Survey of Enrollment Activity – Preliminary Results

Purpose of the Survey

The Statewide REN Steering Committee, which includes the Department of Health Services, the Office of the Commissioner of Insurance, the Milwaukee Health Care Partnership, Wisconsin Hospital Association, Covering Kids and Families, UW-Population Health Institute, Wisconsin Association of Health Plans, the Alliance of Health Insurers and the Wisconsin Primary Health Care Association is seeking information from partners on the enrollment activity that occurred throughout the state.

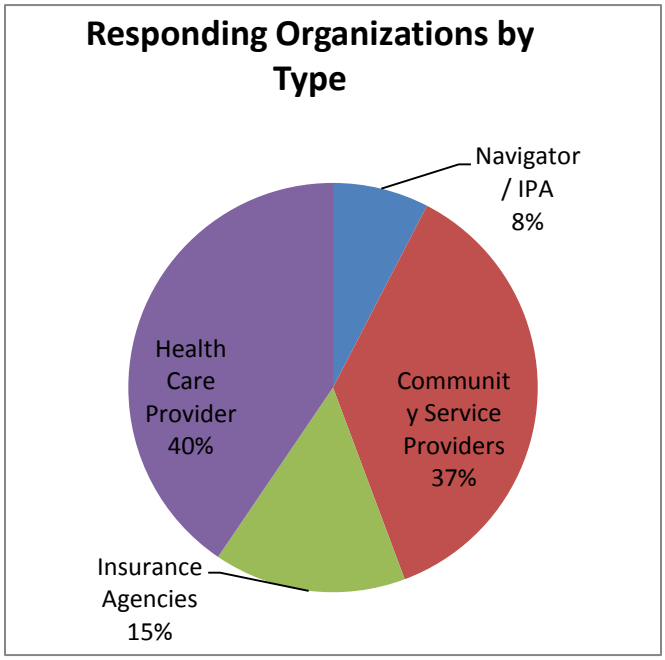
We are interested in better understanding the capacity and resource needs for the next open enrollment period, identifying gaps in terms of resource availability, and studying areas of high success. Similarly, we want to give everyone the opportunity to demonstrate their contribution toward this effort. We recognize there was little to no funding for this effort, and believe that any contribution toward reducing the number of uninsured in the state is valuable. We are interested in understanding how the RENs are currently working so we can support your efforts in a meaningful way in the future.

Background on Regional Enrollment Networks

11 Regional Enrollment Networks have been created across the state modeled after the Milwaukee Enrollment Network, with the overarching goal of ensuring a coordinated, adequate enrollment system. Collaborating partners received this survey.

A Summary of the Results

80 non-duplicated, completed responses received



General Feedback on RENs:

Positive:

"I would not have been able to do my job ½ as well without the education that was offered"

"The REN provided CAC's for 6 open enrollment sessions at our facility. The education and updates and materials provided through the REN were excellent"

"I think the various organizations did a good job putting out information as quickly as possible. It would have been better if there was one central location we could get local information from and to collect enrollment data. Although we ended up with a number of assisters in [our county], we did only accomplished this when various organizations took on this work with no financial support."

"REN could not have been more supportive. If I had questions and they had no answers they would find the answers and get back to me in a timely manner. Also, they were excellent with connecting me with individuals in my area that are doing the same things I am trying to accomplish."

"The weekly newsletters were the best"

Negative:

"I feel like [our county] could have benefited from more active assisters (CACs). We really relied on [one clinic] and the other assisters in the area really only wanted to serve their population."

"Initially our REN was very helpful, but there were no periodic meetings once everything got started. I actually got most of my information from another REN"

"Community outreach and education was low as well. Some events that were scheduled had low numbers in attendance."

"There were not enough assisters in our county"

"I am an agent and I didn't feel like we were welcome to events and actually heard from other agents that we were turned away. Most agents know the plans better than anyone and yet you are under- utilizing this resource. Just because we aren't hourly employees does not mean we are not valuable."

What were the major obstacles your organization faced in providing Marketplace enrollment assistance?

"Website issues: problems when uploading, problems verifying identity, incorrect eligibility determinations"

"Long wait time over the phone, and the quality of call center staff was variable"

"Changing rules & policies"

"Mis-informed or uninformed public. Need for ACA and general health insurance literacy."

"Lack of resources for Spanish-speaking community"

"No relationships with health plans, so it was difficult to communicate with insurance companies after initial enrollment"

"Need a local resource for complicated cases"

"Limited training was available, and much of it was at a cost"

What were the major obstacles your organization faced in providing BadgerCare enrollment assistance?

"BadgerCare letters were complicated; BadgerCare members remained uninformed despite the letters and calls received. Many letters were sent in error to people who are actually ineligible."

"The changing timelines for BadgerCare policy changes resulted in a long waiting period for coverage for childless adults"

"There were often disagreements between state and Marketplace determinations. The Marketplace determines eligibility based on annual income, while the state determines based on monthly income. Because of fluctuating incomes, some patients have currently monthly incomes that disqualify them from BadgerCare, even though they predict their yearly income to be below the limit."

"Complications remain for individuals who have applied for or are eligible for disability. We weren't sure how to answer some of the questions and we received differing opinions on that."

"Besides the issues with enrolling via the healthcare.gov site, this went fine. Access.wi.gov worked very well"

"This process was easier. When patients were interested, we could easily complete application in one sitting."

On average per person, how much time did your organization spend working with:

Marketplace: 2 hours

BadgerCare: 1 hour

What training topics would be most useful to your organization in the future?

Special Enrollment Period Eligibility

Marketplace renewal process

Marketplace appeals process

Serving special populations such as self-employed, immigrant populations

MAGI

BadgerCare Policy Changes

BadgerCare HMOs

2014-15 Open enrollment updates

Anything else you would like to share that be helpful in order to best prepare for the next open enrollment period?

"Have funds available to staff the coordinators of the enrollment regions and keep the groups active. This is an asset to all of us to stay educated and connected throughout the state"

"Need access to a representative from the insurers, and we'd like to work with them more closely"

"Better training of staff at marketplace call center is needed. Many of our clients were not made aware of the full range of insurance options available on the marketplace and ended up signing up for a plan that did not suit them."

"I would like to see everyone looking at this like it is a team effort. Utilize your health insurance agents when you can and let us be a vital part of the process. My personal goal is to be here for my customers long after they enroll in a plan. Not being part of the support system for some people is very difficult. Not all people need that but having that option available to them is comforting."

"Some organizations have already informed me they are reconsidering being CACs because they just can't keep working like that for next open enrollment period. How do we encourage organizations to remain CACs or other organizations to become CACs?"

"The enrollment message needs to be simplified for people to understand - should be a clear statewide message."

"The OCI CAC training was not helpful"

"I think it would be beneficial to come up with a Statewide plan to help educate/inform the public far enough in advance of the next open enrollment period, so they understand the benefits/necessity of enrolling in insurance. There was too much negative press/publicity during the last open enrollment and I believe consumers just decided to check out of the whole process."