



SWI Pop Up 1: Lessons Learned from Other States: Innovative Strategies for Finding and Engaging the Hardest to Reach MassHealth Members

Event Summary: The inaugural SWI Pop Up highlighted strategies for finding and engaging those individuals who are typically considered the hardest to reach. Panelists from Staten Island, NY, Contra Costa, CA, and the frontier communities of northern Minnesota traveled to Boston to share the successes and challenges of their work in this area. A total of 81 attendees from 8 ACOs and 20 CPs, as well as representatives of MassHealth, Abt Associates, and key MassHealth partners, joined us at the Roxbury Innovation Center for this kick-off event.

Speakers and Panelists

Introduction – Susan Dargon-Hart, LICSW, Massachusetts League of Community Health Centers

Moderator – Sarah Qin, Delivery System Investment Policy and Evaluation, MassHealth

Panelists:

- **Steve McNutt, M.P.A.**, Substance Abuse Program Manager at the [Contra Costa Health Services](#) (Contra Costa) in Martinez, CA.
- **Heidi Favet, CHW, B.S.**, Community Care Team Leader, and **Pat Conway, Ph.D., M.S.W.**, Senior Research Scientist at [Essentia Health-Ely Clinic](#) (Ely Clinic) in Ely, MN.
- **Joe Conte, Ph.D.**, Executive Director, and **Bill Myhre, M.P.A.**, Senior Director Workforce Transformation, at the [Staten Island Performing Provider System](#) (Staten Island PPS) in Staten Island, NY.



Key Themes:

Our panelists came from very different local contexts and organizational settings. Yet, a few unifying key themes emerged over the course of the panel discussion.

- **Meet people where they are at, both physically and in life:** Panelists emphasized the importance of showing up where clients are already comfortable, instead of expecting them to seek out services. Similarly, addressing peoples' personal goals first, regardless of whether they are medically-focused, can help to build rapport and trust, both initially and over a longer-term relationship.
- **Trust is critical to initiating access to healthcare and other social services:** All panelists underscored that building a foundation of trust is the most essential component of establishing relationships, as well as a powerful lever to facilitate connections to healthcare and social services.
- **Partnership can happen at any level:** Partnerships can form between organizations, among staff within an organization, and even between clients and staff. All of the panelists showcased how strong partnerships can help to strengthen engagement efforts, implement new processes, and help organizations expand their reach in finding individuals.
- **Open communication and information sharing support success:** Investing in communication channels and data sharing platforms can be challenging and time consuming, but these tools have helped panelists collaborate with partners to identify and better serve clients.

The term “hard to reach” is really from the perspective of the healthcare system – we should acknowledge that some people may not know we are even looking for them, and others may not want to be found.

- Pat Conway
Ely Clinic/EssentiaHealth

Specific Insights:

The panel discussion explored a few different aspects of member engagement work. Panelists described their unique approach and experiences, highlighting specific insights with potential relevance for MassHealth ACOs and CPs.



Strategies for finding the hardest to reach:

- **Starting the conversation:** Similar to the way in which MassHealth CPs operate from a list of assigned members, Contra Costa’s program uses an algorithm to identify high Medicaid utilizers and automatically assigns them to social case managers. Successful approaches for finding these individuals include:
 - Collaborating with local homeless shelters and emergency departments that contact the social case manager when a client shows up.
 - Distributing naloxone to clients to start a conversation or make a connection with someone, even if the individual is not ready to seek addiction treatment.

- Asking permission before entering an individual’s space or initiating a conversation is a sign of respect and an opportunity to build a foundation of trust.
- **The power of partnerships:** Staten Island PPS has made substantial investments in data analytics capabilities that enable them to regularly share and receive practical, actionable information, like homeless shelter rosters, with their partners in the community. Community partners include:
 - Local police departments to help Staten Island PPS connect with clients with behavioral health issues or opioid use disorder who are being detained in jail.
 - Public housing properties, where Staten Island PPS employs an embedded community health worker (CHW) to engage with individuals who may be disconnected from the healthcare system. Typically this individual is also a resident of that housing facility. This practice fosters trust and draws on the CHW’s shared lived experience with clients which can help build relationships.
- **No wrong door:** Ely Clinic employs a “no wrong door” approach to their partnerships with community-based service providers.
 - Ely Clinic stressed the importance of addressing the needs that clients self-identify first, rather than asking about the health issue that led to the referral. “Whatever the doctor referred them for, we hear that, but then we ask the client what they think they need.”
 - At times, Ely Clinic’s CHWs focus on the needs of other members of a clients’ family to help gain trust and make it possible to engage clients.

Capitalizing on Community Strengths:

- **Self-reliance:** Staten Island has a self-described “island culture” where their community needs to be self-reliant and develop “home grown solutions” to challenges. Staten Island PPS has invested in workforce training to increase the capacity of CHWs and build and strengthen this specific workforce. Recruiting and training local residents has not only filled a workforce gap but also fostered positive engagement with clients.

We heard a number of specific strategies that panelists have found help to engage these hard to reach individuals:

- Ask permission to begin an intimate conversation with potential clients.
- Partner with the Criminal Justice system to help find clients.
- Utilize peers as valuable allies in finding and engaging the hardest to reach.
- Use “carrots” – bracelets, water bottles, even naloxone – to start the conversation.

- **Loyalty and community:** Ely Clinic is an extremely rural frontier community with residents who are “fiercely independent and incredibly loyal,” and eager to come together to help one another despite any individual differences. This supportive community has allowed Ely Clinic to embed CHWs in a variety of settings from schools to churches.
- **The challenges of socioeconomic change:** Contra Costa is geographically large and socially, culturally, and economically diverse. Rapid economic growth has meant that the homeless and transient population is growing dramatically. Their team must continuously evolve their approaches and adapt to the area’s changing dynamics.
- **Capturing data on your success:** Successfully engaging hard to reach members can have a measureable impact on their healthcare utilization and health outcomes. Panelists talked about regularly tracking the impact of their work on healthcare utilization such as Emergency Department visits, hospital admissions and reducing “no-shows” to physicians’ visits. However, moving the needle on these outcomes can take time.
- **Limitations of data:** Panelists explained that the most impactful client goals, like reuniting someone with their estranged family, are not always quantifiable, which makes it difficult to capture the true impact of their programs.



Using Data to Measure Impact:

- **Capturing change at all levels:** Ely Clinic described the need to measure progress at all levels – individual, family, and community. They reported that measuring change at the family level is the most difficult but can also be the most important because a success with one family member may have benefits for additional family members.
- **Assessing process and outcomes:** Staten Island PPS noted that front line staff members are often omitted from how we measure and monitor change. It is critical to involve all levels of staff to fully assess impact.

Next Steps for MassHealth ACOs and CPs:

- Share your insights with us! Do any of these strategies resonate with you? Do you have other successful strategies that you might be willing to share? What additional information, tools, or resources might be helpful on finding and engaging beneficiaries with complex needs? Please let us know at MassHealthPopUps@abtassoc.com.
- Looking to use your TA dollars to work on member engagement? Please visit the MA DSRIP TA Vendor catalog at <https://www.ma-dsrip-ta.com/> to identify vendors who may be able to help you!
- Attend future SWI Pop Ups to learn more about member engagement strategies.



For more information about the organizations that participated in SWI Pop Up 1 use the links below:

- [Ely Clinic](#)
- [Contra Costa Health Services](#)
- [Staten Island Performing Provider Systems](#)