



Coverage to Care

March 13, 2024





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CMS Office of Minority Health

CMS Office of Minority Health

The Centers for Medicare & Medicaid Services (CMS) is the largest provider of health insurance in the United States, responsible for ensuring that more than 150 million individuals supported by CMS programs (Medicare, Medicaid, Children's Health Insurance Program, and the Health Insurance Marketplaces) are able to get the care and health coverage they need and deserve.

The Centers for Medicare & Medicaid Services Office of Minority Health (CMS OMH) is one of eight offices of minority health within the U.S. Department of Health and Human Services. CMS OMH works with local and federal partners to eliminate health disparities while improving the health of all minority populations, racial and ethnic communities, people with limited English proficiency, lesbian, gay, bisexual, transgender, and queer (LGBTQ+) persons; persons with disabilities; persons who live in rural areas; and persons otherwise adversely affected by persistent poverty or inequality.





CMS OMH

Mission

The Centers for Medicare & Medicaid Services Office of Minority Health (CMS OMH) will lead the advancement and integration of health equity in the development; evaluation; and implementation of CMS policies, programs, and partnerships.

Vision

All those served by CMS have achieved their highest level of health and wellbeing, and we have eliminated disparities in health care quality and access.

Health Equity and Health Literacy

- CMS defines health equity as the attainment of the highest level of health for all people, where everyone has a fair and just opportunity to attain their optimal health regardless of race, ethnicity, disability, sexual orientation, gender identity, socioeconomic status, geography, preferred language, or other factors that affect access to care and health outcomes.
- Health literacy is a central focus of Healthy People 2030. One of the initiative's <u>overarching</u> <u>goals</u> demonstrates this focus: "Eliminate health disparities, achieve health equity, and attain health literacy to improve the health and well-being of all."
- <u>CMS Framework for Health Equity</u> Priority 4: Advance Language Access, Health Literacy, and the Provision of Culturally Tailored Services
 - Language access, health literacy, and the provision of culturally tailored services play a critical role in health care quality, patient safety and experience, and can impact health outcomes.

Coverage to Care (C2C) Overview

What is C2C? C2C aims to help individuals understand their health coverage and connect to primary care and the preventive services that are right for them, so they can live a long and healthy life.



C2C Resources

- 5 Ways to Make the Most of Your Health Coverage
- Prevention Resources
- Roadmap to Better Care
- Roadmap to Behavioral Health
- Manage Your Health Care Costs
- Enrollment Toolkit
- Partner Toolkit and Community Presentation

Visit go.cms.gov/c2c

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 About CMS > CMS Office of Mir 	nority Health 🔸 Health Equity Prog	grams > Coverage to Care			
CMC Office of Minerity	About CMS Office of Minority	Health Equity	Research and	Resource	Contact
CMS Office of Minority Health	Health	Programs	Data	Center	Us
		Programs	Data	Center	Us
Health	Health	Programs	Data	Center	Us
Health Coverage to Care	Health	Programs	Data	Center	Us
Health Coverage to Care C2C Consumer Resources	Health	Programs	Data	Center	Us

Chronic Care Management



How to Use Health Coverage

Roadmap to Better Care and a Healthier You



- Explains what health coverage is and how to use it to receive primary care and preventive services
- Includes consumer tools:
 - 8 Steps to Better Care
 - Insurance card
 - Primary care vs. Emergency care
 - Explanation of Benefits
- Available in nine languages, Tribal version, and a customizable version
- <u>Roadmap to Better Care and a Healthier You</u>
 <u>PDF</u>

Roadmap to Better Care (continued)

QUICK REFERENCE VIEW YOUR PATH TO BETTER HEALTH Step 6: Be Prepared for Your Visit Step 8: Next Steps After Your Appointment Have your insurance card with you. Follow your provider's instructions. Know your health history, such as previous Step 2: Understand Your Step 4: Find a Provider serious illnesses or injuries and when they Health Coverage happened, any known allergies to medications, given. Take them as directed. · Find a primary care provider who and past vaccinations, and family health history. takes your coverage. · Schedule a follow-up visit if you need one. Check with your health plan to see what services are covered (it may be in your Make a list of any medicines you take. · Check your plan's list of providers. Review your Explanation of Benefits to plan's handbook or website). Bring a list of questions and things to discuss make sure it's correct. · Ask people you trust who their · Know your costs (premiums, copayments, and take notes during your visit. provider is. You can also do deductibles, coinsurance). research on the internet. · Bring someone with you to help if you need it. Contact your provider or health Know the difference between in-network · If you're assigned a provider, plan with any questions. and out-of-network care. contact your plan if you want to change. Step 7: Decide If the Provider is Step 3: Know Where to Step 5: Make an Appointment Step 1: Put Your Health First **Right for You** Go for Care Tell them if you're a new patient or have been · Staying healthy is important for · Use the emergency department for there before. Did you feel comfortable with the provider you saw? you and your family.

- Maintain a healthy lifestyle at home, at work, and in the community.
- Get health screenings and manage chronic conditions.
- Keep all of your health information in one place.

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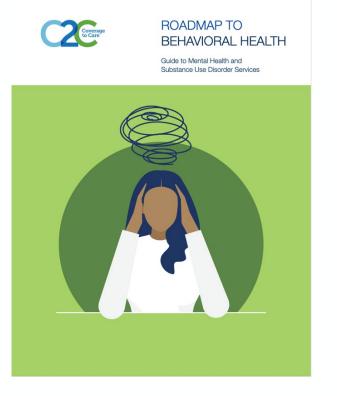
- Use the emergency department for emergencies and life-threatening situations.
- Primary care is preferred when it's not an emergency or lifethreatening situation.
- Know the difference between primary care and emergency care.

- Give the name of your health plan. Ask if they take your insurance.
- Tell them the name of the provider you want to see and why you want an appointment.
- Ask for days or times that work for you.
- Ask what you'll need to bring for the appointment.

- Were you able to understand your provider?
 Did your provider understand you?
- Did you feel like you and your provider could make good decisions together?
- Remember: it is okay to change to a different provider!
- If you want to change your provider, return to Step 4.

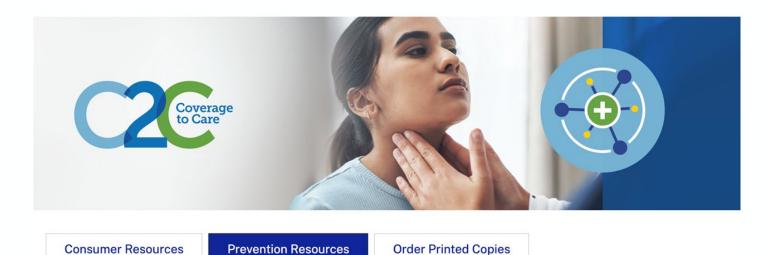
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Roadmap to Behavioral Health



- Offers information specific to mental health and substance use disorder services
- Use alongside the Roadmap to Better Care
- Eight Steps:
 - Understand your behavioral health
 - Learn about health insurance
 - Where to go for help and treatment
 - Find a behavioral health provider
 - Make an appointment with a behavioral health provider
 - Prepare for your appointment
 - Decide if the behavioral health provider is right for you
 - Stay on the road to recovery
- Available in eight languages
- Roadmap to Behavioral Health PDF

Prevention Resources



- The <u>Prevention Resources page</u> focus on prevention and healthy living to be shared with consumers, reposted online, printed, or ordered.
- All resources are available in eight languages.

- <u>Adults Preventive Services Flyer</u>
- Women Preventive Services Flyer
- Men Preventive Services Flyer
- <u>Teens Preventive Services Flyer</u>
- <u>Children Preventive Services Flyer</u>
- Infants Preventive Services Flyer
- Put Your Health First Tabloid

5 Ways to Make the Most of Your Health Coverage

Ways to make the most of your health coverage

Now that you have health coverage, here is what you can do to put your health first and live a long and healthy life.

- Quick reference material to start the journey from coverage to care
- Available in Arabic, Chinese, English, Haitian Creole, Korean, Russian, Spanish, and Vietnamese
- <u>5 Ways to Make the Most of Your Health</u> <u>Coverage PDF</u>

5 Ways to Make the Most of Your Health Coverage (continued)

1 Confirm your coverage

• Be sure your enrollment is complete. Contact your health plan and/or state Medicaid office.

• Pay your premium if you have one, so you can use your health coverage when you need it.



- Contact your health plan to see what services are covered, and what your costs will be.
- Read the *Roadmap to Better Care and a Healthier You* to learn about key health insurance terms, like coinsurance, and deductible.



- Select a health care provider in your network who will work with you to get your recommended health screenings.
- Remember you might pay more if you see a provider who is out-of-network.



- Confirm your provider accepts your coverage.
- Talk to your provider about preventive services.
- Ask questions about your concerns and what you can do to stay healthy.

5 Fill your prescriptions

• Fill any prescriptions you need.

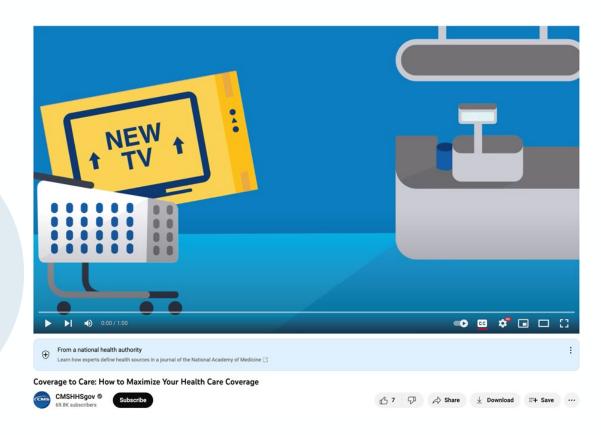
• Some drugs cost more than others. Ask in advance how much your prescription costs and if there is a more affordable option.

My Health Coverage At-a-Glance

PLAN Plan name	INFORMATION:		
Website	Phone number Other		
	KNOW WHAT YOU PAY FOR	CARE:	
	PREMIUM: The payment you make to a health insurance company or plan for your coverage. This is usually paid each month to keep your coverage.	Cost	
	DEDUCTIBLE: The amount you pay for health care services before your health plan begins to pay.	Cost Services I can get before I meet my deduct pap test, and colorectal cancer test, etc.	ble. This Includes preventive services, like flu shot,
	COPAYMENT (COPAY): A set amount	Primary care copay	Specialist copay
	you pay for a medical service or supply. There may be different costs for a doctor's visit, hospital outpatient visit, or prescription.	Prescription copay	Hospital copay
		Primary coinsurance	Specialist coinsurance
	COINSURANCE: A portion you pay as your share of the cost for services after you pay any deductibles.	Prescription coinsurance	Hospital coinsurance
	OUT-OF-POCKET MAXIMUM:	Out-of-pocket maximum	
	The most you pay before your plan starts to pay 100% for covered services in a plan year.	Enter current maximum and note if it include	s deductible and other costs,
	PREVENTIVE SERVICES: Routine	Cost	
	health care screenings, check-ups, and vaccines. For example, flu shots, depression		

- Created the customizable resource in direct response to requests for personalized information from consumers and partners
- Includes:
 - Plan information
 - Know what you pay for care
 - Know where to go for care
 - Dates to remember, notes
- Available in Arabic, Chinese, English, Haitian Creole, Korean, Russian, Spanish, Ukrainian, and Vietnamese
- <u>My Health Coverage At-a-Glance PDF</u>

How to Maximize Your Health Coverage

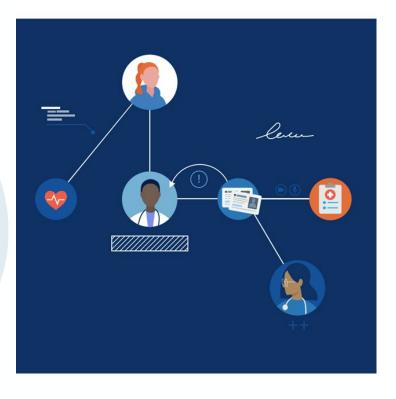


- Short animation series about how consumers can use their coverage to connect to primary care services
- Includes additional animated videos:
 - <u>Confirm Your Coverage</u>
 - <u>Know Where to Go for Answers</u>
 - Find a Provider
 - <u>Make an Appointment</u>
 - Fill Your Prescriptions
- Videos are available in English and Spanish
- How to Maximize Your Health Care Coverage
 <u>Video</u>

Enrollment Toolkit



ENROLLMENT TOOLKIT HELP CONSUMERS CHOOSE THE RIGHT PLAN



- Toolkit for community partners, assisters, and others who help consumers enroll in coverage or change their plan.
- Includes:
 - Coverage is important and affordable
 - Before choosing a plan
 - Know before you enroll
 - Next steps after enrolling
 - Information for consumers with special circumstances
 - Resources for other populations
- Enrollment Toolkit PDF

Manage Your Health Care Costs

Manage Your Health Care Costs



FROM COVERAGE TO CARE



 This resource is a series of tools for assisters and other community organizations that helps consumers understand health insurance costs and terms, their own specific health insurance costs, plan for health care costs, and how to pay their premiums.

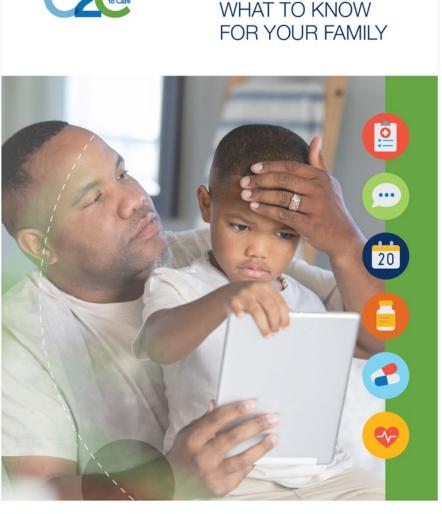
- Includes budget tracking as well as health care basics
- Manage Your Health Care Costs PDF



C2C Resource Updates

Telehealth: What to Know for Your Family

TELEHEALTH:

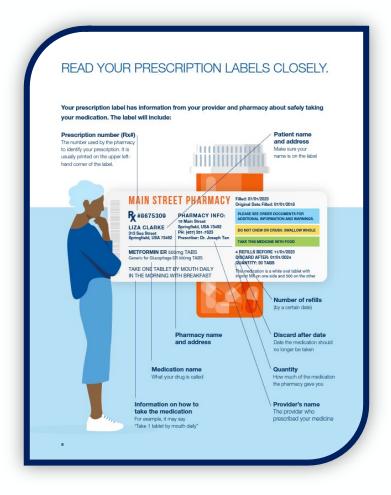


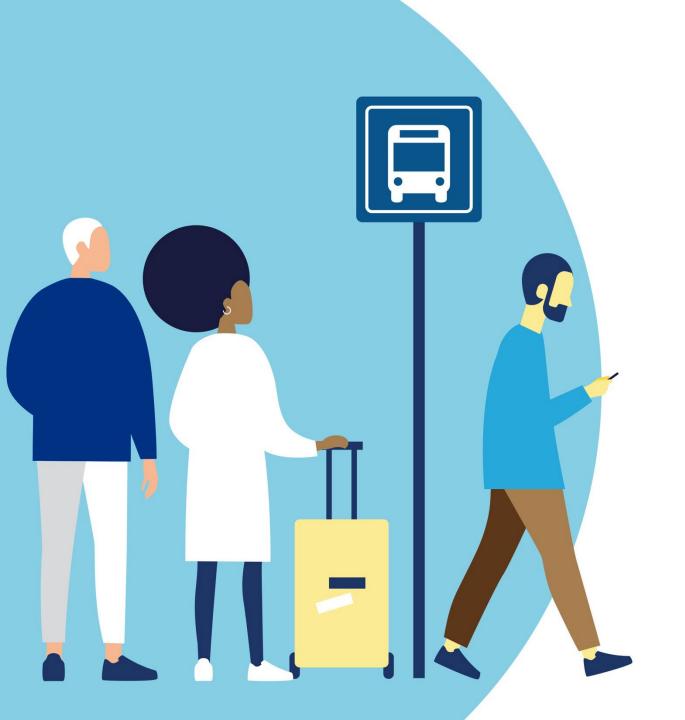
- Learn about the types of care, how to prepare for an appointment, what to expect, and more.
- Includes:
 - Telehealth basics
 - Types of telehealth services
 - Steps for using telehealth
 - Language interpreter information
- Available in Arabic, Chinese, English, Haitian Creole, Korean, Russian, Spanish, and Vietnamese.
- <u>Telehealth: What to Know for Your Family PDF</u>
- <u>Telehealth for Providers: What You Need to Know</u>
 <u>PDF</u>

Prescription Resources









How to Use C2C Resources

Using C2C Resources



Start the Conversation. Use the *Roadmap to Better Care* as a tool to help people understand their new coverage and understand the importance of getting the right preventive services.



Help Consumers Understand. The *Roadmap to Better Care* has a lot of information for consumers. You can help them use it as a resource to refer to as they journey to better health and well-being.



Personalize It. You know your community. Consider adding local resources and information.







Who in your community is using C2C resources?

- Congressional Offices
- Voter Rights Organizations
- Legal Aid Societies
- Colleges and Universities
- United Way
- State Health Insurance
 Assistance Program Counselors
- Primary Care Associations
- Dialysis Facilities
- Ryan White Providers
- Libraries

- Justice System
- Community Health Centers
- Hospitals
- Insurance Companies
- State and County Health Departments
- Area Agencies on Aging
- Tribal Organizations
- Assisters and Brokers
- Faith-Based Organizations





Partnering with C2C

Partner Toolkit



ABOUT COVERAGE TO CARE

Thank you for your interest in <u>Coverage to Care (C2C)</u>. There are many ways to get involved!

Why is this initiative so important?

In the United States, <u>16.2</u> million people signed up for coverage in the 2023 Open Errollment, allowing them to gain or renew access to the health coverage they need. Errolling in a health plan is only the initial step. The next step is to make the most of that coverage to maintain and improve health. Developed by the Centers for Medicare & Medicaid Services Office of Minority Health (CMS OMH), C2C aims to help people with health coverage, whether through an employer, Medicare, Medicaid, the Health Insurance Marketplace[®], or another type of health coverage, understand their benefits and cornect to primary care and to preventive services, so they can live a long and healthy life. As part of the initiative, CMS OMH has created several <u>resources in multiple languages</u>, free of charge to your organization and consumers, to help health coverage.

- High-level document offering prospective and current partners information on how to share C2C materials
- Includes:
 - Significance of the C2C initiative
 - How to collaborate
 - Downloadable and printable resources
 - How to plan a C2C-based event
 - Guide on how to draft written content
- English and Spanish content
- Partner Toolkit PDF

Partner Toolkit (continued)



Use the Partner Toolkit

- Ideas on how to get involved: C2C-based events to host in your community, sample text to use in a blog, newsletter, social media posts and graphics, and a web badge
- Available in English and Spanish

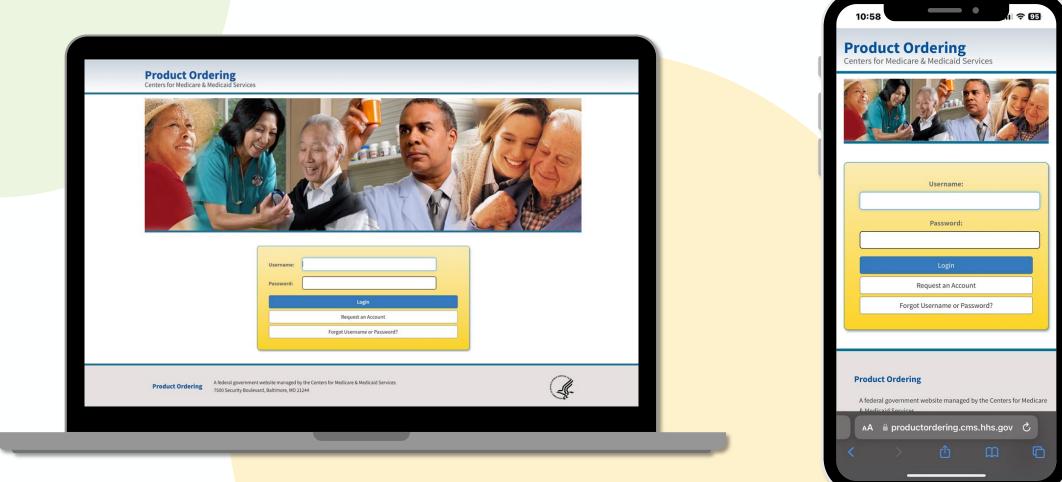
Use the C2C Community Presentation

- Overview of the *Roadmap to Better Care* with all eight steps, including slides, script, and a handout
- Available in English and Spanish

Order and share C2C resources at no cost to your organization.

Send stories to <u>CoverageToCare@cms.hhs.gov</u>.

Order Coverage to Care Materials



Visit productordering.cms.hhs.gov



THANK YOU

Visit our website:

go.cms.gov/c2c

Contact us:

CoverageToCare@cms.hhs.gov

OMH@cms.hhs.gov

C2C Listserv:

http://bit.ly/CMSOMH