

## Grant Outcomes Report

### Enroll NY Website Helps New Yorkers Find and Enroll in Health Insurance Plans

#### I. Executive Summary

To ease entry into insurance coverage for uninsured New Yorkers eligible for public insurance, Hudson Center for Health Equity & Quality (the Hudson Center) developed a Web-based, self-service insurance tool. The Hudson Center began using the tool in New York City and the lower Hudson Valley, and expanded the application for use statewide. By going online to EnrollNY.org, uninsured New Yorkers can learn about coverage options, determine their eligibility for public insurance, and begin the application process. The tool streamlines the largely on-paper enrollment process and paves the way, ultimately, for a paperless one.

According to the Hudson Center, in 2009—the year following the end of the grant—an estimated 1,055 new enrollments were made through this system.

#### II. The Problem

At the start of the grant period, United Hospital Fund estimated that 1.2 million New Yorkers qualified for a variety of State health insurance assistance programs—among them, Medicaid, Child Health Plus, and Family Health Plus—yet were not enrolled. With the enhancement of Child Health Plus in September 2007, another 320,000 people were added to the eligible population, according to the Hudson Center. However, many eligible individuals are not aware that they qualify for free or low-cost health insurance.

To reach this market, facilitated enrollment agencies (or FEs, which are health plans and community-based organizations authorized to help sign up people for State-administered health plans) conduct street-level marketing and promotional campaigns, such as ads on buses and billboards. This approach has contributed to New York State having one of the highest enrollment rates in the nation; however, a large number of individuals eligible for Medicaid, Child Health Plus, and Family Health Plus remain unenrolled.

The current paper-based health insurance application process used by individuals and FEs is cumbersome, costly, and sometimes intimidating. The process also is error-prone, resulting in delays in enrollment and frequent coverage gaps when an individual's eligibility changes.

#### KEY INFORMATION:

**GRANTEE**

Hudson Center for Health Equity & Quality

**GRANT TITLE**

Expanding Health Insurance Coverage in New York State: Streamlining Facilitated Enrollment and Development of Web-Based Eligibility Assessment

**DATES**

December 15, 2007 to December 14, 2008

**GRANT AMOUNT**

\$114,569

Improving enrollment in State health insurance assistance programs would increase access to basic health care, including preventive services, early treatment, and chronic disease management that can reduce long-term health care costs.

### III. Grant Strategy

Hudson Center sought to transform a facilitated enrollment electronic application (FEEA™) for public insurance programs, originally designed to be used by FEs, into a self-service eligibility screening and enrollment website for use by prospective applicants. FEEA was developed and distributed by the Hudson Center and had been in use in 10 upstate counties for more than five years. Implementing FEEA for use by applicants (Enroll NY) would gather standardized data, calculate potential eligibility for programs, and assist individuals in the application and interview process with an FE.

The Internet offers an effective and efficient way to reach people with health insurance offerings. The majority of working poor (many of whom are eligible for public insurance programs) have access to computers in the home. In fact, Hudson Center noted in its proposal that 53% of adults in households with less than \$30,000 in annual income access the Internet.

The Enroll NY website would be available statewide, and would provide educational information about health plans operating in various counties.

### IV. Grant Activities

**PLANNING.** Software developers and experts in facilitated enrollment detailed what they wanted the website to look like in terms of design, content, and functionality. The site had to enable users to complete an application, yet not overwhelm them. Project staff consulted FEs and defined the minimum amount of data necessary to follow up with a Web-generated lead, turn it into a full application, and ultimately obtain insurance coverage for a person or family.

The eligibility calculator, pre-application informational pages, and FE portal were developed in units. FEs tested the site and provided feedback about its appearance, ease of use, and clarity of the information presented. The site was then refined and launched on December 15, 2008, in Westchester County and New York City.

#### EXPECTED OUTCOMES

**HUDSON CENTER ANTICIPATED THAT THIS PROJECT WOULD RESULT IN THE FIRST SELF-SERVICE INSURANCE APPLICATIONS TAKEN IN NEW YORK STATE.**

**PARTNERS.** Project staff members collaborated with local health plans in Westchester and New York City to explain the project and their role as active participants. Community-based organizations also were engaged as partners who might drive traffic to the website.

**FUNCTIONALITY.** Individuals who visit EnrollNY.org can learn about public health insurance programs in New York State, check eligibility for programs, or start the application process.

Screening requires that users enter a minimum data set: zip code, number of people in the family, and gross financial information. The software then calculates whether they may be eligible for government-sponsored health insurance. Users can then enter additional information, or have their basic data forwarded to an FE of their choice in their home county for follow-up. FEs may use the site to manage their lead information. Hudson Center staff members monitor the site to determine whether FE responses to applications are timely.

**MARKETING.** Each FE participant initially used Enroll NY for six months free of charge, with the understanding that fees would be assessed thereafter at a minimum of \$5,000 per agency. Community-based FEs participate free of charge. Hudson Center assumed that a health plan FE that



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received a sufficient number (five to 10) of valid applicant leads per month would be willing to continue to pay annual fees, and those fees would support maintenance of the site. In fact, they were able to collect fees from the relevant health plans in 2009; 2010 dues are due this summer.

Hudson Center staff developed a brochure in English and Spanish publicizing the website. This was not sufficient to inform the community and promote site use. In the absence of a traditional, paid marketing program (see “Lessons Learned”), the Hudson Center asked organizations to post links to the Enroll NY website on their own websites. In total, Hudson Center staff has engaged 29 FEs to link to Enroll NY.

## V. Challenges

The first challenge was designing Enroll NY in a way that would capture the largest numbers of eligible individuals. Hudson Center’s original grant application proposed posting a full health plan application to the Internet. The application would be forwarded to a FE agency selected by the applicant for action. During development some enhancements to this plan were made to ensure that members accessing the site would be able to submit their data with a minimal amount of information. This design prevents the loss of an applicant that finds the forms too complex to complete (see below for additional information).

Enroll NY was designed to strike a balance between two key enrollment goals: **1)** enabling consumers to enter as much information as required to satisfy the eligibility determination process for public health insurance, while also allowing consumers who do not wish to provide as much information online to enter the minimum information necessary to “presume” their eligibility; and **2)** forward that information to an FE selected by the consumer as a viable lead. The goal for Enroll NY was to ensure that every viable candidate be given the opportunity to signal to the system his or her desire to be contacted, and to provide the necessary information for contacting that consumer. At the same time, the system would pre-screen such requests to ensure that only qualified leads be sent to FEs for follow up.

### FUNDING INITIATIVE

In April 2007, the New York State Health Foundation (NYSHealth) issued a request for proposals for one-year projects under a major initiative, *Expanding Insurance Coverage in New York State*, to support programs that addressed the persistent problem of enrolling 1.2 million New Yorkers who were eligible for health insurance coverage, but not enrolled. The project fit squarely within NYSHealth’s health insurance coverage objective to simplify enrollment. If successful, the Foundation felt this project could result in substantial system efficiencies, as well as reach many of the State’s eligible but uninsured population.

The biggest challenge was informing users about the availability of the website. The number of people who completed a pre-application for health insurance—767—was significantly smaller than expected; however, individuals who found the site were likely to complete a pre-application.

See “Lessons Learned” for more information.

## VI. Key Findings

The Enroll NY website went live in December 2008 and was expanded statewide in May 2009. Some 29 FEs actively participate. Hudson Center also forged partnerships with community-based organizations and health plans to help drive traffic to the site.

In 2009 (after the grant closed, and after the first full year of operation) the site had 8,692 unique visitors. Some 767 families were screened and sufficiently completed the application process. Approximately 55% of these applicants became health plan members, extending coverage to an estimated 1,055 new individual and family member enrollees.

## VII. Lessons Learned

Although the site design has proven to be effective, a lack of marketing dollars initially limited the number of people who were aware that this self-service enrollment option is available online. Though the number of enrollments resulting from the site appears to have grown since the close of the grant, these numbers are based on estimates. Still, the number of estimated enrollments was disappointing. The grant application projected conservatively that more than 14,000 individuals would potentially choose to use the Internet to apply for insurance.

“Hudson Center executed the project as proposed,” said Melissa Seeley, NYSHealth Program Officer. “But the grant scope did not include a marketing plan—in hindsight, the Foundation could have been more proactive in helping Hudson Center think through this aspect of planning and implementation.”

When the project was initially conceived, the Hudson Center thought it would be able to get actual enrollment data through the FEs who used the system. In practice, however, it learned that FEs have no way of identifying the source of enrollment for each newly insured person with whom they worked. The Foundation now provides more technical assistance to grantees in the area of tracking and monitoring, and helps grantees early on to determine whether a feasible tracking mechanism is in place.

Finally, the State may be able to learn from this project as it continues to develop automated, simplified processes for enrollment, especially with the enactment of Federal health care reform. One of the most important lessons is perhaps the necessity for consumer education around these types of tools.

## VIII. The Future

To address the marketing issue, the Hudson Center developed a strategy to customize Enroll NY and offer a “private label” version of Enroll NY that was launched in the third quarter of 2009, after the grant period. The Enroll NY Private Portal becomes a part of an FE’s website and is completely branded for the FE. The backend software for the portal is Enroll NY, which provides the same seamless application process as the original site. The branding allows marketing dollars expended by the FE to drive applicants to their own website to begin and complete an enrollment application. Rather than expending new marketing dollars, Enroll NY Private Portal capitalizes on the marketing activities, branding, and name recognition of the FE and offers applicants the convenience of completing an application online. The site continues to be hosted by the Hudson Center. To date, visitors to the Enroll NY Private Portal, and the resultant leads and enrollments generated, are much higher than those attributed to the Enroll NY site. The Private Portal’s conversion rate (the percentage of leads who become enrolled in health insurance) is lower than Enroll NY’s (35% compared with 55%), but the volume of leads through the Private Portal is much higher than that of Enroll NY (40 leads per week versus 40 leads per year). Additionally, the speed that FEs can process applications has increased with some applications reaching governmental agencies within 24 hours.

Now that New York State has eliminated the need for face-to-face interviews for Medicaid and Child Health Insurance Plan renewal,<sup>1</sup> Seeley sees more opportunities for completing program applications electronically. “The lessons learned from developing this enrollment tool could prove helpful to New York State and states across the country that must simplify their enrollment processes as they prepare to implement expanded coverage under Federal health care reform,” said Seeley.

<sup>1</sup> <http://www.statehealthfacts.org/profileind.jsp?ind=232&cat=4&rgn=34>

## BACKGROUND INFORMATION:

### ABOUT THE GRANTEE

The Hudson Center for Health Equity & Quality (the Hudson Center) is an independent, nonprofit organization that promotes the delivery of humane, high-quality, cost-effective health care through policy study, advocacy, and the development of information technology.

### GRANTEE CONTACT

Catherine Clancy  
303 South Broadway, Suite 321  
Tarrytown, New York 10591-5455

Phone: (914) 372-2100  
e-mail: [cclancy@hudsonhealthplan.org](mailto:cclancy@hudsonhealthplan.org)

Web address: <http://www.hcheq.org>

### NYSHEALTH CONTACT

Melissa Seeley

### GRANT ID #

1912051