Member Health Needs survey

How do you use the Member Health Needs survey results?

The care management department reviews the Health Needs Survey files daily. If any needs were identified by the Member, the survey is forwarded to a care coordinator. Care coordinators attempt to outreach the Member to assess for needs and to connect Members to resources.

Is this information sufficient or is there other information you wish you had from the survey?

The information in the survey is sufficient

Does your RAE use any other surveys in addition as an initial health assessment survey for Members.

Yes, care coordinators complete multiple evidence-based needs assessments that focus on social determinants of health (SDoH), medical and behavioral health needs and the cultural factors that impact overall access to care. Assessments identify engagement with Primary Care Medical Providers (PCMP) and other community resources and are continuously referenced to monitor progress with care plans and care coordination activities.

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Member Health Needs survey

Do you have any suggestions for improvement in the survey, process, etc.?

Not at this time Care coordinators complete an assessment/screener to help identify additional needs when they call the Member.

What is the survey return rate per new Member enrollment?

RMHP receives approximately 2-3 surveys per day on average

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Health Needs Survey
Performance Measurement and Member Engagement
March 23, 2023

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Health Needs Survey Process

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NHP receives HNS file

Distributed to Care Coordination

Outreaches newly enrolled member

If member opts in- triggered to complete initial health assessment

Connects member with resources and supports

Health Needs Survey Return Rate

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Overall return rate

Count of Member ID

BY YEAR, QUARTER

Year	Quarter	Count of Member ID
2021	Qtr 2	24
2021	Qtr 3	119
2021	Qtr 4	97
2022	Qtr 1	85
2022	Qtr 2	66
2022	Qtr 3	84
2022	Qtr 4	130
2023	Qtr 1	157

2023 Response Rates

Number of Members

BY DO YOU NEED HELP WITH OTHER HEALTH CARE NEEDS?

Do you need help with other health care needs?	Number of Members
	136
No	17
Yes	5
Total	**157**

Number of Members

BY DO YOU NEED HELP FINDING A PROVIDER?

Do you need help finding a provider?	Number of Members
	136
No	11
Yes	11
Total	**157**

Number of Members

BY DO YOU NEED HELP WITH MEDICATION MANAGEMENT?

Do you need help with medication management?	Number of Members
	136
No	14
Yes	7
Total	**157**

Number of Members

BY DO YOU NEED INFORMATION/EDUCATION?

Do you need information/education?	Number of Members
	136
No	15
Yes	6
Total	**157**

Health Needs Survey Opportunities

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Language/ Terms

Examples:

- "Doctor" vs. "Provider"
- "Preventing Pregnancy" vs. "Family Planning"
- "Taking medication regularly" vs. "Medication Management"

Be Specific

Examples:

- "Do you want any help in taking medications as your doctor recommends?" vs. "Do you want information on medication management?"
- "Would you like help in understanding your health care benefits?" vs. "Do you need more information or education?"

Force Response

A completed survey with a low response rate is more valuable than a high response rate with unanswered questions.

Make it relevant

- Pare down the questions
- Make it more relevant to the need

Health Needs Survey Benefits

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Quick tool to identify new member needs

Allows for care managers to go further in depth with member

Engage multiple members within household

With increased survey participation and more focused response, care managers could be more impactful in individual outreach

Questions/Comments

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ASHLEY CLEMENT, REGIONAL CARE COORDINATION MANAGER

ASHLEY@NHPLLC.ORG

R4 Member Health Needs Survey

3/23/2023

Member Health Needs survey results

How do you use the Member Health Needs survey results?

- We send this information to care coordinators as part of their monthly attribution and assignment process.

Is this information sufficient or is there other information you wish you had from the survey?

- HCPF uses a broker to complete the Health Needs survey but there are no requirements for members to fill it out. In the few cases that one comes to us most of the fields are blank. Therefore, the information is not usable or useful.
- We already have the information that is more often filled out.

Example of 3 recent surveys:

SurveyDate	Existinghealthcondition	Asthma	ChronicPain	Diabetes	Epilepsy	HeartDisease	HIV	HighBloodPressure	MentalorBeha
02/28/2023	Yes	Yes	No	Yes	No	No	No	No	No
03/01/2023	Yes	No	No	Yes	No	No	No	No	No
03/03/2023	Yes	No	No	Yes	No	No	No	No	No

OtherOngoing	Doyouneedhel	DoYouNeedInf	DoYouNeedHe	DoYouNeedHe	DoYouNeedHe	DoYouNeedHe	Areyoupregnant	WouldYouLikeInforma
No	No						No	No
No	No						Not Applicable	No
No	No						No	No

WouldyouLikeHelpWit	Housing	FoodAssistance	Transportation	Other	DoYouHaveADisability	AreYouFillingOutThisSu	GrowthOrDevelopment
No					Yes	No	
No					No	No	
No					Yes	No	

Learning	Behavior	Selfcare	Weight	ArYouConcernedAboutOtherHealthNeeds

What is the survey return rate per new Member enrollment?

Fiscal Year	**Completed Surveys**	**Avg. per Month**
FY19	201	16.8
FY20	404	33.7
FY21	268	22.3
FY22	381	31.8
FY23	408	45.3
Grand Total	*1662*	*29.2*

Does your RAE use any other surveys in addition as an initial health assessment survey for Members?

Care Coordinators use the What Matters Index (WMI) and Protocol for Responding to & Assessing Patient' Assets, Risks & Experiences (PRAPARE) as part of their standard intake process for all members engaging in care coordination.

The WMI is a validated risk assessment for future hospital or emergency room use. The tool's questions center around a member's self confidence in managing their healthcare.[1]

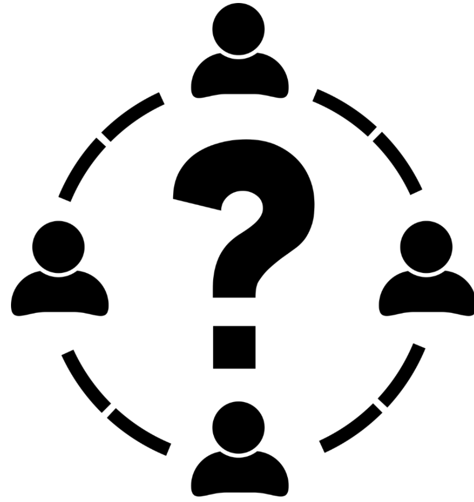
The PRAPARE is broadly used and accepted standardized questionnaire to assess social determinants of health.[2]

1:https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5823367/#:~:text=Five%20measures%20with%20well%2Ddocumented,and%205)%20adverse%20medication%20effects.
2:https://prapare.org/

Do you have any suggestions for improvement in the survey, process, etc?

We recommend HCPF or broker update survey to an evidence based, standardized, reliable or valid tool.

If survey continues to be used or offered, we suggest requiring certain fields.



Discussion
&
Questions

3/23/2023

Performance Measurement and Member Engagement

ACCESS MANAGEMENT SERVICES LLC

Colorado ACCESS

How do you use the Member Health Needs survey results?

- COA draws down files 2x a month on the 1st and 15th.
- Each member that responds, receives a phone call from a care coordinator. If they do not connect with the member, they will make a 2nd attempt. If 2nd attempt is unsuccessful, Colorado Access will send a letter in the mail stating we are trying to contact the member.
- When a care coordinator does connect, a care coordinator runs a question script asking about their needs – primary care medical provider (PCMP), vaccines, specialist, and Social Determinate of Health SDoH (food, transportation, utilities). The care coordinator will provide resources based on members expressed needs. If member needs extend beyond the care coordinators expertise, they will be assigned a Care Manager.

Referral for Services

Total Questions : 6

Member Details :
Name: [redacted]
Altruista ID: [redacted]
Date Of Birth: [redacted]
Home Phone: [redacted]

1 Do you currently have a Primary Care Provider that you see regularly
- ○ Yes-Visited in the last 6 months
- ○ Yes-Visited in the last 7-12 months
- ○ Yes-Longer than 12 months since last visit
- ○ No-No Primary Care Provider or Clinic

2 Do you need assistance locating Physical or Behavioral Health Providers, Dentists, DME, Pharmacy, or a Specialist other than a Primary Care Provider?
- ○ Yes
- ○ No

3 Do you require a resource for any of the following? (Select all that apply)
- ☐ Housing
- ☐ Transportation
- ☐ Food Assistance (SNAP,WIC,Food Banks)
- ☐ Utility Assistance
- ☐ Other
  Please provide details [ ]
- ☐ None

4 Have you gotten your annual flu vaccine?
- ○ Yes
- ○ No
- ○ Not applicable(allergy or other exemption)

5 Have you gotten your COVID-19 Vaccine?
- ○ Yes, have completed recommended series
- ○ Yes, but have not completed recommended series
- ○ No
- ○ Not applicable(allergy or other exemption)

6 Are you up to date with shots, also called vaccines or immunizations?
- ○ Yes
- ○ No

Performance Measurement and Member Engagement

- Does your RAE use any other surveys in addition as an initial health assessment survey for Members.
  - For newly enrolled RAE members, no. COA does implement other surveys across the organization to understand the member experience.
- Do you have any suggestions for improvement in the survey, process, etc?
  - Not currently, this survey it is capturing what Colorado Access is looking for.

Colorado ACCESS

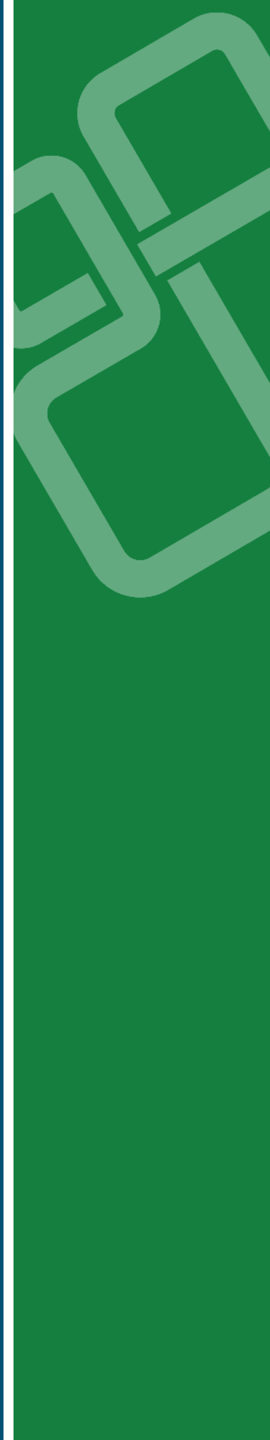
Program Management and Member Engagement

What is the survey return rate per new Member enrollment?

- On a monthly average, we received about 459.5 response to the Health Needs Survey.

Colorado ACCESS

Questions?



CCHA Member Engagement and Onboarding

Tony Olimpio

March 23, 2023

Agenda

- Use of the Member Health Needs survey results
- Feedback and Suggestions
- CCHA’s health needs survey and data
- Success with member engagement

Using Health Needs Survey Data

Outreach

- Before Feb 2023, we outreached anyone who initiated a survey to introduce them to CCHA and assess further for care coordination
    - Less than 5% referred to care coordination
    - 10% provided resources
    - Remaining members either didn't want help or were not able to be contacted
- Starting in Feb., refined outreach to members who respond "yes" to:
    - Q2 – Do you need help managing your conditions?
    - Q7 – Do you need help with other resources?
    - Q10 – Do you have concerns with other health needs?
        - Goal is to increase engagement rates/connection to care coordination by narrowing the scope
- Response rate
    - Typically see 150-200 per month
    - Roughly 5-10% of new members
    - Only about 25% of members who start survey state that they need help or resources

Using Health Needs Survey Data

Feedback/Suggestions

- Information is sufficient and aids in completing intake assessment
- Consider including PRAPARE or evidence-based SDOH questions (such as PRAPARE) to support risk stratification and population-level reporting
- Consider including a question about whether member wants follow up from the RAE and by what method – e.g. email, text, call (including member consent)
- Consider including a question about the member-identified goals. This could help improve member engagement outcomes
- Reducing number of questions may improve member experience and completion rates

CCHAs Health Needs Survey

Intake Assessment

- Completed by Member Support Services team
- Used to identify member needs, share basic resources, and appropriate CC referrals
- Includes the following:
  - SDOH screening questions – evidence based PRAPARE questions
  - Information about language barriers
  - Insurance information (besides Medicaid)
  - PCP and dental care history
  - Complex health needs
  - Health goals and priorities

CCHAs Health Needs Survey

Adult HNA, Peds HNA, Maternity Assessment

- All members with an open case complete an HNA with the CC and it's updated as needed
- The HNA information collected informs each member's unique care plan to help them achieve their health goals and improve outcomes
- Includes:
  - SDOH screening questions
  - Member goals, interventions provided, and interventions successful
  - Barriers to care and taking medications
  - Program disenrollment data by reason
  - Depression and anxiety screening
  - Condition specific information
  - Care team information
  - Updates since last HNA

CCHAs Health Needs Survey Data

Care Coordination Operations Dashboard

- HNA data used to develop CC ops dashboard which includes:
  - CC workload and outreach
  - CC trends
    - Barriers to care
    - SDOH needs and interventions
  - CC effectiveness
    - Were member goals met – why or why not?
    - Are members connected to their medical home?
    - Do positive depression and anxiety screenings result in a connection to BH?

Member Engagement

What have we found helpful to engage members?

- Mentioning frequently requested resources with members to get their attention and let them know how we might help
- Having a conversation to let members know that we can tailor interventions based on their needs and goals
- Explaining how attribution to a PCMP works
- Explaining where to go for what questions – e.g. billing, Medicaid Customer Service, care coordination, enrollment/attribution
- Timeliness of outreach is impactful - meeting members where they are at
- Text/IVR campaigns effectively increase inbound call volume by 25-50%, live calls are more effective for direct member engagement

Thank you!