive information through a variety of channels. Currently, members receive information through a single

communication stream via standard mail, and this is causing breakdowns in actual and perceived communication regarding eligibility verification and enrollment in Medicaid. There is no one channel that will work for everyone and members expressed anxiety and concern about the timeline and deadline to return information.

Using this research as a guide, and facilitated by Adaptation Health, the next step in this process is an upcoming corresponding RFI and vendor application for potential companies to apply to present their solution to LDH. The [Louisiana Medicaid Innovation Challenge](#) aims to find value in solutions that can improve communication strategies, channels, and dosage between LDH and members concerning their eligibility and enrollment status with respect to the considerations outlined in this brief.

Thank you to the following organizations for supporting this critical research to ensure that Louisiana Medicaid continues to perform as a national leader:

- Access Health Louisiana South Broad Community Health Center
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