



Doing the right thing for Medicaid members: How health plans can prepare now for the end of the public health emergency

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With millions of lives on the line, we can't afford to get it wrong.

It's no secret that the impact of COVID was not experienced equally across different socioeconomic groups. If you were high income and able to work from home, it was a challenging experience, but it pales in comparison with those in lower income brackets. For essential workers and those with low-income jobs, COVID affected them in a dramatically worse way; **they experienced more severe illness and died at higher rates.**

Now, they are faced with a new challenge. With the unwinding of the public health emergency (PHE), an estimated **15 million Medicaid enrollees** will have to go through the redetermination process to see if they still qualify for coverage. Medicaid enrollment can be confusing in the best of circumstances, but if health plans are not prepared to guide members through the unwinding, it could create a new crisis.

Beyond redetermination, plans have historically struggled to connect with members and engage with them. During the unwinding of the PHE, a lot of communication will need to be delivered in a condensed period of time. How can plans get ahead of this and make sure they get it right for their members?

SameSky Health has done extensive research into how to engage members. It's not simply a matter of sending the same message repeatedly; rather, it's about sending the right message, in the right way, at the right time. In other words, it's about meeting people where they are and building trust to establish relationships with them. To do this, we recommend five steps to reduce coverage loss for Managed Medicaid plan members:

- **Step 1: Update your members' contact information.** Plans can't reach their members if they don't have the right information. Now is the time to ensure you have the correct mobile phone number and address for your members.
- **Step 2: Leverage text messaging.** The Centers for Medicare and Medicaid Services (CMS) is encouraging health plans to use text messaging during the unwinding of the PHE. It's the way most people prefer to communicate and there's never been a better time to use this technology.
- **Step 3: Know and understand members.** Build trust and gain a better understanding of each member's healthcare needs. This is an opportunity to begin providing members with a personalized approach that many other industries (e.g., entertainment, retail, etc.) are delivering through technology, analytics and human interaction.
- **Step 4: Guide members through the redetermination process.** A one-size-fits-all approach to redetermination isn't going to work. This will be a confusing and scary time for many Medicaid members and they will be looking to their health plan to help guide them through.
- **Step 5: Help keep members covered.** If a member no longer qualifies for Medicaid, they will still need insurance coverage. Helping members understand their options will be critical to helping ensure that they remain covered.

To learn more about our research and hear from members about what they want from their health plans, [watch](#) our Fierce Healthcare webinar with our Founder and CEO, Abner Mason, and our Vice President of Design and Strategy, Adam Radziszewski. And for more information on the steps listed above, [download](#) our playbook: Five steps to reduce coverage loss for Managed Medicaid plan members.