Targeted Outreach Strategies: Leveraging Community-Based Navigators in New York

NAIC Special Committee on Race and Insurance

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Outline

1. “Reaching The Five Percent” outreach project
2. Outreach strategies
3. Results, outcomes, and lessons learned
4. Appendix: Successfully leveraging community-based Navigators to collect race & ethnicity data
“Reaching The Five Percent” outreach pilot project

Funding localized outreach activities
The Affordable Care Act halved the number of uninsured, but over 1 million New Yorkers remain uninsured. Most eligible for public coverage or financial assistance.

Barriers are well-known:
- Enrolling in coverage is complicated
- Uninsured individuals unaware of programs that keep the cost of healthcare low or free
- Generic messaging does not always reach vulnerable populations

Time to try something new: Locally tailored messages from trusted messengers.
Project timeline

December 2020 – March 2021
• CSS awarded grants from Mother Cabrini Health Foundation and HFWCNY
• 16 counties in Western and Central New York identified as target areas for the program
• CSS procured 7 community organizations program partners $40,000 outreach grant

April 2021
• CSS established tailored outreach strategies and goals with each program partner
• Project launch meeting held with program partners

May 2021 – February 2022
• Monthly learning sessions fostered collaboration between program partners
• Best practices established for tracking enrollments as a result of targeted outreach
• Program partners adapted outreach methods throughout Year 1 as most effective strategies were identified

February – March 2022
• Funding from HFWCNY received for Year 2 of the program
• 5 community partners continued into Year 2 due to reduced funding
• Goals and outreach strategies established based on lessons learned in Year 1
Outreach strategies

Spotlight on one of seven community-based enrollers in the pilot: ACR Health
Outreach Strategies

- CBOs use a variety of outreach methods to reach diverse audiences.
- They share their efforts in a monthly meeting so that partners can learn effective strategies to reach more consumers.

Social Media
Flyering
Mass Texting
Local Bus Ads
Local Events
Catchafire
ACR Health contracted with a local Syracuse-based Ad agency called On the Move to assist with social media and paid advertising.

On the Move provided detailed statistics on consumer engagement for each type of media outreach.

**Average impressions per month:** 139,265  
**Swipe-ups:** 2,766

Overall CTR: 1.99%  
Campaign CPC: $1.13  
Viewable Rate: 7.79%  
Reach: 54,531  
Frequency: 2.6

**Video Views:**  
Video Views at 100%: 2,269  
Video Views at 75%: 2,835  
Video Views at 50%: 3,773  
Video Views at 25%: 6,235
ACR’s outreach strategy included ads in shelters at busy bus stops.

2 shelters garner 55,247 impressions weekly and 1,364,220 over 6 months.
Results, outcomes & lessons learned

Results and lessons learned
Number of consumers reached by month

Number of Consumers Reached by Month

total = 6,512,800

End of regular open enrollment period
Monthly enrollments as a result of locally-targeted outreach

Monthly Enrollments through Outreach

- CBO partners ask enrollees how they found out about their Navigator program during their intake process.
- The figures below represent the number of clients who said they found their Navigator through an R5 outreach method.

CSS | Community Service Society
Lessons Learned: Implications for the end of the Public Health Emergency

- Targeted funding for CBOs to generate tailored messages & conduct outreach generates enrollments

- Effective strategies include:
  - Radio, bus and TV ads
  - Mass texting & social media
  - Targeted postcard mailings
  - “Voicemail drops”
  - New partnerships

- Sharing ideas during monthly learning sessions spawns innovation across counties
Investing in community-based enrollers to conduct targeted outreach yields a strong return on investment

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<tr>
<td>Savings per capita</td>
<td>$1,174</td>
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<tr>
<td>Number of people enrolled</td>
<td>3,622</td>
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<tr>
<td>(annualized)</td>
<td></td>
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<tr>
<td>Total savings from program</td>
<td>$4,252,228</td>
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<tr>
<td>Total Program cost</td>
<td>$500,000</td>
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<tr>
<td>(annualized)</td>
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<tr>
<td>ROI</td>
<td>$3,752,228</td>
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<td>ROI %</td>
<td>750%</td>
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- $1,174 = Savings is based on the Urban Institute estimate of amount of uncompensated care cost savings in NY when people enroll in insurance.
- ROI = Savings from program minus program cost.
- ROI % = ROI divided by program cost.
Appendix: Successfully leveraging community-based Navigators to collect race & ethnicity data
Making race & ethnicity “mandatory” data fields

• 2020: Renewed urgency to focus on race & ethnic barriers to coverage
  - CSS’s Navigator program made race & ethnic mandatory fields
  - Enrollers must ask, but assistance is unconditional
  - Data used to revisit & tailor strategies to reach vulnerable populations with partners

• 2021: New York State of Health Marketplace makes race & ethnicity fields mandatory after successful pilot by CSS and Healthfirst health plan:
  - Jan-Feb 2021: Two-month pilot, data analyzed
  - October 2021: Rolled out to all NY enrollers
  - 2022: NY best state in nation on R & E data collection