

5 Best Practices for Retaining and Engaging Your Members Amidst Redetermination

The unwinding of the Medicaid continuous enrollment provision is a stressful process, but it's critical that health plans empower, engage, and retain members throughout the initiative. Follow these best practices to prioritize proactive communication, personalized support, strong provider networks, community collaboration, and innovative wellness initiatives that align with your member population needs and organizational goals.

1. Provide Proactive Communication

Regularly communicate with members about redetermination processes, changes, and requirements.

Provide clear and concise information through various plan channels, such as emails, member portals, and educational materials, as well as community-based channels such as immigration centers and translators to assist in the re-enrollment process.

Offer educational resources in multiple languages and formats for members, caregivers, community health workers, and peer support specialists with hearing and vision impairments to ensure members understand their benefits, rights, and available support during redetermination.

2. Offer Personalized Member Support

Embed utilization and case managers within provider organizations, and leverage community health workers and peer support specialists to provide personalized assistance throughout the redetermination process.

Offer dedicated support channels, such as toll-free helplines or online chat, to address member concerns and questions promptly.

Implement interactive tools, such as health risk assessments, symptom checkers, and secure messaging, to maintain seamless communication and facilitate self-management.

3. Leverage Key Provider Networks

Collaborate with safety net behavioral health providers, pediatricians, and federally qualified health centers or certified community behavioral health centers to ensure Medicaid-eligible individuals do not have gaps in coverage during redetermination.

Build strong partnerships with key providers to enhance care access, continuity, and support for members with specialized healthcare needs.

Proactively develop initiatives to ensure members are informed of the necessity for re-enrollment. This may include care coordinators and health plan CHWs co-located in and partnering with social service agencies, schools, EDs, law enforcement agencies, and shelters.

4. Build Community-Based Partnerships

Establish partnerships with community organizations, schools, faith-based organizations, local public health departments, and social service agencies to address social determinants of health and support and educate members during redetermination. These agencies and organizations work and interact with Medicaid's most vulnerable individuals.

Collaborate on initiatives that provide resources for housing, food security, transportation, and other social needs that impact member well-being.

Utilize community outreach programs to enhance engagement, access, and support for members in vulnerable populations.

5. Develop Wellness Programs and Preventive Care Initiatives

Develop and promote wellness programs that encourage members to adopt healthy lifestyles and preventive care practices.

Offer incentives, such as value-based services or rewards, to motivate members to engage in wellness activities and screenings.

Partner with healthcare providers to facilitate access to preventive services and coordinate care for chronic conditions.

Retaining members and keeping them engaged throughout redetermination can be complex, time-consuming, and taxing on your staff. Connect with Clearlink for help implementing these best practices to take the first step toward maximizing member satisfaction and elevating your product continuum in the face of redetermination. [Request more information here.](#)

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