

Defining and Evaluating Consumer Self-Sufficiency Among Diverse Health Insurance Consumers

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◆ Grant Program

Blue Cross Blue Shield of Massachusetts Foundation *Connecting Consumers with Care*

- 16 Grantees : community-based organizations, public health agencies, and federally qualified health centers
- Oct 2013-Sept 2015
- \$80K each



◆ Goals

DEVELOP STRATEGIES IN 2 KEY AREAS

- Outreach & Enrollment (O&E)** help consumers access publicly-funded health insurance
- Consumer Self Sufficiency (CSS)** promote consumers’ ability to choose & use insurance, navigate health care systems and manage their care

◆ Reporting

- Grantee definition of CSS
- Target population for CSS efforts
- CSS strategies
- Process Measures to evaluate strategies:
 - Examples: # of consumers, # of workshops, # of materials distributed
- Outcome Measures to evaluate strategies:
 - Examples: Consumer knowledge gain, confidence & ability; Ability to apply new knowledge & skills
- Data Collection:
 - Examples: Survey-paper, phone; Intake Form, Checklist
- Changes made to CSS strategies
- Especially effective CSS strategies

◆ Technical Assistance (TA) to Grantees

ISSUES

STRENGTHS: CONSUMER FOCUS ON OUTREACH & ENROLLMENT

- Staff are:
- Knowledgeable about health insurance policies & procedures
 - Reflect the diversity of the community by race, ethnicity, culture, language
 - Create community partnerships
 - Meet with consumers at various sites



CHALLENGES: REPORTING ON CONSUMER SELF-SUFFICIENCY

- High consumer demand for assistance
- Complex, new insurance enrollment process
- New grant focus on CSS
- Difficult to develop process & outcome measures
- Barriers related to data collection

◆ Evaluation

- Assess progress made on select outreach and enrollment measures
- Characterize efforts and challenges in defining, promoting and evaluating CSS
- Mixed methods study design
 - Grantee reports
 - Semi-structured interviews

◆ Conclusion

- Grantees played a critical role in helping the uninsured gain health coverage
- Grantees provided strong evidence of effective grant program performance
- Challenges remained for some grantees:
 - no standard definition of CSS
 - difficulty operationalizing process and outcome measures
 - difficulty designing CSS measurement tool and collecting data

◆ Looking Ahead

New Grant Cycle: 2015-2017

- Refocus key areas
 - Enrolling the remaining uninsured
 - Reducing ‘churn’ (consumers going in and out of health coverage)
 - Increasing health insurance literacy
- Reduce total number of reports and reporting variables
- Continue TA

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TA RESPONSE

LEARNING COMMUNITY

- The BCBS of MA Foundation, MassAHEC TA team, and grantees
- Peer learning, share best practices, troubleshooting, and expert advice
- In-person meetings-statewide & regional
- Webinars
- Online (Groupsite)

INDIVIDUALIZED TA

- To increase grantee evaluation capacity
- Provided focused TA to **11** of the **16** grantees who needed to develop stronger outcome measures and/or data collection processes
- Site Visits
- Conference calls

INDIVIDUALIZED TA OUTCOMES

STATUS OF OUTCOME MEASURES & REPORTING	BEFORE TA	AFTER TA	
5 grantees had outcome measures not evident or not tied to CSS strategies, inconsistent or little data reported, received TA	5	2	3 grantees improved to yellow status
6 grantees had outcome measures not strongly tied to CSS strategies, received TA	6	9	6 grantees remained at yellow status
5 grantees had clear outcome measures tied to CSS strategies and reported data, no TA needed	5	5	No TA needed