

**From Coverage to Care: How to Use Health Coverage Webinar
January 30, 2020**

Alright, hi everybody, and thank you for joining today's From Coverage to Care: How to Use Health Coverage Webinar. The purpose of this webinar is to provide an overview of the From Coverage to Care Initiative and detail ways for partners to get involved in C2C. The webinar will include a question-and-answer portion for attendees to gain further insight and hear from each other. If you are a member of the press and you have questions, please e-mail press@cms.hhs.gov. So, now I will turn it over to Ashley Peddicord-Austin with the CMS Office of Minority Health to get us started.

Thank you, and thank you everyone for joining and having us today. We hope that this will be a helpful webinar for you. So, as you'll see on our agenda slide, we'll start off with a little bit of a welcome and talking about our office, and then we'll transfer into an overview of the Coverage to Care Program and how to help our consumers, whatever your population is, to make the most of their health coverage and talk about some of our resources, so for consumers and for you, that are available to help, and then we'll have time for questions and answers. And as you look through this webinar, if you have questions, think about, you know, jot them down or send them through the chat. You can send them chat or questions at any point, and, of course, we'll remind you that again later in the webinar. But also feel free to use the question-and-answer in chat as a way to share good practices with your colleagues.

So, on the next slide -- I'm sorry, one more slide. There we are -- the CMS Office Minority Health is actually the office that started the From Coverage to Care program. I, a lot of times, like to just pause for a moment to talk about our office to kind of frame our mindset of how C2C started and what we were thinking about during that time timeframe. So, Coverage to Care is for any type of consumer, any type of insurance. It applies to anyone, regardless of whether you are one of the populations listed on this slide. But if you look at those populations, you'll probably find that it's many of the same people that you are trying to reach out to and trying to help, and we could all use a little extra help in learning how to use our health coverage. But the office does have a lot of work and working to ensure that the voices and needs of all populations are represented in present in all that CMS does, so we just wanted to pause for a moment to recognize that as part of the history of the From Coverage to Care program.

So, on the next slide, this is sort of our overview, description in a nutshell of what C2C is. It's initiative of kind of putting our mission into action a little bit. So, we call it C2C, and it was created with the idea of helping people understand their coverage and then actually using it to connect mostly with primary care and preventative services and finding the services and providers that are right for them. So, again, it is for any type of consumer and any type of health coverage. We do try and keep it generic in that way so that it will apply to anyone anywhere in the country, and with any type of insurance. So, whether it's Medicare, Marketplace, Medicaid, employer coverage, you've been insured your life, whole life, or you're just new to insurance or maybe newly graduated, we hope that it can help everybody.

So, on the next slide we'll transition into talking about a little bit more detail about what C2C is and focusing on a few of our resource. So, on the next one you'll see the Roadmap to Better Care and a Healthier You. This is

our signature piece. And the roadmap is kind of the soup-to-nuts version on how to use your health coverage. And I'm going to give an overview of the resource today. But before I get into the detail of it, I just want to give you an idea what it is that we're going to be talking about. It explains what health coverage is and how to use it for primary care and preventive services. But this signature piece is what so many of our other tools was built off of. So, we have a poster and some consumer tools, and sample insurance cards, EOBs. All of them are part of the roadmap but also available as their own tools as well. You can see on the slide that we had eight languages, so the roadmap and all of the ones listed on this slide here are available in eight different languages.

Usually with CMS, you'll find things in English and Spanish, but we did add in six other languages as well, and those are Arabic, Chinese, Haitian Creole, Korean, Russian, and Vietnamese. And there is also a version that is for tribal populations, and a PDF that is on our website that you can actually go and add your own contact information or other local contact information to the inside cover. So, that's a little bit of an overview of the roadmap itself.

But if you look at the next slide, you'll see another page that's pulled out of that roadmap. We always like to show this slide, because, to me, it's kind of the visual of what the actual roadmap looks like, and you can see here where we lay out eight steps for consumers to take their journey to health, and they can start step one and go all the way through each step, or maybe they need to just focus right in on step four or need a little help with seven or eight. The roadmap is written and designed so that each step can be its own lesson, or you could take the whole journey together.

On the next slide we're going to actually go ahead and dive right into those eight steps. So, the first one, we labeled each of the eight steps and we're going to talk through today are those eight steps from the roadmap, and we'll put the name of the step at the top the screen so you can follow along. And, of course, obviously, start at one, so Put Your Health First. As a reminder, each of these is reflected in our roadmap, and you can find them throughout our website. But this is one that we really have a lot of materials on, because Put Your Health First is where we start talking about prevention and why health coverage is important in the first place. So, there are things that we can do both in and outside of insurance to help take care of ourselves and take care of our families. So, often with prevention you'll find that people will maybe worry about their family first and not worry about themselves, or they'll make sure their kids all have appointments, but their own health care is a bit neglected.

So, we always stress to people that it's important to stay healthy for yourself and for your family. We talk about what can be done, as I said, in and out of health coverage. So, what are some lifestyle ideas, some tips from a lot of our federal partners that would be able to help you keep up that healthy lifestyle? And then, of course, we talk about prevention, primary care and the many covered services that are available. So, at that point, once we established the importance of why we care about this in the first place and why we care about your health in the first place, we get into the more nitty-gritty of the health insurance itself.

So, in step two, which is on our next slide, you'll see where we start turning to those key health terms. So, this is called "Understanding Your Health Coverage." So, here's where we're going to really start throwing out

those terms to people. So, what's the co-pay, what's the premium, what's the deductible, and we offer definitions about what they are. A lot of times people will -- and we've found this in research and our own experience -- people say, oh, I know what a premium is, but then have a hard time actually defining what is a premium. So, you might have a general idea, but even if you don't know, we don't need to give our consumers a test or make sure that they've memorized all of this, but do they know how to find it? Do they know how to find out what is a co-pay, what is a premium, how do I figure out what mine is, do they know that part? And that's where we hope that this step will really help. So, in step two, we'll talk about what health coverage does, the basic of pay for provider services and medications, and that is for when we're sick and when we're well, just as we said with prevention. But then we also address not just co-pay and premium, but a few of those little bit -- kind of one or two, little bit trickier terms in-network, out-of-network, and how to approach those and know what those are.

So, on the next slide, you'll see an important chunk of step two, and that's the sample insurance card. So, most people get an insurance card from their plan, as you know, and it may or may not make sense sometimes. There's numbers on it that we don't really know what they are. Sometimes there is co-payments on it and we're not sure exactly what those are either, or what they're there for. So, this is a tool that you can use and walk through with people to help explain what each of those parts are.

If you're presenting to a group of consumers, or maybe you have a small group gathered at a library or some other event, you can kind of use this step to say, do you guy haves an insurance card, pull it out and let's walk through it. So, this is a tool that you use to can go through group number versus member number. Your plan type is usually listed on here, co-pay, and, of course, there's generally some sort of information about the insurance company and how to contact them.

So, the next part in step three, we transition from knowing a lot of key terms to knowing where are we going to go for this. So, we'd like to kind of use this also as a way to encourage appropriate ER and utilization of the Emergency Department. So, in theory and hopes this would also reduce costs overall, but also encourage a connection with a primary care provider. So, step three starts to talk about this difference, the difference between primary care and emergency care. This is a good place to also bring up urgent care. That's a very largely growing and very convenient option that a lot of people like to take, so it's a good time to address when that's appropriate as well. So, in step three, some of our key points are knowing some of those main differences. Obviously, you know, we make sure to tell people if it's an emergency or if it's life threatening, you would, of course, call 911. And then we kind of highlight some of the big differences between primary versus emergency care.

And to help us do that, you'll see on the next slide a chart that we've made to kind of outline those differences. So, primary care, you can go anytime, whether you're well or sick, emergency care, of course, you go when you're injured or very sick. Your primary care provider is going to have a particular co-pay. For prevention versus sick appointments this might be different. But the Emergency Department is likely going to be, of course, much higher, and you may have a deductible that may come up as well. The primary care, of course, usually call ahead and make an appointment. Sometimes it's planning ahead, sometimes for sick visits, you know, it's a little bit closer, versus Emergency Department, you, of course, don't need

an appointment, you show up any time of day. And then, of course, we also like to talk about the primary care you may be able to see the same provider each time, or at least you can try and request that. You can build that relationship with them and get to know them, and they can get to know you, versus in the Emergency Department, of course, you have whoever is on staff and available that day. And then we talk about health records. So, at this point in time, a lot of our primary care providers and hospitals are coordinating that, which is great, but it doesn't necessarily mean the case, depending on where the person goes.

And then once we started figuring out where to go for care and addressing the importance of the primary care provider, step four then focuses on finding a provider. So, now of course, not just a provider, someone who would take our coverage. And so, we really get into the importance of the role of a primary care provider here, and, in particular, one that you'll be able to go back to for most of your health problems. We explain that this is somebody who would help you with any screenings, preventative care, managing chronic conditions. Of course, if you are sick or think you have the flu or anything like that, you would see them as well. So, we talk about that kind of role for a primary care provider. But we do also bring up the idea of a specialist and bring up the term referral. So, a lot of times people know of a referral or some insurance plans have it, some don't. They don't necessarily know what that means, so we address that here.

On the next slide is where we talk about, actually, trying to identify how to find that provider. So, it seems like this might be obvious. But for some people, it's not necessarily. They may not have done this before. They may have just stumbled into a provider, or for some of our younger consumers, they just went to whoever their parents had gone to, and if you've moved, a lot of times this can be a little overwhelming too. So, we like to identify how we can find a new provider.

So, the first step for a lot of us is to see who does my insurance cover. So, you can use your member handbook, and usually these days the website from the insurance company to figure out who in your area would take your coverage. And a lot of the websites have some very good filters to help narrow your search. But there are other ways, kind of more traditional ways, or if you're trying to spend a little bit more of a realistic approach to it and real-life approach, you can ask around to friends and family. Co-workers are actually another really great place to ask, because a lot of times you have the same health coverage and live in the same area, so, if you're comfortable, co-workers can sometimes give good advice too. And then, of course, we want to focus on choosing our provider and giving them a try. So that's where we head with the rest of the roadmap.

In step five, you'll see just that, make an appointment. So, make an appointment seems like a pretty easy step that, you know, you might kind of want to skip over and glance over, because it's obvious; right? But it's not to everyone. So, we want to make sure that we actually are making that appointment, because it's one thing to have the health coverage and to say, hey, I should really go to the doctor, and it's another thing to actually go do it. So, without making that appointment, none of this matters in the first place. We've got to make sure people are really truly going to get those preventative services. So, this is where we talk about making the appointment and knowing what you're going to need to have ahead of time. So, obviously, you would identify if you're a new patient and provide your insurance information, your contact information. If you have a particular

provider you want to see, we encourage people to be sure to share that information. But we also encourage people to figure out if there is a specific need that they have, so maybe they need a particular language, translator, or they want to just be able to bring someone. They want to make sure that there's room for two people. Or maybe you need accessible medical equipment if you're in a wheelchair. You would think a doctor's office is always set up for people with disabilities, but that is not always the case. So, we like to make sure that somebody can bring this up ahead of time, and that will give ample time for everyone to prepare as needed. And we also say to consider the days and times that work best for you. So, again, it may seem obvious, but if you think about it, how many times you get on the phone with the doctor and they say the first appointment they offer you, you take that, and then you think about it later and you're like, oh, I've got to pick the kids up at that time, or I actually always have a meeting that I'm not supposed to skip at that time, so we like to think, you know, help people be their own advocate and think through what time is going to work well. Obviously, if you're sick versus the appointment you're making months in advance, that could be different. So, we hope that step five acts as a kind of a resource for people who are trying to make those first appointments.

And then step six, so once the appointment is confirmed, it's time to start preparing. So, we have a list here of things that you would want to bring with you. Obviously, your insurance card, that's always one of the first things they ask you for; right? They make a copy of your insurance card, your photo ID. A lot of times there's forms. I find myself at a lot of provider's offices are e-mailing the forms to me or asking me to sign up for a portal ahead of time. But I can tell you, the pediatricians office, every single time, those forms go into the junk e-mail, so every single time, there are forms that I have to bring or do ahead of time, so it's always kind of good to think about that. If you know the forms are coming, try and look out for them. And then, of course, bring in co-pay. So, maybe you're serviced zero dollars because you have a preventative appointment that day, but perhaps not, so you want to make sure you have cash or card or whatever format you need to use. And then we write "Showing up early." I have all been irritated by when you make an appointment at 1:00 o'clock and they ask you to show up 30 minutes ahead of time. But you have to grow to accept that. So, showing up early for appointments to do all those forms and providing the paperwork and everything can help ensure that you're getting your full time with the doctor or provider.

So, on the next slide, just a few more other key points that are kind of a good head's up for consumers, thinking about forms, unnecessary calls that might come up if they cancel too close to the appointment, and, you know, thinking a little bit ahead of time about who would you want to share health information with. So, if you haven't completed forms at a doctor's office in a while, it may come as a surprise about, you know, can they leave you a voicemail with this, what phone numbers can they leave voicemail on with this? So, this helps us think through some of those pieces.

And then just one more point on slide six, or step six, on the next slide, some questions that you can kind of prepare for yourself, and before you leave, can you kind of go through these questions? Do you have a good feel for what the doctor said about your health? Do you know what you need to do next if there's follow ups or a care plan or medications? Are you comfortable with everything that was covered and feel like you understand what happened? And it is always fine to ask for written materials that you

can take home or to write down instructions. I keep records seeing the pediatrician, because we go there all the time; right? But, you know, they'll rattle off a medication that you're supposed to be on, how much ibuprofen for a baby, and it varies every couple of months. I always make them write that down, because I can never remember by the time I get home. And the same thing for yourself, it is totally fine to write down websites or names of things that you need to look up or might want to remember later on. So, knowing this ahead of time can help us be prepared and be our own advocate.

And the next slide you'll see where we talk a little bit more about being your own advocate. So, step seven is where it's a little bit of time to kind of stop and reflect. And most people don't know that this is an option, but we titled step seven "Decide if a Provider is Right for You" because we want to make sure that people are comfortable and felt like they were respected and that they have a provider that they can build a relationship with and feel comfortable and trust in and like they're really going to be able to work together on their health. So, a lot of times, we'll just finish the appointment, and you say okay, great, back in the car, back on the bus and let's go home and get back to life. But it's not over when you leave the office. We want to make sure that a person is feeling comfortable enough to go back for prevention and sick appointments and any other needs that they may have.

So, on the next slide, we'll see where, in step seven, we lay out a list of questions for consumers. So, these are things for each person to think through after the appointment. And then if they answered yes to all of them, wonderful. Then, hopefully, it's the start of a longer-term relationship with primary care. But if any of the questions were no, then think about, you know, what changes would be able to help. Maybe it's a quick conversation with the provider's office, something simple with the office staff may take care of everything and help, or if it's a bigger issue or something that a couple small changes wouldn't be able to address, it's okay to consider going back and finding a new provider. Maybe it's a different provider within that office or maybe it's a totally different practice. But that's okay, and people won't be insulted. We do put in a caveat about how you'll want to confirm with the insurance company that you're not going back too soon, that you wouldn't have a surprise payment. But we stress the importance of this for our primary care health, and especially for behavioral health and how important it is you feel trusted and feel like you will keep going back to your provider and keep up the relationship and keep up your care plan.

So, then, finally is step eight, and this is the last step of the roadmap. And you'll see some of the key points on the slide here about that follow up and following through on those care plans and prescriptions and things that we've already mentioned. But we want to make sure that people are bringing attention to the idea of actually finishing those things, so maybe it's picking up your prescription, maybe there's a follow-up appointment or a specialist to go see. Sometimes there are quite a few next steps after an appointment. Or maybe it was just a prevention appointment and nothing came out of it, then the next step would be make your appointment for the next year, or you can also think about making sure any contact information is updated if you move, or any insurance changes, et cetera.

And on the next slide you'll see a few more key points for consumers. And you'll also see where we bring up the EOB. So, you go to the provider's

office and a couple weeks later you get an EOB in the mail. So, they can be alarming to some people, especially if you don't normally pay attention to them or you haven't seen one in a while. So, in step eight we do offer a sample EOB.

I believe that's on our next slide here. And that's where we talk through, kind of walk somebody through what is this document that I just got. And usually they do say pretty clearly at the top "This is not a bill." But it's easy to overlook that when you see all these costs listed there. So, step eight, and this particular consumer tool, is available on its own to help explain to somebody what an EOB and that this is a totally normal thing that is sent after each appointment. So, now that we've covered all eight steps, we're going to talk about a few other resources.

So, on the next slide we've listed a few of those. We have resources that are available for our consumers, and then we have some that are partner-facing. These are consumer-facing resources here, so you'll see the roadmap that we just talked about, and then a roadmap to behavioral health, and then we have a couple other shorter pieces, and we have a couple slides on this, and we'll go ahead and advance to the next slide.

This is a screenshot of Five Ways to Make the Most of Your Health Coverage. We heard from partners that, okay, the roadmap is great. It has a lot in it. As you can tell, you just heard the overview of it, and it look a little bit. But sometimes we just need something short, something small, front back, that we can go over with consumers and something tangible to hand them to start them off. So that's why we created the five ways to make the most of your health coverage. This one's pretty popular. I think partly because it is simple, and it's just front back, and it's also available in eight languages as well, and those languages are the same as before, listed on your screen.

And then the next slide, you'll see this is the reverse side of five ways. We called out the pieces that are the most important aspects of health coverage, so, if you just enrolled in a new plan, confirming your coverage. Did you get that card in the mail? That's usually a good sign that everything is taken care of and final. But in emphasizing to pay your premium each month, especially that first premium. But to keep it up each month, maybe through your employer or if you pay it directly, you want to make sure to keep it up every month. And then number two, knowing where to go for answers so in reference to the roadmap and where he with can find some of those tough key terms. Finding a provider, we call out again, as well as making an appointment, and then the last one is fill your prescriptions. So, we've identified as one of the biggest needs that people have. A lot of times they are in between health coverage or maybe waiting on a new plan and they have a prescription that needs filled, so we wanted to make sure that people are thinking about that as well.

And the next slide mentions some of our prevention resources. So, we said how step one, put your health first, is where we talk about prevention, so we have a lot of pieces that accompany that. There's a number of infographics that we have, but there are also flyers that are available, and you see one on the screen that's for adults. But we have that very same flyer customized for adults, men, women, children, infants, and teens. So, if you have particular populations that you focus on or you want to get a few of each. People seem to really like these because they focus a little bit on the individual and give some ideas about what the individual might

need. These, in general, are preventative services that most health plans are going to cover, which means the zero-dollar co-pay. So, we like to make sure to stress that to people, because that's really a good incentive to go ahead and do it, that they know they're not going to have a surprise payment through their doctor's visit. So, this is also a good tool that you can give to people to say, why don't you take this to your primary care physician, if you haven't had screenings in a while, and talk through with your provider about which of these might be right for you, which screenings you should maybe be getting.

And then the next slide, this is another area we always like to focus on just a little bit and we sometimes do entire webinars on, behavioral health. It is a big need and people really like having something to talk about with people and helping encouraging all people to recognize behavioral health as an important part of whole health and total health. So, our Roadmap to Behavioral Health is a companion piece that accompanies the larger roadmap that we just talked about. What this does is follow each of those eight steps, so kind of nuances to add in important information about behavioral health. So, first off, what in the world is behavioral health? Most people don't know what that term is, unless you're working in health care or an adjacent field and may not even know what that means, so we define it, and we define it also as a normal part of health care and something that we can all focus on and should all talk about. So, we talk about the different types of providers. So, our step four in the roadmap is find a provider. Step four of this roadmap is find a behavioral health provider. But we talk about how you can go to primary care or how you might like to go to a specialist, and there's a whole list of different types of behavioral health providers, so we talk about what the differences are between them, introduce those terms. So even though I helped write this book, I can't tell you without referencing it what clinical psychologists versus psychiatrists versus like the clinical social worker, versus blah, blah, et cetera, what all those different types are, so this is a good place to kind of reference for yourself of being able to look at those and talk through those. We also talk about the importance of a care plan, especially that step seven and step eight, and the connection and relationship to a provider and staying up on your care plan, and stressing that recovery is possible. So, we try and work through that whole journey for behavioral health. It is important to note that we worked with our colleagues in SAMHSA, the Substance Abuse and Mental Health Administration, to create this piece together, and so a lot of the resources and definitions you'll find are from SAMHSA, and we wanted to stress the importance of utilizing the care and making this a normal part of health care, a normal part of our conversation. And this is also available in Spanish.

And then the last resource I wanted to highlight is called "My Health Coverage at-a-Glance." This is one of our kind of newer pieces, and it was also created based on feedback from our partners. I like to talk about it especially in January, because January, a lot of plans, it's the new plan year, so you may have a different co-pay or deductible. You may be a different -- you know, your deductibles are reset and your out-of-pocket maximums, so there is a lot of information that can change year to year, so even if you know your plan and you've used it before, this can be useful. And so, the idea behind it is that we have the roadmap and people have insurance cards and they have websites for their plans, but very seldom do we find all that information in one place. So, what this does is take the key terms, like premiums that people are going use, offer a definition, and then allow a place for them to customize this and write in their own

premium. So, you'll see that on the slide here. We've received feedback from our partners about the pieces that they really wanted to know, and what they wanted to know and be able to include quickly for a consumer was information on their plan, what they're going to be paying, where they should go, and then a place for other dates and reminders. So, that's exactly what this piece has. It is a front-to-back. We were asked to do all those things, and we were encouraged to do it very small. But front to back on a normal sheet of paper is about as close as we could get. So, this piece is customizable, so there is a PDF that's on our website where you can type it in and then print it out, or you can, of course, order copies and handwrite it in as well.

On the next slide you'll see the reverse. So, the first half is knowing what you pay, and then the second half of the resource, the backside, is knowing where to go for care. So, the next slide you'll see that. And then we, again, have places to write in information for, like your provider's name, their contact information, and thinking about pharmacies and emergency departments as well, so you might have preferred one. It's nice to have all that written down, because when you are trying to find it, you might be a little under stress or in a hurry, so it's nice to have all this in one place. All right, so now it's time to kind of talk about your firm, and here, Coverage to Care, you know, we rely on our trusted community partners, because people out in the real world don't necessarily want to hear from me. But, hopefully, we find that they do want to hear from you all. So, we tried to make some tools for our partners, and I just also want to bring out the point that when we talk about partners here at C2C, every partnership is informal. Anybody can be a partner. You can use C2C once a year, or you can use it all the time. It is totally up to you how you can utilize it in your existing outreach efforts. If you take our resources and hand them out or you borrow the text and the language and borrow the toolkit language and things that we have, it's totally up to you, and we want you to personalize C2C for your community so that it works best for them.

So, we're going to tell you a little bit about some ways you can get started or get back into it if you haven't done C2C in a while. So, first off, our website, there's the URL at the top, and you will see that it's on the OMH page, but there is a lot on C2C. So, there's consumer resources, and we call out some of the biggest ones so that you can find them easily. And then one of the sub-pages is partner resources, and you might find that particularly helpful. As a reminder, you can order all our materials from the product ordering warehouse, which I'll get that site as well a little bit later. But everything, everything is a PDF online that you can print, download, e-mail, whatever you like.

So, on the next slide you'll see kind of how we like to frame our mindset when we talk about C2C. So, we like to try and start a conversation with consumers. The roadmap is a great way to do this because it gives you something to walk through, something to hand them that they can take home and have a physical reminder of all the points that you went through. But it does have a lot in it. It's pretty good, so it's helpful to walk through it with them, or another resource that you might hand them and help them refer back to it as part of their journey, and then as we already said, personalize it. So, you know your community much better than we do, so how will your message best resonate? Maybe you need to change a little language so that it makes sense for your state or your area. Maybe you work with a particular segment of the population or a particular health plan, and customizing it to your community, adding local resources or your own

information can really help make that information resonate and help consumers to actually motivate them to use their care.

And then on the next slide you'll see a few ideas about how you can get involved. So, there's lots of different ways you can become a partner. Maybe you just order the materials and you hand them out as part of your review or appointments or when you meet with people or go to fairs. You could utilize the community presentation, perhaps as a train-the-trainer resource, if you are trying to help your colleagues, or you could do maybe a brown-bag lunch at a library or maybe a meet-the-provider open house is one that I've heard before that's a really great idea, where people can share providers that are in the area and what types of coverage they take, and they'll have all that information at a fair and people that are accepting new patients.

Subscribing to our listserv to stay up to date on all the newest information or any webinars or events that we have, and then we always like to hear from you as well. So, some of the great things that we can do is when we get stories from our partners, we can share them with other people who are trying to think of how they are use C2C.

On the next slide you'll see a little bit more about how we are trying to have some helpful tools for you. The first one is our partnership toolkit. This is on our website. You can download it as a Zip file, and there's a screen shot of the PDF that talks about what C2C is and some ideas on how to use it. But it also includes written, already written, already approved information that you can copy and pay paste or edit, make it your own, whatever you like to do that you can put into a publication, a newsletter, social media, the posts and the graphics, and that is available in English, as well as Spanish. So, that is for you to use, and you, likewise, can do the same with the roadmap, and we're hoping it's a helpful way that we can support your outreach efforts.

And then we also have some information about ordering materials, and we have one more slide on that that we'll show you in a second. But, as a reminder, all materials are available online and in the warehouse, and many of them are available in up to eight languages.

We have a community PowerPoint presentation. This walks through the eight steps of the roadmap. It's very similar to what you just heard earlier today. But if you wanted to present it yourself, it is available on our website. So, the materials include the actual slides, as well as a script. So, this is already written. It's already done. You can take it and borrow it if you need just a step four or you need all eight steps, that is up to you. You can use it as you see fit.

And the next slide. So, when we talk about partnering, one of the things we've heard that works the best is when a partner finds another partner. So, there's probably a lot of people in your community that are trying to think about health coverage or something tangential to health coverage and how they can connect with consumers in a different way. So, we have heard of places of worship using C2C, and trying to work that into their message and talking about the importance of taking care of their body and treating their body like a temple, that sort of thing, and sometimes have partnered with others in their community that are focused on health care, maybe a health center or a navigator, perhaps a shift counselor in a library get together. There's lots of different possibilities out there. But there are people in your community who are working on this or would like to be working on this, so you can think through who might make sense. Maybe it's a university

system and a large healthcare center, or maybe a primary care provider that is looking for new patients, and an insurance company. There are lots of options out there, so we just wanted to show you this slide of people that we know are ordering our materials. These are all people that have used C2C before and recently. Someone in your community might be out there already using C2C.

And on the next slide, speaking of ordering the materials, you can see here the URL, the website for the product ordering website. So, if you order Medicare and You or you order any Marketplace materials or any other Medicare information, it's the same site. Anybody can create an account. It's free to create an account. You just have to give it a little time to verify it, and then you can login and use it just like you would any other online shopping, except there is no cost. It does not cost anything to order publications. It does not cost anything to ship them to you. So, you can order roadmaps for a health fair or five ways for appointments with new enrollees, whatever you like you can find on this site. And then, finally, we do have a listserv. You may have heard about this webinar from our listserv, if so thank you. If you didn't, please sign up so that you can hear about future webinars or any new materials. Whenever we have a new material or we add languages, we always send out a notification to let you know, so please sign up. And then, finally, this is our e-mail address, and you can please feel free to send us stories about how you were using C2C. If you have ideas of what worked well or what didn't work well, we'd like to hear that, and hopefully we can share those with other people as well. And at this point, I'll turn it back to Lauren.

Great. Thank you, Ashley. Alright, so now we will begin the question-and-answer portion of today's webinar. If you would like to submit any questions, please do so via the chat portion on your screen. You can submit it via chat or via phone, so if you would like to ask a question over the phone line, please dial 1 (415) 655-0052, and when prompted, you can provide the conference ID as 290056952 and we will send this out as an announcement so you can see it.

Please note that while we may not be able answer all questions submitted to the Q&A box, if you do ever have any further questions, you can contact the CMS Office of Minority Health at cmsomh@cms.hhs.gov. Okay. So, we have had a few questions come in over the chat box. One of them mentions that this presentation did mention materials available for tribal audiences, and they would like to know what the difference is in those materials specifically.

Sure. So, the one that's available for tribal audiences is the roadmap, that's the main resource that we talked about today, the Roadmap to Better Care and a Healthier You. And it only has a few differences. It basically just adds in some information and talks a little bit about particularly for the Marketplace, there are some different nuances and some helpful info for tribal, about where you can go, how you can get insured, and talking about different types of providers. So, it adds in a little bit to finding a provider and knowing where to go, as well as some Marketplace tips. There is one other resource that has some specifics for tribal populations and that is the enrollment toolkit. It's not a different version, it's just included in the toolkit as one page that gives some of the various differences for financial assistance, so it talks about that. So, those are the ones that differ or have a little bit that's specific to our tribal populations. And if you're looking for more and you needed to be connected to others here at

Medicare/Medicaid, there are other tribal organizations too. Feel free to send your info, and we'd be happy to connect you.

Great. Thank you. All right, next question says that it is hard to understand and know how much your insurance will cover when various procedures happen; for instance, if you were to go in for a checkup and the doctor finds something suspicious and takes a biopsy. So, in that situation, how you can figure out what everything costs and what you're meant to pay?

Right. So, this is where we can talk a little bit about the preventative services. We talked a little bit about this, because, you know, if you go in for a prevention appointment and then something else ends up coming out of that appointment, the preventative appointment itself might have a zero-dollar co-pay, but something else could have an additional cost. So, it depends on the providers, how they might handle this. Some might, while you're there, handle everything and then end up doing multiple billing. So, it is okay to talk about billing and ask providers about is there going to be -- is this covered or do I need to have an additional cost for this so that you're not surprised. And other providers will have people come in and make a separate appointment because that's how their time allotments go. So, it depends on the situation, so it can be surprising for people if they go and, all of a sudden, they're receiving this bill or an EOB, and there's unexpected costs. So, part of what you can do is checking out your plan or using one of our tools or just your insurance card ahead of time to look at, okay, my co-pay for this will be zero dollars, or maybe I have a \$20 co-pay, or whatever it is, and then referencing the EOB information that's in the roadmap so you can know how to read through that and look at that information as well. But we do encourage people -- you know, it's okay to have those conversations with your provider, and I think they hear everything from us; right? So, it's okay to ask them about costs as well.

All right. Great. Thank you. I do just want to clarify how to call in. What we provided earlier was the phone number to make sure you were dialed in. But in order to ask a question over the phone line; one, please make sure that you dialed in; and two, please make sure that you raise the hand icon on your screen. You can do so -- there's a little hand icon to the right-hand side of your GoTo screen, and if you click that, it will come up as green. When that happens, we can go ahead and unmute your line. So, if you'd like to ask anything over the phone or open up a more open dialogue, please feel free to do that and we will be on the lookout.

All right. So, your next question from the chat box asks how often does CMS OMH update materials to stay updated, i. e., The Seven Things Immigrant Families Need to Know About Marketplace Coverage in Spanish and other materials?

How often do we update them? It depends. So, The Seven Things Immigrant Families Need to Know is not one that I'm in charge of, so I can't speak directly to that one. But, in general, what we do, and I think what a lot of my colleagues in other offices do is, we kind of know which ones are written very generally, so like the five ways doesn't have much that needs updated. But the other resources, we periodically go through and check to see if all the hyperlinks work, because there are so many that we link to other resources, and we don't want to link somebody to something that doesn't update. But, more importantly, if there's any information about that's like, you know, in the plan year 2020, this is what this costs, or this is what the financial assistance limits are. So that type of resource would be

updated annually. Others are kind of as needed, or we will always accept feedback, so if you have ideas or thoughts, comments on any materials, we're always accepting comments and feedback, yeah, even if it's not immediately updated.

Great. Thank you. Alright, next question asks, what other kind of resources does CMS OMH provide to help with things outside of purely health coverage, such as urgent housing assistance or helping others in other hardship situations?

So, we don't have -- our office doesn't have any pieces on housing, but we do have a few other resources. A lot of my colleagues here in this office don't have much of a focus on a consumer-facing piece. They work a lot with partners and like the Medicare Quality Networks and things. But we do have one other consumer-facing piece that I want to call out, because I think it's a really great one that is relevant for a lot of C2C partners, and it's called "Getting the Care You Need." So that piece is kind of like its own roadmap but for people's accessibility almost. So, when we talked about the roadmap, we talked about when you make your appointment, talking to your provider about what you might need if you need a translator or you need some accessible equipment. So, what our office has found is that providers offices often aren't equipped to handle that without warning. So, the Getting the Care you Need Guide is something that's available for people to kind of help them think through what they might need, what they can request, and offering them some resources and making sure that they know their rights about what they can request.

Great. Thank you. Alright, next question is asking about the Ask Me 3 Campaign for patients seeing the doctor, and they want to know if CMS OMH is doing anything with the Ask Me 3 Campaign or anything similar?

In general, our C2C will sometimes partner with other federal offices to promote similar efforts. Sometimes it's as different as the My Money My Goal, such as CFPD. One time we talked about healthcare costs, they worked with them. We've done a lot with SAMHSA, the Office of Women's Health. So, we do sometimes partner with other agencies and other initiatives. The Ask Me 3, we have not used or talked with them today. But thank you for bringing it up and bringing it to our attention.

Great. Okay. Thank you. As a reminder, we do have about five minutes left, so if you'd like to ask a question, please feel free to submit in the questions box or raise your hand to ask a question over the phone line. We have a few questions about the materials and C2C partnerships. So, one, what do I need to do if I become a C2C partner?

Sure. Anybody can become a partner. You don't have to notify us or get approved or anything like that. It's informal, so one of the first things you can do is go to our website and figure out what materials that you might like that might be best for your population. You can download the partner toolkit to get a feel for where to get started, what you might want to highlight. And then ordering materials is another great place to start so that you have those available. If you have a listserv or a calendar of what you like to promote throughout the year, or, you know, ideas that you like to think, or to come back to any clients, people that you work with, then you can kind of work into that different pieces of C2C, be it like coming up on enrollment, talking about how to manage your costs, or after people have enrolled in your plan year, My Health Coverage at a Glance, and maybe

integrating that into your existing work. But it's totally up to the individual, and it's up to the individual community and organization how they want to use it, as much or as little as you see fit.

Great. Thank you. All right, next, can you clarify how much C2C publications cost to order and ship.

There is no cost to the organization. So, if you go online, it is shipped at no cost. There's no credit card or anything exchanged.

Okay. Great. And we do have a few questions asking, in general, where can they find C2C resources and materials, and what languages are they published in? Can you just clarify that one more time?

Sure. So the Roadmap to Better Care and all of those tools that go with the roadmap, so the sample EOBs, the sample insurance card, the primary care chart, and the Five Ways to make the Most of Your Health Coverage are all available in eight languages, and those languages are English and Spanish, Arabic, Chinese, Haitian Creole, Korean, Russian, and Vietnamese. And then most of the other resources are available in English, as well as Spanish, and the partner toolkit is available in English and Spanish, and the prevention resources are available in the several languages as well, in the eight languages. I think the only one that's only available in English is the C2C enrollment toolkit. But we do find that that one is probably better for partners anyway. But you'll at least find things in English and Spanish, including the sample language that is in the toolkit, that is available in English, as well as Spanish. And also, our animated video -- sorry. We have an animated video that is available in English and Spanish as well.

Perfect. Thank you. All right, we have about one more question in the chat box, and it's nearly 2:00 o'clock, so, again, if you do have a question, please feel free to submit it now and we'll try to answer it before the webinar closes. Otherwise our final question asks, how often can you place an order for resources during the year? Is there a limit?

So, you can order as often as you like through the product ordering website. Some of the resources throughout the website, you'll see are capped. That's basically so we don't unexpectedly wake up one day and there's zero publications. But you can go and place as many orders throughout the year as you like.

Okay. Great. Thank you. Alright, well, that looks like it's it for questions. So, Ashley, we will turn it back to you to close out the webinar.

Thank you. Well, on the last slide, I just want to make sure everybody has information about how to contact us. So a reminder about our website, go.cms.gov/c2c, and that is housed on the cms.gov site not Medicare or Medicaid, it's on the cms.gov, so please feel free to visit our website and sign up for our listserv to make sure you get some notifications about any upcoming webinars or new languages or new resources.

And finally, always feel free to reach out to us. If you have questions, you're trying to find something, or you have any ideas or things that you would like to share, please feel free to send us an e-mail to Coverage to Care. That's CoverageToCare@cms.hhs.gov, and I check that e-mail myself, so I will be sure to get back to you and try and get you some helpful information, or if you want to share stories that you would like us to share

on future webinars and with people who might be asking for ideas, we'd love to hear those as well. Thank you so much. Have a great rest of your day.

Great. Thank you, Ashley. This concludes the webinar, and we will close out shortly.