## **Consumer Engagement**

## Key Messages for Social Services/Care Coordinators

## **General Notes:**

- Many of the boots on the ground I've spoken to have variable knowledge about the changes coming to our region in 2018. Comments range from "I had to idea" to "I think I've heard something about that, but really don't know what it means" to "all I want to know is how it will affect the clients I see".
- The following is a list of requested information:
  - High level overview of the upcoming changes, maybe one or two visual diagram with paragraph of text.
  - Sample copies of any/all materials clients will be getting in the mail (or at least the ones the HCA/FIMC group is responsible for). It's these items that trigger client questions/fears and if the community providers know what the messages are and the timeline clients will receive them, this will aid in the community provider proactive client follow up.
  - A SIMPLE bulleted/scripted list of talking points. Most of these providers indicate that a
    maximum of 4 points is optimal, anymore and the clients begin to get confused.
     Suggested points:
    - You won't lose your benefits
    - You don't have to do anything
    - These are the changes you will see. This will be variable and it would be helpful to have some sort of a diagram/flow of the basic changes since the community providers are often the most trusted and the only helper a client will turn to for answers.
- Suggested Community Providers to receive this information:
  - o Home visiting providers
    - Non-Healthcare/Behavioral Health Case Managers (AAA's; Home Care Agencies; etc.)
    - Care Coordinators (Community Orgs and MCO's)
    - CHW's (Public Health, other community agencies serving Medicaid population)
    - Supervisors/managers of Long-Term Care; Adult Family Homes; Group Facilities (i.e.: Christopher House) where fear of the changes are known to spread among residents.