



## Medicaid Monday: Improving Client Communication

### Description

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The managed care model has transformed Texas Medicaid from a disjointed, ineffective system to a more comprehensive, streamlined system that provides better care with better results and costs taxpayers less.

Like any system, managed care can be updated and refined to better serve patients. Even small, simple steps can make a significant difference in reducing cost and improving quality of care in Texas Medicaid.

Two bills on track to become law this legislative session will do just that by changing how a managed care organization can communicate with clients.

**SB 1911**

A recent study found that text messages have a 98% average read rate, and Medicaid members are more likely to engage when their preferred method of communication is used to reach them. [SB 1911](#) by Senator Cesar Blanco allows Medicaid clients to opt in to receive text updates on the enrollment form. Capturing this information at the point of application streamlines the outreach process and increases the participation rate.

A Medicaid MCO in Tennessee implemented a text message program for expecting mothers that connected with more than 60% of its members and found that mobile reminders were 50% more effective in closing care gaps compared to traditional outreach channels like calls and mailers. This guided, personalized communications approach increased the likelihood that the expecting mothers would make healthy choices, complete necessary tests and checkups, and remain engaged with their health plan throughout their pregnancy.

*SB 1911 passed the Senate and was amended and passed in the House. The Senate must agree to the House changes or a compromise of the two versions approved before it is sent to the Governor for final approval.*

## **[HB 2658](#)**

Current law requires health plans to print paper provider directories for Medicaid clients unless the client opts out of receiving the directory. However, most clients prefer online directories, which can be easier to access and are much easier to update. Recently, the amount of information required in printed directories rose drastically, resulting in larger paper directories that are more expensive to print and mail. The directories are sometimes so large that they cannot fit in client mailboxes, requiring clients to go to the post office to pick up their copy. Paper directories also cannot be updated quickly, potentially leaving clients with outdated information.

[HB 2658](#) by Rep. James Frank streamlines requirements for printing paper provider directories and reduces costs and burden in the Medicaid program.

Under this bill, clients who would like a paper copy would still be able to request and receive one, but online directories would become the default.

*HB 2658 passed the House as amended and was amended and passed in the Senate. The House must agree to the Senate changes or a compromise of the two versions approved before it is sent to the Governor for final approval.*

These bills are small examples of improvements that can be made to managed care, but they illustrate ways managed care can continue to connect with clients to remove barriers to care and make it more consistent.

To learn more about Medicaid and the managed care difference, check out our [Medicaid policy page](#).

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**Author**

tahp