

# Data-Driven Outreach: Reaching Target Populations

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Javier Fernandez-Pagan  
Amir Al-Kourainy

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# Agenda

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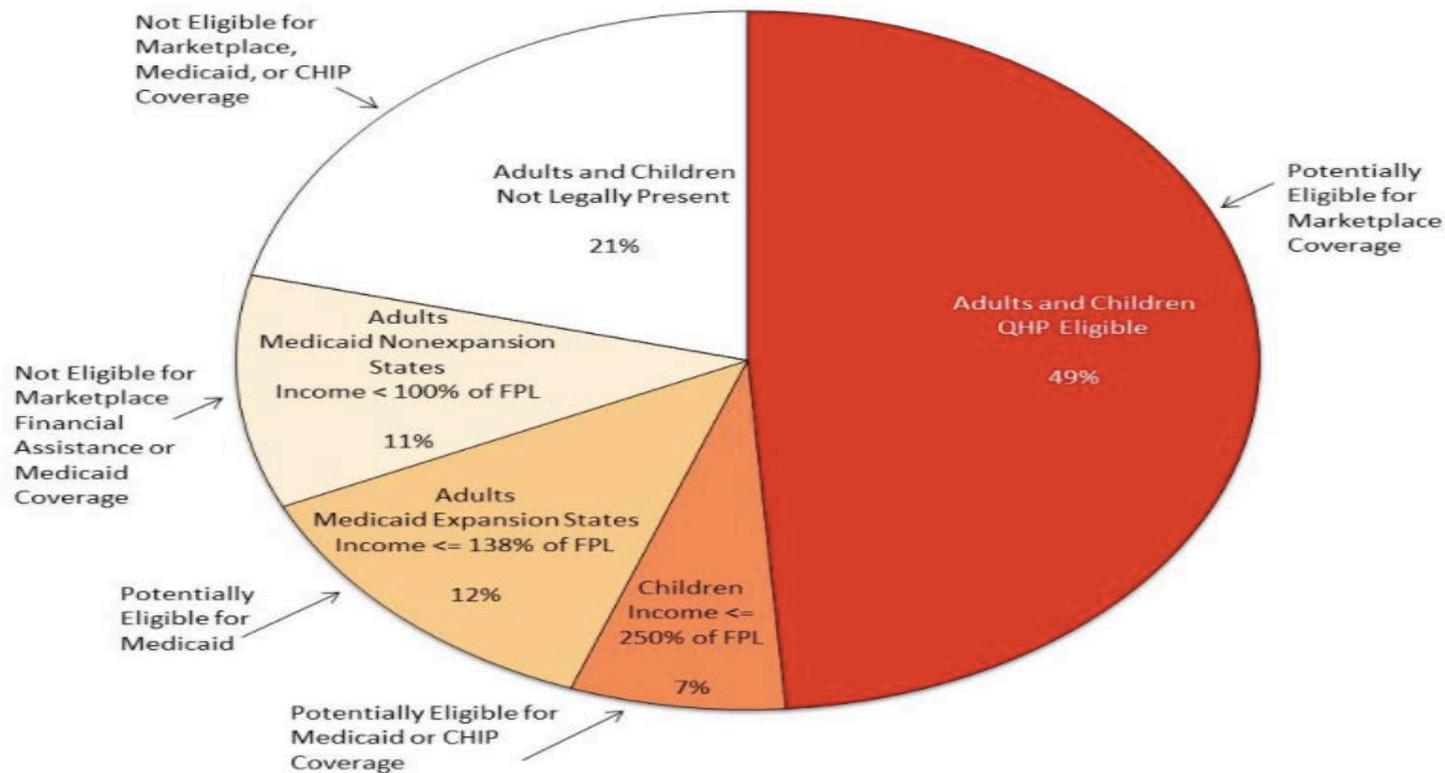
- 2017 Health Coverage Landscape: What is the Data Telling Us?
- Looking Ahead: 2018 Open Enrollment Period (OEP)
- First Panel Discussion: Benefits of Using Data for Outreach
- Data-Driven Approach: Where to Start?
- Second Panel Discussion: UDS Mapper (Uniform Data System) and Other Data Sources
- Wrap Up and Next Steps

# 2017 Marketplace Enrollment Data

## Summary of 2017 OEP Plan Selections by Enrollment Type

	<b>Number</b>	<b>% of Total</b>
2017 New Consumers	3,822,114	31%
Returning Consumers Re-enrolling in 2017 Coverage	8,393,889	
Active Re-enrollees	5,271,245	43%
Automatic Re-enrollees	2,784,013	23%
Unknown Re-enrollment type	338,631	3%
Total 2017 Plan Selections	12,216,003	100%

# Demographic Profile of the Remaining Uninsured



# Marketplace QHP-Eligible Uninsured by Various Demographics

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- **Income**
  - Nearly 50% of eligible uninsured have incomes between 100% and 250% of FPL
- **Age**
  - Nearly 46% of eligible uninsured are between the ages of 18-34 years old
- **Employment**
  - More than 70% of eligible uninsured are employed
- **Marital Status**
  - Nearly 63% of eligible uninsured are not married
- **Health Status**
  - Nearly two-thirds are in excellent or very good health

# Learning from the 2017 Individual Market Open Enrollment Period

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- Data shows:
  - Cost still poses a major barrier to coverage for the uninsured population between 100% and 250% of FPL.
  - Providing information about financial assistance is among the most effective messages for getting consumers to enroll.
  - People of color represent a disproportionate share of eligible uninsured consumers.
  - Healthy consumers are not proactively enrolling in Marketplace coverage.

# Looking Ahead: 2018 O/E Strategies

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## Key Strategies for Assisters:

- ✓ Identifying target populations
- ✓ Working with other organizations in the community to reach consumers where they are
- ✓ Implementing a strong retention strategy
- ✓ Identifying trends and analyzing changes over time
- ✓ Increasing/improving engagement of all health stakeholders (e.g. other assister organizations, public hospitals, community clinics, health centers, local providers, etc.)
- ✓ Outreach to those transitioning out of other types of health coverage (e.g. Medicaid/CHIP)
- ✓ Smarter outreach among demographic groups with higher uninsured rates

# Polling Question 1

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**When you think of using data for outreach purposes, what is the first word that comes to mind for you?**

## Polling Question 2

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**Does your organization currently use data to identify uninsured consumers?**

- A. Yes
- B. No

# First Panel Discussion

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- Why did your organization decide to start using data for outreach initiatives?
- Do you use different types of resources or specialized personnel to leverage data to drive outreach decisions?
- Does your organization use data to allocate and deploy resources on the ground?
- How does your organization use data to identify other organizations in the community that interact with targeted populations?

# Panel Discussion Takeaways

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Assisters can use data to:

1. Identify uninsured consumers based on zip code data
2. Identify community partners who have access to targeted consumers
3. Coordinate outreach and enrollment efforts with other assisters
4. Locate healthcare providers who serve uninsured consumers
5. Assess the consumers' level of health literacy and barriers to care
6. Identify trends and analyze changes over time

## Polling Question 3

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**What is the main obstacle preventing your organization from adopting a data-driven outreach & enrollment approach?**

- A. We don't know how
- B. We don't have the time
- C. We don't have enough resources or personnel
- D. We are currently using data to plan outreach

# Where to start?

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1. Identify target populations for outreach
2. Research extent and type of health insurance coverage in your service areas and the characteristics of the uninsured population in your service areas by key social and economic determinants
3. Examine/Investigate uninsured nonelderly adult workers by work status, occupation, and industry
4. Use available resources and tools to identify areas where target populations are located

# Data Sources to Identify Target Populations

- **American Community Survey (ACS) Population Demographics**
  - Poverty and Low-Income
  - Race and Ethnicity
  - Uninsured Rates
  - Age
  - Insurance Status
  - Non-Employment
  - Limited English Proficiency
  - Education
- **Current Population Survey (CPS) Annual Social and Economic Supplement (ASEC)**
  - CPS ASEC provides socioeconomic and demographic data on families and households
- **National Health Interview Survey (NHIS)**
  - NHIS provides data related to health insurance coverage, health status, health conditions, and use of services
- **Office of the Assistant Secretary for Planning and Evaluation (ASPE)**
  - Health Insurance Enrollment Projections for 2017
  - Uninsured Populations Eligible to Enroll for 2016
- **UDS Mapper**
  - Online mapping tool that displays relevant data on health, economic, and social factors at the zip code level
  - Allows entities to understand safety-net environment and community health needs

# Data Variables in the UDS Mapper

- **Population Data**
  - Poverty Level
    - Poverty < 100%
    - Low-Income < 200%
  - Race and Ethnicity
  - Insurance Status
  - Uninsurance by Income Level
    - Below 138% FPL, 2010-2014
    - Below 200% FPL, 2010-2014
    - Between 138-400% FPL, 2010-2014
  - Age
  - Social Environment
    - % of Population Not Employed
    - % of Households with Limited English Proficiency
    - % of Population with Less Than High School
- **Point location of Health Care Providers**
  - Federally Qualified Health Centers and Look-Alikes
  - Rural Health Clinics
  - National Health Service Corps Sites
  - Hospitals
  - Tribal Organization Facilities
- **Penetration**
  - Low-Income Population
  - Uninsured Population
- **Percent Change**
  - Yearly % Change in Uninsured Patient
  - Yearly % Change in Medicaid

# Benefits of Using the UDS Mapper

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1. Identify target populations based on geographic needs and vulnerable populations with input from stakeholders
2. Study churn to understand patterns/reasons for changing eligibility
3. Audience-specific messaging
4. Provide assisters with useful tools and resources
5. Identify social determinants of health that may be barriers to enrollment

# Second Panel Discussion

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- How has the UDS Mapper helped your organization to target populations and discover opportunities where education and outreach is needed?
- What are some of the main challenges you first experienced when learning how to use the UDS Mapper? What best practices helped you to overcome those initial hurdles?
- What other data or resources does your organization use to target new consumers? For active re-enrollees?

# Panel Discussion Takeaways

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## How can assisters use the UDS Mapper?

- ✓ Create service area maps
- ✓ Learn about uninsured consumers in their service area
- ✓ See where safety net providers who serve the uninsured are located in their area
- ✓ Visualize areas of uninsured growth or loss of coverage
- ✓ Identify consumers' work status, occupation, and industry
- ✓ Use data to strategically plan hiring, allocation of resources, and outreach & enrollment events

# Polling Question 4

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**After this presentation, are you more likely to use data to target populations in your service area?**

- A. Yes
- B. No

# Polling Question 5

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**Summarize what you learned today in only one word**

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