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Montana Health and Economic Livelihood Partnership (HELP) Evaluation: CORE Focus Group Moderator's Guide

Note: Focus group questions will be customized based on the composition of the focus group. Only relevant questions will be asked based on the eliqibility subgroup represented at the focus group.

Introduction and Overview of Purpose

	ie to our focus group. I'd like to beg e. We appreciate it.	in by thanking each of you for taking time out of
<i>y y</i>	rr	
My name is	, and my partner here is	We are from the Urban Institute and have been
hired by the U.S.	Department of Health and Human S	ervices to conduct this focus group to talk with you
about your experie	ences enrolling in and obtaining hea	lth care through the Montana Health and Economic
Livelihood Partne	rship program, otherwise known as	HELP.

Each of you has been invited here because you are enrolled in the HELP program [through the HELP Plan and/or Montana Medicaid. If you are in the HELP Plan, your health insurance card says "BlueCross BlueShield" on it. If you are in Montana Medicaid, your health insurance card says "Montana Access to Health"]. Over the next 90 minutes or so, we want to talk with you about your experiences as an enrollee in this program. We are having several other focus groups like this one in Montana. We are interested in learning about a broad range of your experiences, including how you heard about HELP, how you enrolled in the program, what you think of the [monthly premiums (*if in the HELP Plan*)] and copayments that HELP may ask you to pay as part of your coverage, and how well you have been able to access health care services under HELP. This will allow us to better understand how well (or not) this program works for enrollees. Also, it will allow us to help policymakers and providers improve their programs for health care consumers like you. So let's get started.

PRA Disclosure Statement

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Ground Rules

Have any of you ever been in a "focus group" before? Just so you know, a "focus group" is an informal small group discussion, moderated by a facilitator (me) who will guide the discussion through a series of questions focused on a particular issue (in this case—health insurance coverage). I'd like us to just imagine that we're sitting around a kitchen table, relaxed and casually chatting with some new friends. Sound good?

Before we go any further, let me go over a few "ground rules" for today's discussion.

1. First, there are no "right" or "wrong" answers here today. Please feel free to share your views, even if they are different from what others have said. Please also know that we don't work for the HELP

program or the State of Montana, so please tell us your thoughts and opinions, whether they are positive or negative.

- 2. Second, your participation here is entirely voluntary. None of you should feel compelled to be here; you are free to leave at any time.
- 3. Third, your comments will be kept private to the extent permitted by law. When we summarize the findings of the group, all responses will be "anonymous," meaning nobody's name will appear, and nothing you say will be attributed to you, so please be as open as possible in sharing your thoughts with us. The study team will keep your responses private to the extent permitted by law, and this protection will extend to any negative statements or complaints you make about the HELP program or the government agencies that oversee the program. If you agree to participate in this study, you must also agree to not share other focus group participants' names or remarks with others outside of this group.
- 4. Fourth, I would really like to encourage everyone to participate. You do not have to answer every question, though, nor do you need to raise your hand to speak. If, however, some of you are shy or don't get a chance to speak, I may call on you to give you a turn, because I'd like to know what everyone here thinks.
- 5. Fifth, it is important that only one person speak at a time. We want to be respectful of everyone and give everyone their chance to speak. Also, we would like to record today's discussion, so taking turns is important here too—if two people talk at once, we won't be able to understand the tape.
- 6. Now, about the recording. We're recording the session because we don't want to miss anything. Even though we'll be taking notes as fast as we can, I'm certain we won't be able to write everything down. So, the taping is simply a back-up, a tool to ensure that we get all of your comments. Don't worry, no one would listen to these tapes besides the research team and they will be destroyed once we finish our study; your comments will be kept private, as I have said. Is it alright with everyone for us to record the focus group?
- 7. Sixth, I have a lot that I want to talk about with you today. So I may be forced, from time to time, to interrupt the discussion and move us along to another topic. But, don't let me cut you off! If there's something important you want to say, let me know before we change the subject.
- 8. Finally, just a word about cell phones and restrooms. Please either turn off your cell phone or put it in "vibrate/silent" mode. If you need to use the restroom, please do so at any time; you do not need to ask permission. The restrooms are located ______.

We will be on a first name basis today, and we've placed name cards on the table in front of you to help us remember each other's names.

Any questions? Okay, let's begin.

I. Background Questions

1. Let's start by going around the table and introducing ourselves. I'd like each of you to tell us your first name. Then, to break the ice, why don't you share with all of us a little bit about yourself. You can share anything you like – if you have family or children, what you do for a living, what your hobbies are...anything you like.

(For focus groups where multiple eligibility subgroups are represented)

 As we go around, please also let us know whether you are in the HELP Plan or Standard Medicaid if you know (or if you have a health insurance card that says "BlueCross BlueShield" or "Montana Access to Health"

- 2. Before we get into our specific questions about the HELP program, tell me:
 - For how many of you is this program (HELP) the first health insurance coverage you've ever had?
 - How many of you have had health coverage through an employer before?
 - How many of you have been on Medicaid before?
 - And how many of you have purchased private coverage before?

II. Marketing and Outreach

- 3. Let me begin by asking you all: How did you first hear about the HELP program? Did you, for example,
 - See an ad on TV or hear an ad on radio? Hear about it from friends? Learn of the program from a doctor or provider at a clinic, or from a social services agency?
- 4. What did you think about the program when you first heard about it?
 - Did it seem like a good opportunity to obtain health insurance for you and your family, or not? (If not, why not?)
 - Did it seem clear and did it make sense? Or did it sound complicated? (What, if anything, seemed confusing to you?)
- 5. Did any of you hear any details about the program before you signed up? If so, what kinds of things did you hear?
 - Did you hear that it was hard, or easy, to sign up?
 - Did you hear that you may have to contribute to the cost of coverage, through monthly premiums or copayments?
 - Did you hear that it provided good access to doctors and clinics, or that it was hard to get care in the program?
 - Did you hear that the program has doctors who speak your language?
- 6. Was there anything about applying for the HELP program that worried you?

III. Eligibility Determination, Enrollment, and Renewal

7. Let me continue by asking you about eligibility and enrollment under the HELP program. For starters, how did you enroll in HELP?

• Did you apply online? Did you fill out an application and mail it in? Did you visit a county eligibility office? Did you apply at a doctor's office or a hospital or at a community based organization?

- 8. What was it like to enroll in the HELP program?
 - Was it easy and/or convenient? Or was it difficult? Why? How?
 - What was the application form like? Was it long or short? Simple or complicated?
 - Did you have to gather and submit documentation of income or assets?
- 9. Did you receive any help in completing enrollment in HELP?
 - Who helped you? In what ways did they help you?
 - If an eligibility worker/outreach worker assisted you, did you find she or he was helpful? If yes, why? If no, why not?
 - Did the eligibility assister speak your preferred language?
 - What happens if your income changes within 12 months of enrollment? To your knowledge, are you supposed to do anything, like inform the state? Is this similar or different from past experiences you may have had with showing you are eligible for a benefit like health insurance?
- 10. How did you find out that you succeeded in getting HELP coverage?
 - Did you find out immediately, at the provider's office, or the community-based organization, or online when you applied? Or did you have to wait to find out?
- 11. How long have you been enrolled in the HELP program?
- 12. For those of you who have been in HELP for over a year(?), have you ever had to renew your coverage?
- 13. What was it like to renew your coverage?
 - Did you have to do anything (or was it automatic)?
 - What did you have to do? Send in a renewal application? By mail? Online? Or did you have to show up somewhere in person?
 - Did you find this process easy or difficult? Why? How? Did anyone help you?

IV. Monthly Premiums and Copayments

(for HELP Plan enrollees)

14. I'd like to now ask you several questions about the money that you might need to contribute toward the cost of coverage under the HELP program. Thinking back to when you enrolled in the program, what did you learn about the monthly payments (or premiums) that are part of the program?

- Did paying a monthly premium seem fair to you?
- During enrollment, did they tell you about copayments that you might also need to pay when you received certain services? Did they seem fair or unfair to you?
- 15. How many of you pay monthly premiums under HELP?
 - How much do you pay each month?
- 16. Now that you've been enrolled in the HELP program for a while, what do you think about the premiums you're paying?
 - Have they been affordable?
 - Or have you ever struggled to afford the monthly contribution?
- 17. How do you pay your premiums? What are your options?
 - Do you mail in a check? Or pay online? Or pay cash through an agency or provider?
- 18. To your knowledge, has anyone ever helped you pay your premium, like an employer or provider of some community organization?
 - Have you ever been told that there might be help like that available to pay the monthly premium?
- 19. Have any of you ever been late paying your premium? If so,
 - What happened when you were late?
 - Did you receive a notice from the state regarding your lateness in paying your premium? Was it clear and easy to understand? Or was it confusing?
 - Did you lose coverage under HELP for not paying your premium? For how long did you lose coverage under HELP?
 - How did that feel? And what did you do for health care while your HELP coverage was not in place?
 - Were you able to re-enroll in HELP? Did you have to pay your overdue premiums to become eligible again?
 - How did re-enrollment occur? Did you have to do anything? If so, what?

For those of you who have not ever been late paying your premium:

To your knowledge, what would happen if you were late or could not pay your premium?

(For all subgroups)

20. Let's now talk about copayments, which are the amounts you might be asked to pay when you are receiving services. How many of you have been billed for a copayment? How many of you have had to pay copayments?

- 21. How much have your copayments been? Did the amount of copay vary depending on which services you were receiving?
 - Do these copayments seem fair?
 - Have you been keeping track of how much your copays have added up to, overall?
 - Have you heard about any limit to the amount you should spend on copays and out-of-pocket health care costs? If so, what is it?
- 22. How affordable have copayments been for you?
 - Have any of you ever not gone to a doctor (or other provider) because you felt the copays were too expensive? What did you do instead to address your illness?
- 23. Have you ever gone to a provider who didn't require you to pay the copayment? Do you know why they did not charge you a copayment? To your knowledge, are there any types of services that HELP covers that are not subject to copayments?
- 24. Have any of you ever gone to the emergency room for your care under the HELP program? Did you receive a bill for a copayment? And if so, why do you think you had to pay a copayment? How affordable was that copayment?
 - Has anyone <u>not</u> gone to the emergency room when you thought you needed to? Why didn't you go?
- 25. What determines whether or how much you need to pay if you go to the emergency room under the HELP program?
 - Has anyone told you about what counts as an "emergency" and what does not? If you needed to make a decision about whether or not something was an emergency, what would you do?

V. Access to Care and Benefits

- 26. Let's now talk about what it's like to get services under the HELP program. First, let me ask: Have you been able to find doctors who would see you when you needed care? Or has that been challenging in any way?
- 27. About how many times this past year would you say that you have gone to a doctor?
 - Is that more, less, or about the same as the year before you enrolled in the HELP program?
 - Is there something about being enrolled in HELP that made you go to the doctor more (or less) than you did the year before you enrolled?

28. Have you received preventive care (like health check-ups, well-woman exams, or immunizations) more frequently now, with HELP, than you did in the past? If yes, can you tell me why? How does that feel?

- 29. Have you been able to receive specialty care, dental care, or vision care now that you have HELP coverage? How has that gone? Has it been easy to obtain, or challenging in any way?
- 30. Overall, how satisfied are you with the quality of care you've received under the HELP program?
 - How satisfied are you with the accessibility of that care? In other words, has it been easier (or more difficult, or about the same) to get the care you need compared to before you were enrolled in the HELP program? How come?
- 31. In the past, some of you may have had no health insurance. Others may have had health coverage through their employers. And others may have had traditional Medicaid. Thinking back to before you enrolled in the HELP program, overall, would you say your access to and satisfaction with health care is better now than it was before? Worse? Or about the same? Tell me some of the reasons why.

VII. Overall Impacts on Daily Life

- 32. We've spent the last hour or so talking about health coverage under HELP. In closing, I'd like to ask you: What difference does having health insurance under the HELP program make in your life? How do you feel, knowing you have health insurance under HELP?
 - Listen for:
 - » Peace of mind/sense of security?
 - » Easier access to care? (e.g., More providers available? Easier to see a provider?)
 - » Better quality of care?
 - » Lower cost?
 - » Being able to contribute to my health care
 - » Have more control over what I pay for health care
 - » Like being encouraged and rewarded for taking care of myself
 - » Like having vision and dental coverage
- 33. Are any of you receiving workforce training through HELP-Link? If yes, what has that experience been like? Have you found it helpful?

VIII. Lessons Learned

34. From what you've described for me today, as someone enrolled in the HELP program, it sounds like, generally, you have found the program to be:

[FACILITATOR SUMMARIZES MAIN FINDINGS]

- Is this a fair and accurate description? Have I missed anything?
- 35. Given this, would you recommend the HELP program to a friend or family member? Why or why not?

36. Given this, how many of you would be interested in renewing your coverage when the time comes? How many would not?

- 37. Are there any things that you think the program could do to improve it? For instance,
 - Is there anything that the program could do to make the application/renewal process easier to complete?
 - Is there anything that the program could do to make coverage more affordable?
 - Is there anything that the program could do to make it easier to find a doctor or other providers?
 - Is there anything that the program could do to make it easier, or less complicated, to participate in?
- 38. For those of you who are not interested in keeping your HELP coverage, what would be the most important improvement that the programs could make that might make you change your mind?
- 39. Have I missed anything, or are there any additional comments anyone would like to offer before we break?

Thank you all for your helpful participation today.