

# Tell Your Program Story: NY's Community Health Advocates



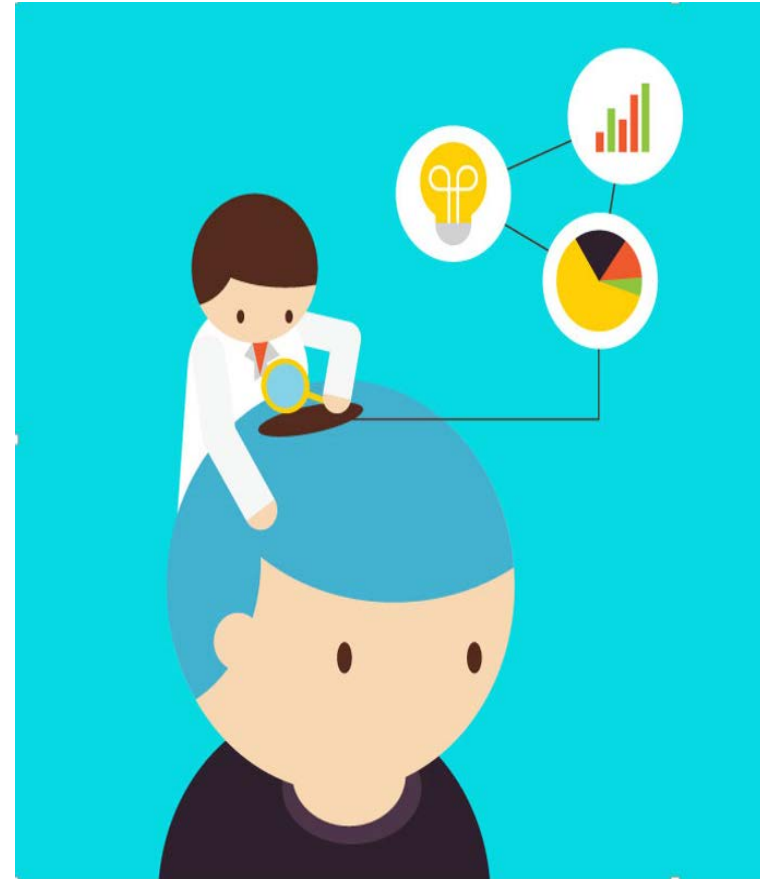
**Elisabeth R. Benjamin, MSPH, JD**  
Vice President, Health Initiatives  
Families USA Conference, January 26, 2018

# Outline of presentation

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How to use data:

1. to get funding
2. for reporting
3. to make policy changes



# Telling our Story to get Funding



# Tell them what you do by the numbers: CHA achievements since 2010

Since 2010, CHA has served as New York's statewide all-payer consumer assistance program with a live-answer helpline, a network of 25 community-based organizations and small business serving organizations, and three specialist agencies.



Assisted New Yorkers with **309,289** cases at local community-based organizations and small business groups



Assisted New Yorkers with **36,962** cases through a central live-answer toll-free helpline



Helped New Yorkers save more than **\$29 million** in health care and health insurance costs



Educated **105,341** New Yorkers about their health care rights and health insurance options through **4,830** community presentations

# Show them where you do it:

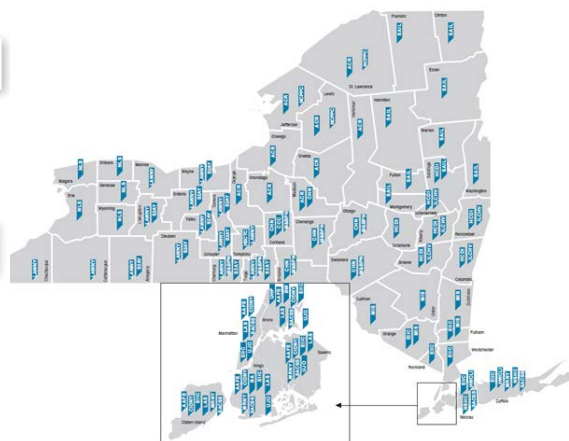
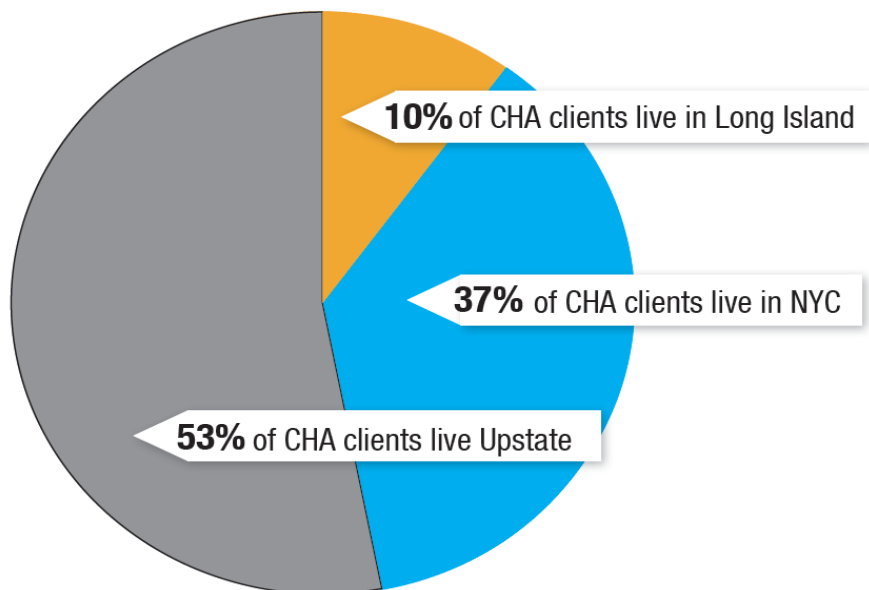
## CHA's services are provided through community groups and a live answer helpline



CHA provides culturally and linguistically competent services in over **23 languages**.



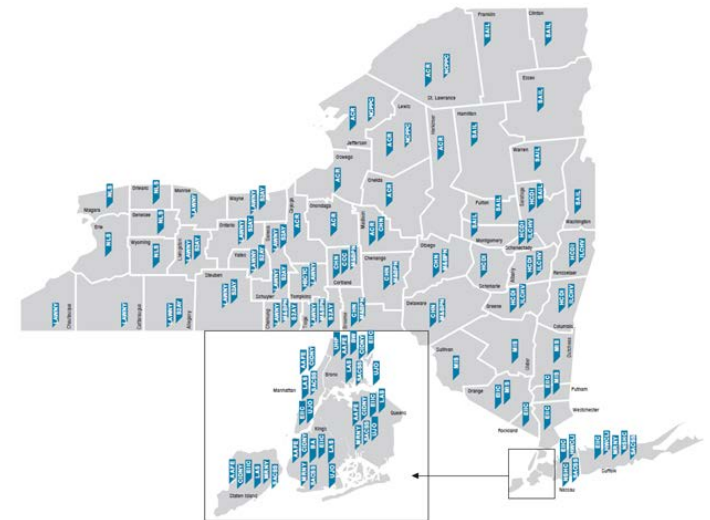
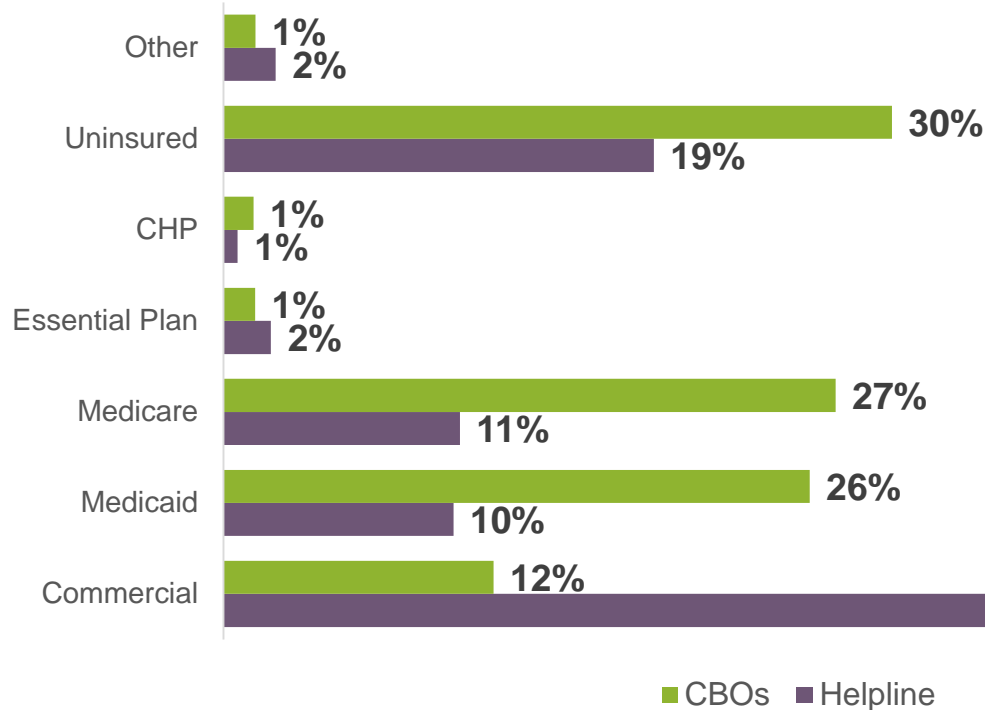
CHA's "hub-and-spokes" model serves **every county in New York State**: Community Service Society (CSS) is the "hub" staffing a live helpline for consumers to call for assistance; the "spokes" are 25 CBOs and three specialist agencies



# Use data to tell them how you do it:

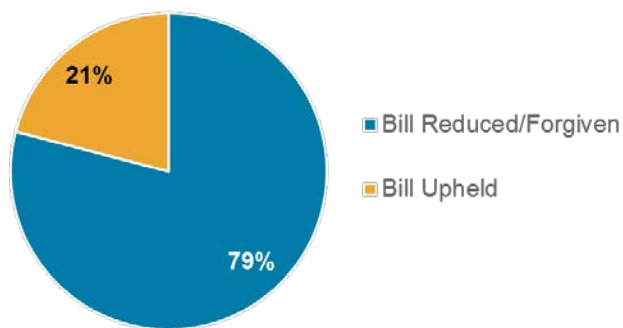
## Two paths for consumers to obtain services: Helpline and in-person help at CBOs and small business groups

- Medicaid/Medicare beneficiaries are more likely to seek services at CBOs
- Commercial enrollees are more likely to seek services over the phone

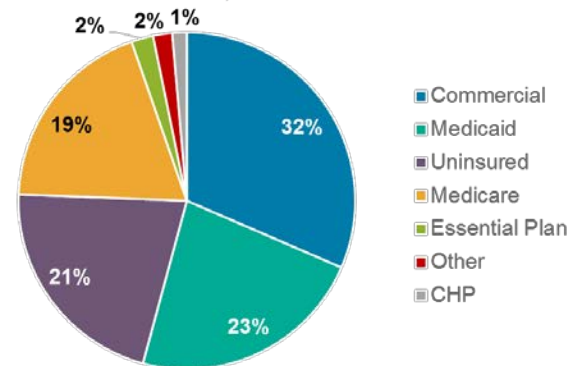


# Tell them what you do again: CHA successfully helps consumers reduce or eliminate their medical debt

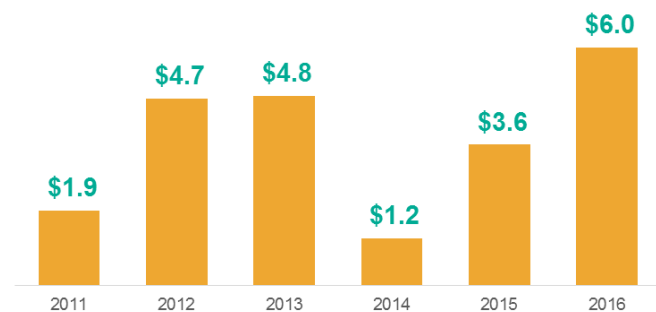
**Billing Cases by Outcome**  
n= 6,697



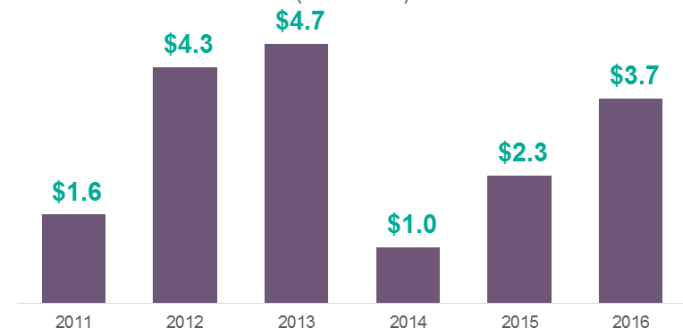
**Billing Cases by Insurance Type**  
n= 14,461



**Amount Saved in All Cases**  
(in millions)



**Amount Saved in Billing Cases**  
(in millions)





# Sustainability materials can integrate data: Annual Report, district maps, member-specific one pagers

## Community Health Advocates

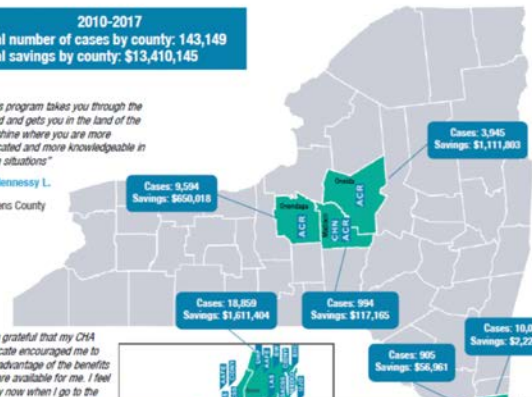
### Making Health Insurance Work for the IDC Districts

2010-2017

Total number of cases by county: 143,149  
Total savings by county: \$13,410,145

"This program takes you through the wood and gets you in the land of the sunshine where you are more educated and more knowledgeable in such situations"

—Hennessy L.  
Queens County



"I am grateful that my CHA Advocate encouraged me to take advantage of the benefits that are available for me. I feel happy now when I go to the hospital"

—Garrison R.  
Bronx County

Community Service Society  
Fighting Poverty  
Strengthening  
New York

"CHA helped clarify my benefits and put my mind at ease."

—Eathj K.

Onondaga County

"I would have never been able to do this on my own. My CHA Advocate was the only one who took the time to help me. My wife and I had not been able to sleep during this whole ordeal. Now, we rest a little easier."

—Kadri S.

Westchester County



## Community Health Advocates

### Member Voice for Health Care Access 2016 Annual Report

## COMMUNITY HEALTH ADVOCATES

### Making Health Insurance Work for Assembly District 4

CHA provided free individual counseling and educational community health insurance to individuals, families, advocates and providers in



10,653 consumers helped with health enrollment and access issues

296 consumers in need and costs



3,203 consumers educated about the health care system

In-person help offered by:

Health and Welfare Council of Long Island, Nassau-Suffolk Hospital Council, South Asian Council for Social Services, and Emerald Isle Immigration Center

## COMMUNITY HEALTH ADVOCATES

### Making Health Insurance Work for Senator Liz Krueger's District\*

\* The numbers below represent data for all cases handled in Manhattan.

Since 2010, CHA has provided free and unbiased in-person assistance and educational community presentations to individuals and small business about health insurance in Manhattan.



- 19,689 constituents helped with health enrollment and access issues
  - \$2,171,668 saved for constituents in health insurance and health related costs
  - 18,655 constituents educated about the health care system
- In person help offered by: Asian Americans for Equality, Center for the Independence of the Disabled, Emerald Isle Immigration Ctr, South Asian Council for Social Services, United Jewish Organizations of Williamsburg, and Legal Aid Society

## Real People, Real Impact

### Constituents Share Their Story

Fourteen years ago, Elia C. was diagnosed with Hepatitis C. An employee of the City of New York, he had long struggled to face his illness.

A CHA client informed Elia that Hepatitis C was now a curable disease, and urged him to seek help. Ready to begin treatment for this serious illness, Elia consulted with his doctor, who in turn explained the process and potential side effects of the medication that could cure him. However, Elia learned that his employer sponsored health insurance would not cover the medication that could cure him—and potentially save his life.

Elia met with a CHA Advocate who explained his options and helped him appeal the insurer's denial. Within weeks, the appeal was approved by the insurer, and Elia could begin taking his prescribed medication. In November, Elia received the test results confirming that he is cured of hepatitis C, and he and his family are ecstatic.

Community Service Society  
Fighting Poverty  
Strengthening  
New York

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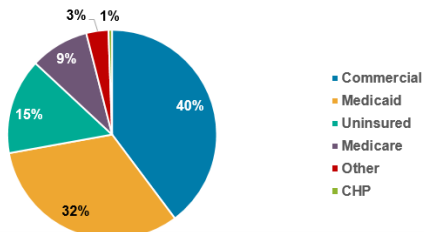


# Using data for a niche funding pitch: "CHA helps address the opioid epidemic!"

## The opioid epidemic is exacerbated by coverage issues

- CHA data show that demand for help with substance use disorder (SUD) services has more than doubled since 2013
- As an "all-payer" program, CHA helps people with a diversity of economic backgrounds and coverage types access treatment

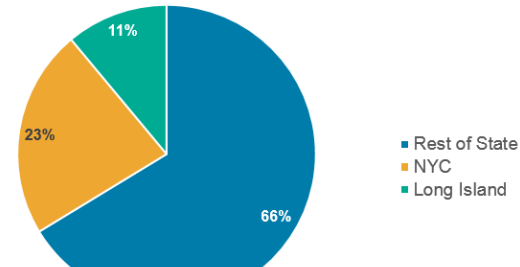
Substance Abuse Cases: Insurance Type



1

## Demand for CHA's assistance with SUD cases is highest outside of NYC

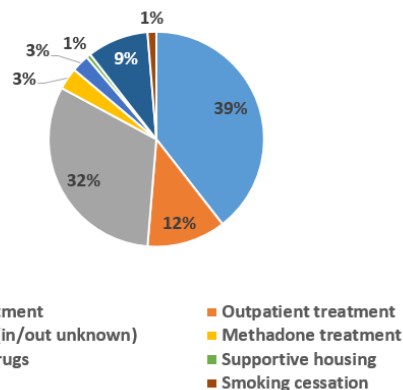
Substance Abuse Cases: Region



2

## More than 80% of CHA's SUD cases concern problems accessing inpatient and outpatient treatment

Substance Abuse: Needs

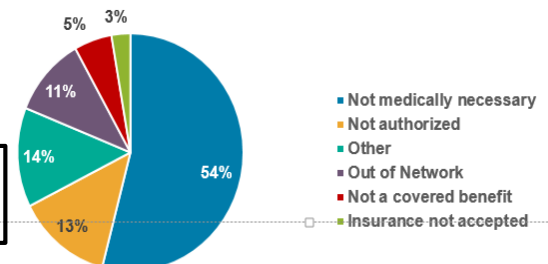


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## Consumers with SUD need more intensive assistance than others

- CHA's SUD clients are five times more likely to need help appealing service denials (25% of SUD clients v. 5% for all others)
- These cases involve complex parity issues
- Most consumers and CBOs are unaware of insurance parity laws

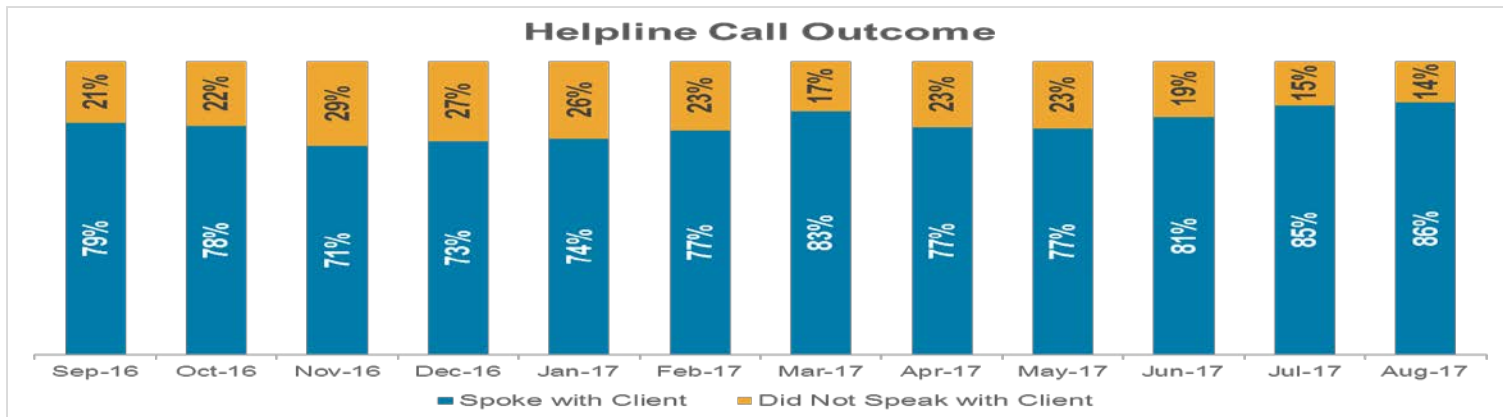
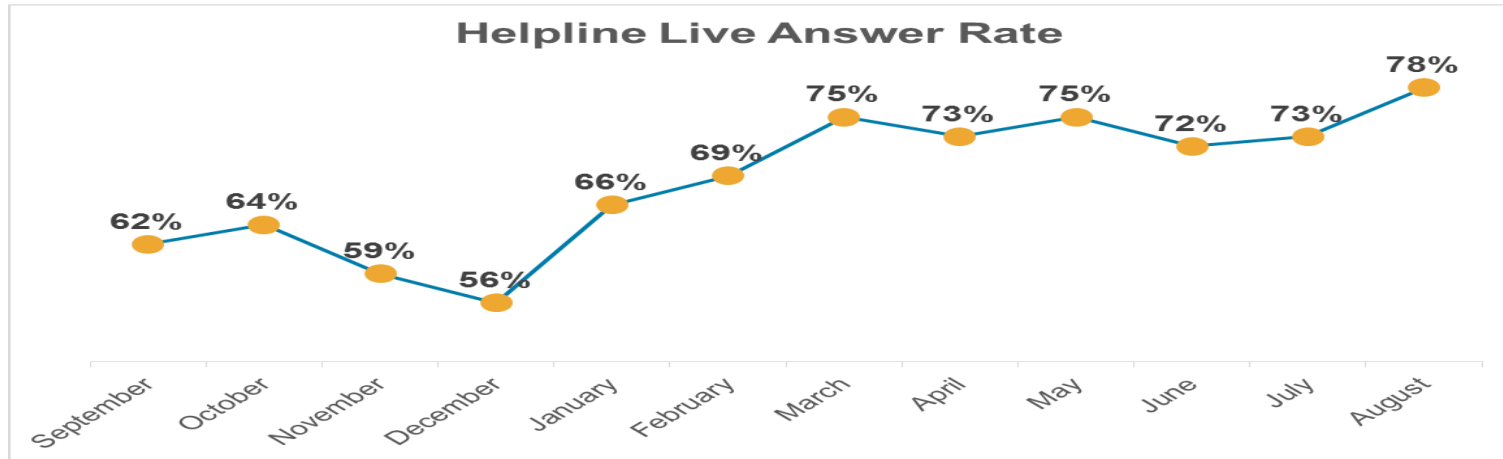
Substance Abuse Services Denied: Reason



4

# Say "Thank You!" with your data:

Additional funding received last year has helped CSS increase the helpline answer rate and call outcomes



# **Telling our Story to Report our Work to our State Contract Managers**



# Reporting & accountability: Help them realize your program's value & shower them with data & charts



## Community Health Advocates Activities July 1, 2017 – September 30, 2017

This report describes services provided by Community Health Advocates (CHA) between July 1, 2017 and September 30, 2017 with the generous support of the New York State Department of Health and the New York State Legislature.

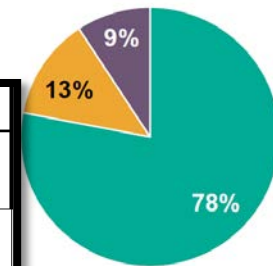
In 2010, New York State designated CHA as its Consumer Assistance Program (CAP) under §1002 of the Affordable Care Act. CHA is a network of community-based organizations (CBOs) and small business organizations providing direct consumer assistance to New Yorkers with health care rights. Leveraging diverse sources of funding, CHA has assisted over 100,000 cases since 2010.

CHA operates under a "hub-and-spoke" model, with CHA operating together with three Specialist Organizations (SOs), the Consumer Assistance Center (CAC), the Consumer Assistance Center (MRC), and The Legal Aid Society. Across the State constitute the spoke agencies: the live-answer Helpline, maintains the health care navigation and assurance. The spoke agencies represent the front line of consumer assistance.

This average of 2017 consumer satisfaction scores.

This report received: 300 identified; 800 their delivered.

## Individual Assistance Cases by Agency Type n = 6,474

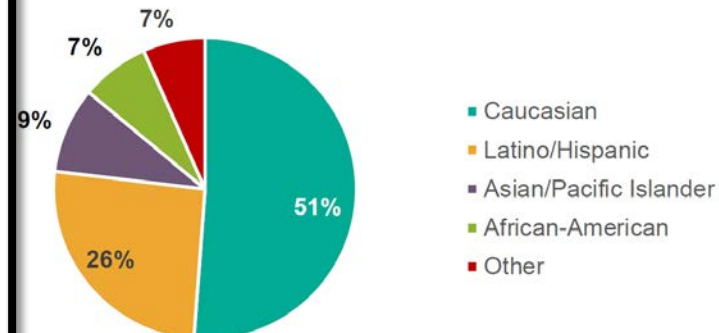


Legend: CBOs (Teal), Helpline (Orange), Specialists (Purple)

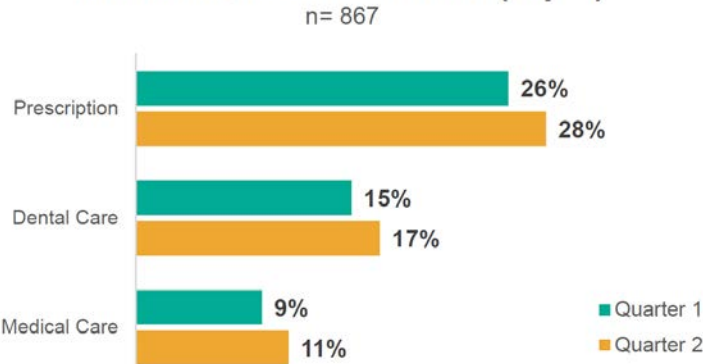
## CHA Individual Assistance Cases by County

County	Current Period	Since 2010	County	Current Period	Since 2010
Albany	157	3,804	Niagara	4	390
Allegany	25	938	Oneida	22	2,248
Bronx	634	11,064			

## Individual Assistance Cases by Race n = 5,054



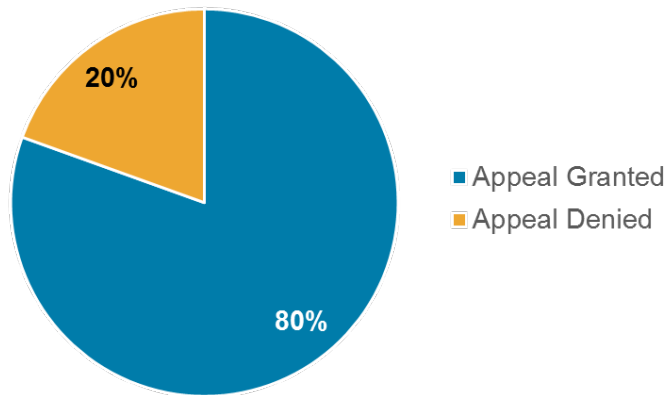
## Medical Service Needed (top 5) n = 867



# Explain how your program helps the funder help consumers:

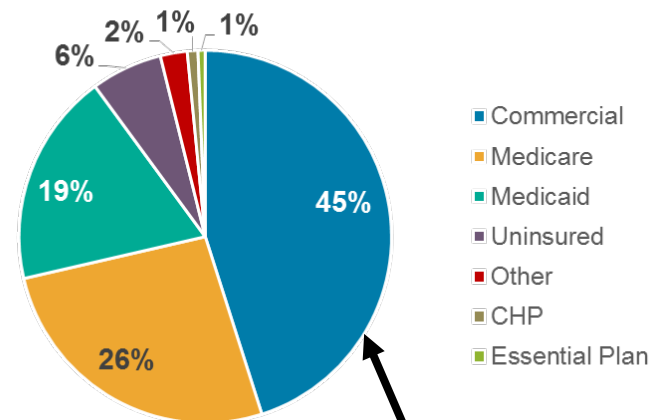
## CHA helps consumers win appeals to access the care they need

Appeal Cases by Outcome  
n= 1,261



CHA has also provided Do-it-Yourself packets to 2,207 consumers.

CHA Appeal Cases by Primary Insurance Type  
n= 8,704



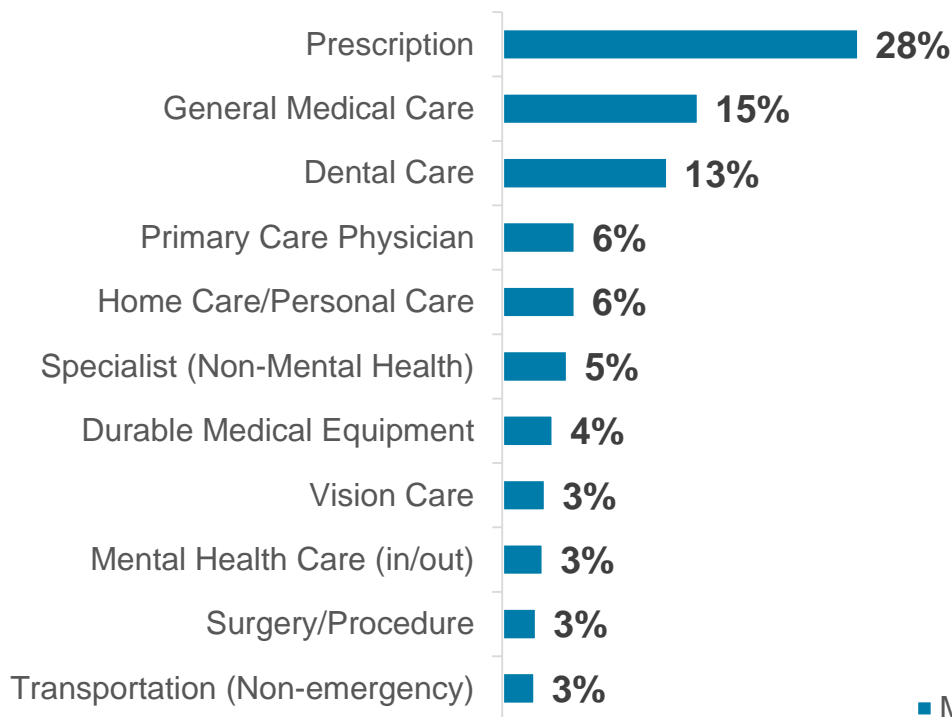
Commercially insured consumers disproportionately seek appeals assistance because CHA is listed on their EOBs.

# Explain how your program helps the funder help consumers:

## CHA helps consumers access medical services

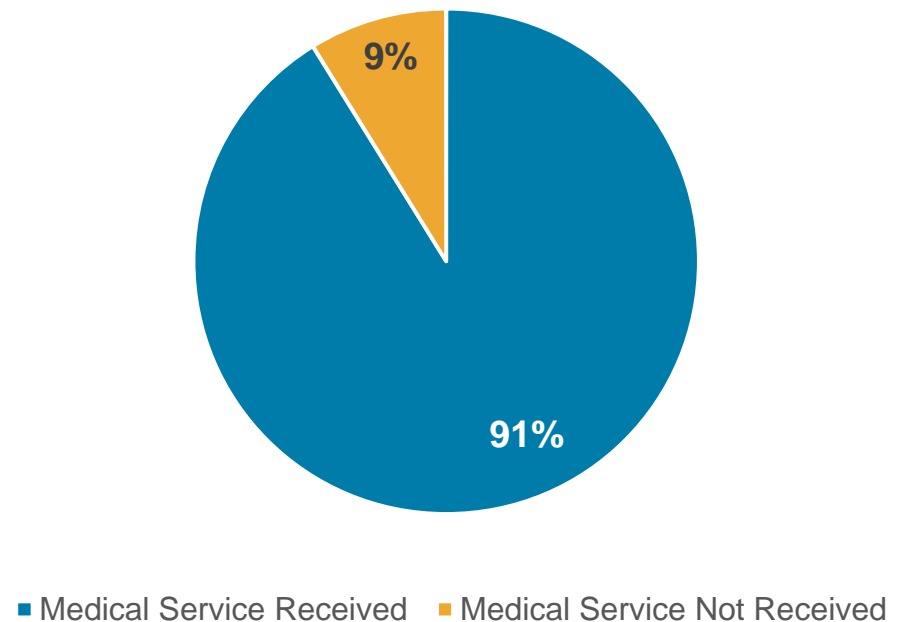
### Top Medical Services Needed

n= 17,060



### CHA secures medical services for our clients in 91% of its cases

n= 4,223





# Reassure the funder about your value: Consumer satisfaction with CHA services received through the helpline is very high

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## 2017 Client Survey

- **75** clients surveyed by CSS (13% of all calls received between 06/26 and 08/15)
- **90%** said their helpline worker was knowledgeable
- **84%** said the helpline worker was very helpful
- **87%** of participants were very satisfied with help received
- **99%** said they received help in a reasonable amount of time



# Telling our Clients' Stories to Effect Change



# Data can be used to identify systemic issues: 2014: NY enacts comprehensive “Surprise Billing” law CHA uses data to highlight a glitch

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- CHA reviewed 149 cases\* between March 31, 2015 to June 30, 2016 that involved:
  - Out of Network emergency and surprise bills (51%)
  - Plan and Provider network misinformation (39%)
  - Network adequacy (10%)
    - ❖ (e.g., consumer with cancer underwent treatment at a local hospital that was in-network last year. Now needs treatment again but hospital is no longer in-network. Network is limited such that she cannot get in-network treatment in her county).

\*We looked at 338 cases that involved out-of-network billing issues. 189 were issues unrelated to the out-of-network surprise billing law and misinformation about provider networks (e.g., coding issues, service denials).

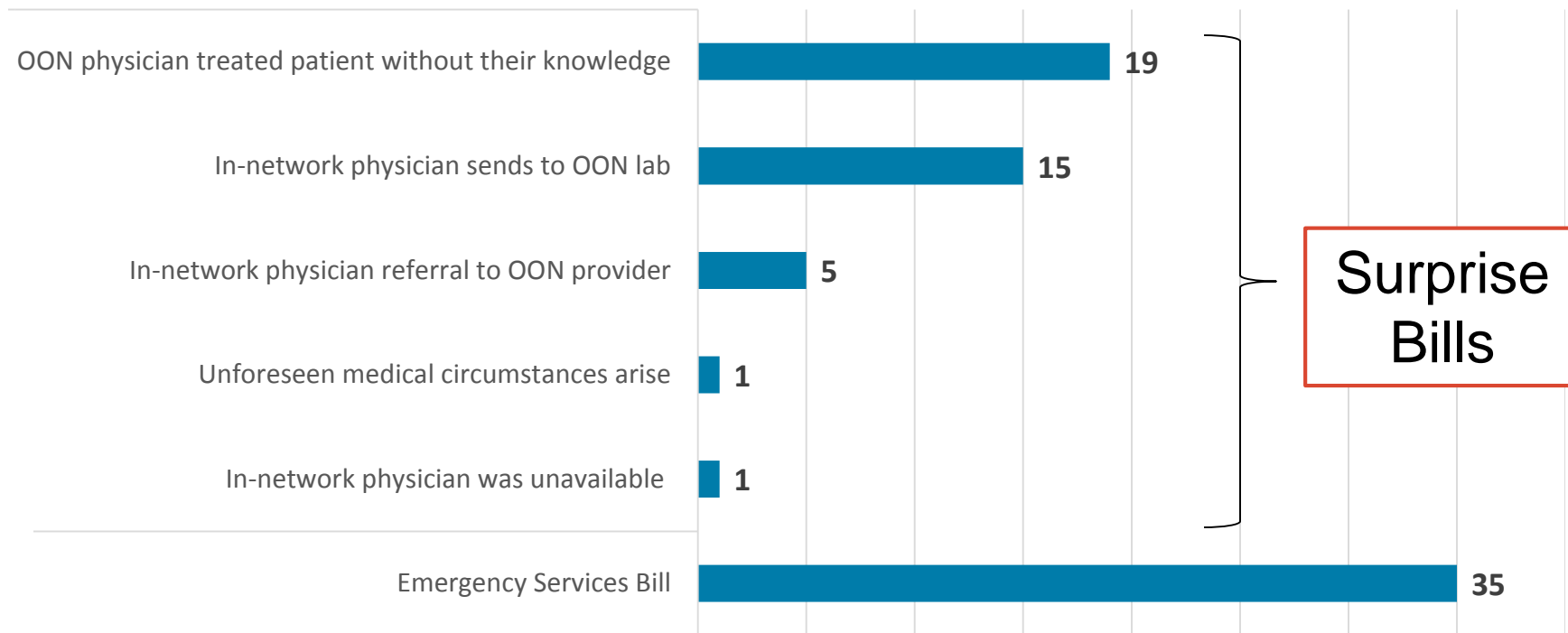


# Data and systemic issues:

## The law is working: 49% of our consumers had a favorable outcome!\*

### Emergency Services/ Surprise Bills by Category

n = 76



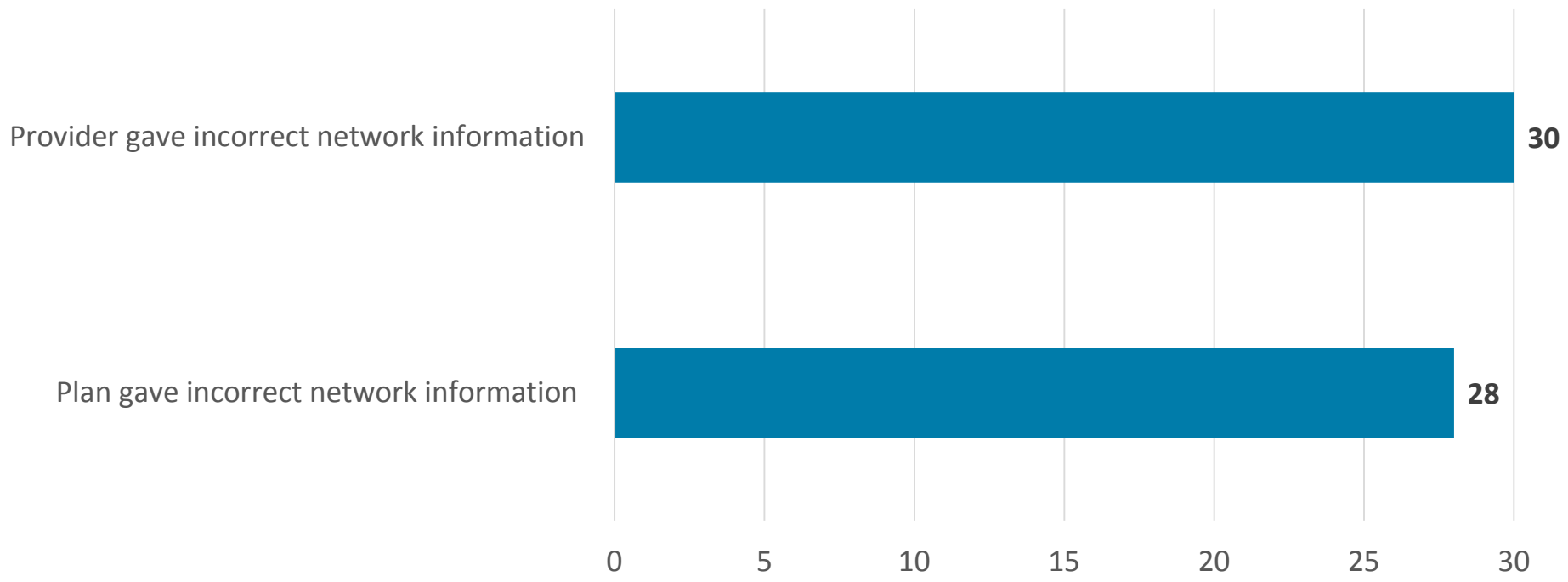
\*28% of consumers did not contact CHA to report the ultimate outcome of their case.



# Data and systemic issues: The Glitch: Misinformation about provider networks hurts consumers

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Network Misinformation  
n = 58



# Data and systemic issues:

## Field Study: Directory dispute protocols inconsistently adopted

CHA conducted two informal survey by calling 15 QHP customer service lines. The surveyor presented a situation where a member had received misinformation from the plan's provider directory. The surveyor then asked what the protocol was to remedy the situation. There appeared to be no standard protocol for many QHPs and policy appeared to vary by individual customer service representatives.

Plan Customer Service Resolves Misinformation	Plan Tells Consumer to Submit Claim and Follow Grievance Procedure	Plan Tells Consumer to Submit Appeal	Plan had No Protocol or Answer	Plan Tells Consumer to File DFS Complaint
<ul style="list-style-type: none"> <li>• HealthFrist</li> <li>• MetroPlus</li> <li>• Oscar*</li> </ul>	<ul style="list-style-type: none"> <li>• Empire BC</li> <li>• Empire BCBS</li> <li>• Excellus BCBS</li> <li>• Excellus Univera</li> <li>• Independent Health</li> </ul>	<ul style="list-style-type: none"> <li>• Affinity</li> <li>• Capital District</li> <li>• Emblem</li> <li>• North Shore LIJ*</li> <li>• United</li> </ul>	<ul style="list-style-type: none"> <li>• Fidelis</li> <li>• Wellcare</li> </ul>	<ul style="list-style-type: none"> <li>• United? (see slide 19)</li> </ul>
<p><b>Best Practice from Consumer's Perspective!</b> Members are held harmless!</p>	<p>Members <u>not</u> held harmless</p>			



# Making data real: Client story to illustrate the issue

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Wife called CHA to request assistance appealing a bill for an out of network provider listed as in-network. Wife selected a provider from United's provider directory. She checked with the provider's receptionist that the provider was in-network. But later the provider was determined to be out of network.

Wife received a \$750 bill from the provider. She called the plan's customer service and was told to appeal. She appealed, exhausting her internal rights. The customer service representative told wife to file a complaint with DFS.

The provider is still listed as in-network on United's website.





## For Further Information

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**Community Health Advocates:** [www.communityhealthadvocates.org](http://www.communityhealthadvocates.org)

- **Call toll-free: 1-888-614-5400**