

COVID Vaccine Initiatives



An Independent Licensee of the Blue Cross Blue Shield Association

Health
Choice

Vaccine Equity K-12 Reopening Grant

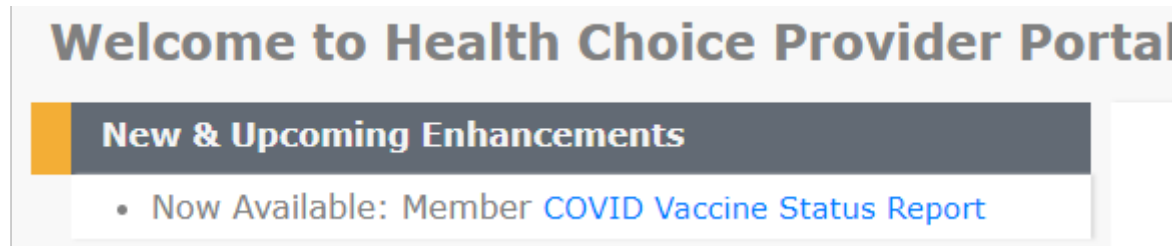
- HCA partnering with Coconino County and NAU on the *Vaccine Equity K-12 Reopening Grant*
- Grant was awarded to Coconino County by ADHS
- Main components:
 - BH services for K-12 students and families impacted by COVID-19
 - Wrap-around social supports (e.g. temporary lodging, laundry services and food) for families
 - Care coordination and linkages to ongoing BH services
- Grant will increase opportunities for NAU students to gain clinical hours and experience

What has worked?	What has not worked as well?	Ongoing Initiatives	New and Innovative Focus Areas
<p>Mass vaccination sites</p> <ul style="list-style-type: none"> 491,124 vaccines administered 145,000+ hours of service provided by volunteers in 15,000+ shifts 18,880 of those volunteer hours were filled by BCBSAZ and HCA employees 	<p>Mass text messaging</p> <ul style="list-style-type: none"> 20,007 members received texts (Apr 21) 8 members (0.04%) accepted vaccine scheduling assistance 	<p>Gap lists</p> <ul style="list-style-type: none"> On-demand for PCPs on Provider Portal Monthly distribution to Health Homes All available data sources (Pharmacy, Claims, ASIIS, Medicare/COVAX) 	<p>Changing the dialogue about COVID vaccines</p> <ul style="list-style-type: none"> Collaborative Communication about COVID-19 Vaccines Possible innovation with Maricopa County on large scale train-the-trainers
<p>Initial targeted outreach for highest risk members based on early risk stratification in February and March 2020</p> <ul style="list-style-type: none"> 850 members with SMI 101 Tribal reservation members 	<p>Receiving accurate, timely data on member vaccines</p> <ul style="list-style-type: none"> Tribal health care system data Mass vaccination sites 	<p>Outreach to high-risk members by the Pharmacy Department (Project COVAX)</p>	<p>Focus on Pregnant Members</p> <ul style="list-style-type: none"> Tailor messaging to the specific needs and concerns of pregnant members and OB/GYN providers
<p>Collaboration among MCOs, counties, and providers to vaccinate high risk Medicaid & ALTCS members (e.g. ALTCS)</p>	<p>Relying on possible vaccine mandates</p>	<p>Boosters for vaccinated members</p>	<p>Collaborate with county health departments on new types of messaging (e.g. community member testimonials)</p>
<p>Adding pharmacy and mobile vaccine sites</p>	<p>“Pop up” events that are poorly advertised or not regularly scheduled</p>	<p>Collaborate with providers and MCOs</p>	<p>Ensure that outreach and messaging is available in as many languages as possible and are culturally appropriate</p>
<p>Outreach from Health Homes to members using gap lists provided by Health Choice</p>	<p>Generic community messaging campaigns</p>	<p>Congregate setting interventions</p>	<p>Learn more about “digital nudging”</p>
<p>Convenient community locations that are consistently available (in unconventional locations)</p>			<p>Contact RWJ Foundation & others (Unicef, TAPI) about emerging best practice messaging approaches</p>
<p>Adding ASIIS data to our member vaccine information</p>			<p>Collaborate with local community leaders (including faith-based) on above activities</p>

January 2022 (partial list)

Vaccine Gap Lists – Provider Portal

- On-demand access to COVID Vaccine Gap Lists for PCPs on the Health Choice Provider Portal
- Launched January 2022
- Providers can view gaps in the portal or download a spreadsheet



Vaccine Gap Lists – Provider Portal



HOME ELIGIBILITY CLAIMS ▾ MEMBER ROSTER A/R REPORTS QUALITY ▾ PRIOR AUTHORIZATIONS ▾ DOCUMENTS LOG OFF

COVID Vaccine Gaps List

Action: [EXPORT TO EXCEL](#)

Provider NPI: Member ID: AHCCCS ID: Alt. Member ID: Member DOB: Vaccine Status:

[APPLY FILTERS](#) [CLEAR FILTERS](#)

Show entries

Member ID	AHCCCS ID	Last Name	First Name	Middle	Alt. Member ID	LOB	Vaccine Status	Manufacturer	Phone	DOB	Age	PCP NPI
█	█	█	█	█	█	HCA	No Vax	█	█	█	█	█
█	█	█	█	█	█	HCA	Full Vax	Pfizer	█	█	█	█

Collaborative Communication about COVID-19 Vaccines

<https://www.healthchoiceaz.com/rvh/>

- Training for providers and community members
- Purpose: Change the dialogue about COVID-19 Vaccines to focus on messaging that is nonjudgmental and strengthens relationships with trusted providers (PCP).
- Developed in collaboration with providers
- Evidence-based: Uses Motivational Interviewing techniques
- Brief: takes 10 minutes to complete

Collaborative Communication about COVID-19 Vaccinations

START COURSE

DETAILS ▾



This course is intended for community providers who have conversations with patients about COVID-19 vaccines.

Collaborative Communication about COVID-19 Vaccinations

25% COMPLETE

- ☰ Introduction
- ☰ Motivational Interviewing to Identify Reasons for Vaccine...
- ☰ Respond to Vaccine Hesitancy
- ☰ Training Complete



The patient states they believe in an individual's right to opt-out of receiving the vaccine

1 Vaccines are a personal choice and people should be able to make their own choices. Can you tell me about your reasons for opting out?

2 I understand it is a personal choice but by receiving the vaccine you protect yourself, family, friends, and community.

Project COVAX



Goal: Ensure Equitable Access to COVID Vaccination for Health Choice members

Initial Focus Group: Age 65+ or immune compromised

Process Summary: A pharmacy coordinator makes outreach to Health Choice members that are not fully vaccinated to identify and resolve barriers to vaccination.

1. Address Members' Questions

- Listen to concerns and reasons for hesitancy
- Answer clinical questions or leave message for provider to call member
- Address logistical or supply questions
- Determine if N95 or KN95 masks or COVID tests are needed

2. Schedule Vaccine Appointment

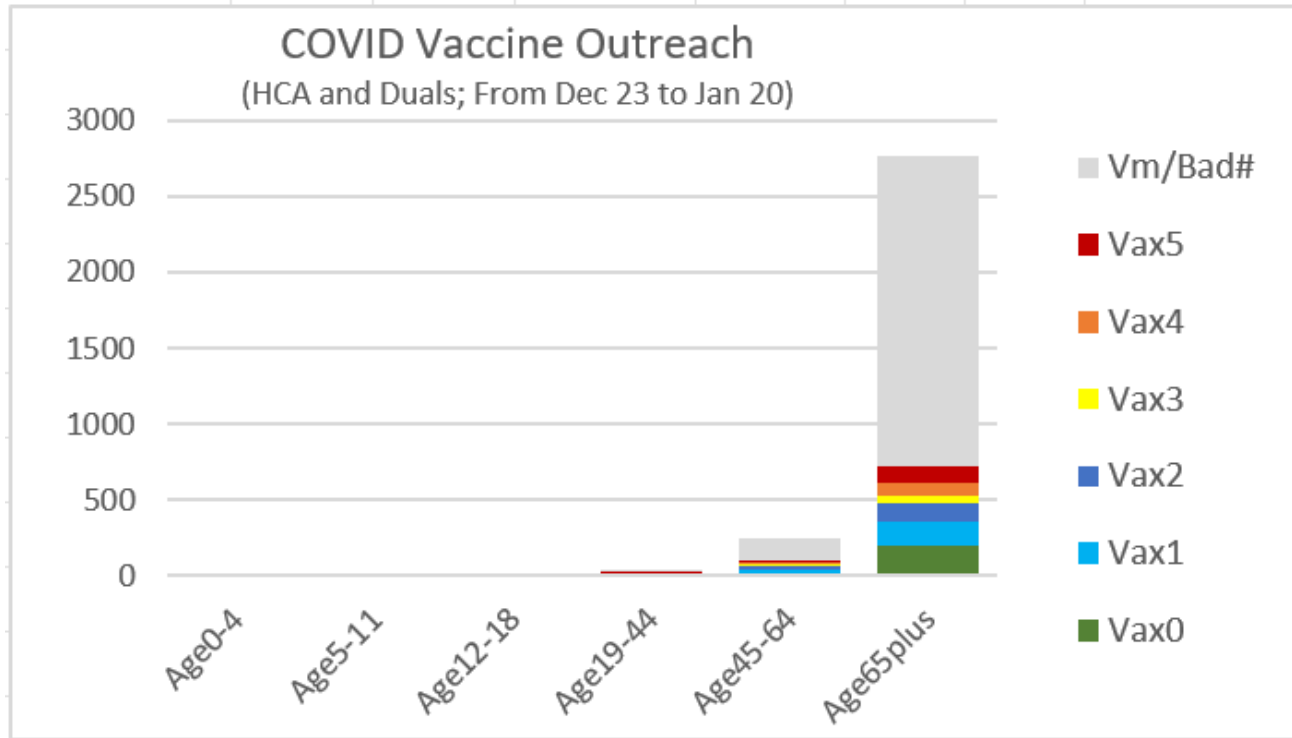
- Coordinate date and time with member to receive vaccination at a nearby pharmacy or provider office
- Line up transportation to appointments when needed.

3. Identify and Resolve Barriers

Examples of barriers encountered:

- No internet or computer to schedule appointment.
- Online scheduling is especially difficult for those unable to read English.
- Health literacy; Interpreting mixed information about the benefits and risks of vaccination.
- Some are waiting for their next doctor appointment to ask if it is okay to get the vaccine.
- The member's decision to not get vaccinated is sometimes due to a family member with opposition.
- Some pharmacies won't give a second or third dose unless proof of dose 1 or 2 is brought to the appointment.
- Some members are willing to get vaccinated, but not sure how to start the process and too busy to research
- No transportation.

Project COVAX



Of the 866 members reached so far:

- 22% (192 members) needed our help scheduling an appointment or needed transportation (VAX1)
- 18% (152 members) had questions for us and are now thinking about scheduling on their own (VAX2)
- 34% (299 members) very unlikely to get vaccinated (VAX3, VAX4, VAX5)
- 26% (223 members) already vaccinated; no help needed (ASIIS file mismatches) (VAX0, VAXB)

Project COVAX



- A surprising number of members are interested in learning more, even if they are hesitant to be vaccinated
- It is vital to have staff fluent in languages other than English
- Offering additional supports (e.g. masks, how to get COVID tests, connection to other services) is very helpful
- Opportunities exist for improved member demographic information 😊
- There have been many uplifting member stories
- Active listening makes a difference. Respectful conversation enables all of us to evolve personal health decision-making.