YOU’VE GOT MAIL! A SPOTLIGHT ON USING EMAIL TO SCREEN FOR HEALTH-RELATED SOCIAL NEEDS

Denver Regional Council of Governments (DRCOG), a community-based organization, is a participant in the Accountable Health Communities (AHC) Model. DRCOG partners with 16 clinical delivery sites to screen Medicare and Medicaid beneficiaries for health-related social needs (HRSNs) and provide community navigation services to eligible beneficiaries. This spotlight describes DRCOG’s approach to designing, implementing, and tracking the success of an email campaign to screen for HRSNs.

Innovation to improve HRSN screening rates

When the 2020 public health emergency limited DRCOG’s ability to conduct screening and navigation in person, DRCOG launched an email campaign (e-campaign) to conduct HRSN screening remotely. In November 2020, DRCOG began emailing beneficiaries who received care from the Denver Health System (Denver Health), DRCOG’s largest clinical partner. Beneficiaries receive a link to self-administer HRSN screening through an online survey platform on a smartphone, tablet, or computer. DRCOG reviews the data to identify and offer services to beneficiaries eligible for community service navigation to address their HRSNs.

E-campaign features for effective beneficiary engagement

Sending the email from “Denver Health Care Team” builds trust and legitimacy.

A warm subject line offering help encourages beneficiaries to open the message.

Using Denver Health’s logo and brand colors conveys that the email came from beneficiaries’ care providers.

Whenever possible, DRCOG emails beneficiaries in their preferred language, including English and Spanish.

DRCOG noticed a four-fold increase in the percentage of beneficiaries who disclosed a safety need via the e-campaign screening method (4 percent versus 1 percent) and believes accessibility on smartphones or tablets increases beneficiaries’ privacy while completing the screening.
Designing the e-campaign

**Who was involved?**

<table>
<thead>
<tr>
<th>EXTERNAL</th>
<th>INTERNAL</th>
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<tbody>
<tr>
<td>Denver Health</td>
<td>IT dept.</td>
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<tr>
<td>Shares beneficiary contact information and authorized the use of its branding, adding legitimacy to the email campaign.</td>
<td>Provided guidance on the options for a digital campaign.</td>
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**What are the steps?**

**E-campaign workflow**

**Step 1:**
Securely download beneficiaries’ data from clinical partner.

DRCOG downloads a beneficiary report from Denver Health’s electronic health record each month. The report includes name, Medicaid or Medicare ID, date of birth, age, sex, contact information, preferred language, date of last clinical visit, and primary care provider for beneficiaries that had a clinical visit in the last three months. DRCOG removes duplicates and those already screened in the last year.

**Step 2:**
Create a unique URL for each beneficiary.

DRCOG’s database manager creates a unique ID and link to the screening tool for each beneficiary.

**Step 3:**
Contact beneficiaries through the email marketing platform.

DRCOG uses Campaign Monitor to automate email delivery three days a week to about 500 beneficiaries a day.

**Step 4:**
Download screening results.

DRCOG matches screening results from the survey platform to beneficiaries’ information using their unique URL and creates a report that includes these data, the date the email was sent, the date the screening was completed, and fields to verify AHC Model eligibility.

**Step 5:**
Enter data into the system.

DRCOG divvies up the screening results report across three e-campaign navigators. The navigators manually enter data into the data system.

**Step 6:**
Verify beneficiaries’ eligibility and offer services to eligible beneficiaries.

Navigators review screening results and email customized community referral summaries to beneficiaries with at least one HRSN. Navigators call eligible beneficiaries to initiate navigation services.

**Monitoring process and outcomes**

Using data from Campaign Monitor, DRCOG tracks the number of opened emails, link clicks, screening response rates, and the relative timing of each action. Most beneficiaries who complete screening respond within 24 hours of receiving the email. DRCOG monitors the screening response rate and number of beneficiaries eligible for navigation and hires new navigation staff to accommodate volume. During the first two months of the e-campaign, the average response rate was 8 percent; 431 beneficiaries completed screening.

**E-campaign screening rates**

<table>
<thead>
<tr>
<th>Month</th>
<th>Completed screenings</th>
<th>Screened beneficiaries with at least one HRSN</th>
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<tbody>
<tr>
<td>Nov-2020</td>
<td>104</td>
<td>63</td>
</tr>
<tr>
<td>Dec-2020</td>
<td>244</td>
<td>174</td>
</tr>
<tr>
<td>Jan-2021</td>
<td>270</td>
<td>166</td>
</tr>
<tr>
<td>Feb-2021</td>
<td>427</td>
<td>283</td>
</tr>
<tr>
<td>Mar-2021</td>
<td>488</td>
<td>329</td>
</tr>
</tbody>
</table>

**Pro Tip: Ensure staff have the capacity to meet e-campaign demands**

DRCOG used existing navigation staff for the e-campaign pilot, but they could not keep up with the caseload. In January 2021, DRCOG hired three dedicated e-campaign navigators and took a hiatus from sending emails to new beneficiaries while onboarding them. DRCOG also reduced the number of beneficiaries receiving emails each day to ensure that completed screenings match navigators’ capacity.

**Next steps**

DRCOG is working with an external vendor to translate its e-campaign emails into Arabic and Eritrean languages to reach more beneficiaries. Navigators who are native Arabic and Eritrean language speakers provide input to ensure the translations align with cultural norms, and IT and data management teams ensure translated tools work effectively with DRCOG’s digital workflow.

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