HUSKY D Work Rules Outreach and Education Guide

This guide is intended to help hospitals, health systems, and community partners use the CHA HUSKY D Messaging Starter Kit to support outreach and education about new Medicaid work rules that may affect HUSKY D beneficiaries beginning in January 2027. It outlines how the materials can be used and can help healthcare organizations and community partners identify where they can be shared and which staff or partners may be best positioned to distribute information, answer basic questions, and connect patients with additional assistance.

How This Guide Supports the Broader Outreach, Education, and Navigation Strategy

This guide and the CHA HUSKY D Messaging Starter Kit are designed to support a coordinated outreach, education, and navigation strategy. Together, they can help organizations raise awareness about Medicaid work rule changes, equip trusted messengers with consistent information, connect patients and community members with appropriate assistance, and strengthen coordination across hospitals, health systems, clinical settings, and community organizations. The goal is to ensure individuals who may be affected by the new work requirements receive clear, timely, and actionable information through trusted care settings and trusted community relationships.

Part A: Hospitals and Clinical Providers

1. Plan Your Rollout
Before distributing materials:

- Review the full HUSKY D Messaging Starter Kit, including patient-facing flyers, posters, FAQs, provider guidance, and communications resources.
- Identify the patient populations and/or hospital departments most likely to interact with individuals who could be affected.
- Determine whether materials should be customized with your organization's logo, contact information, or local referral resources.
- Obtain any necessary internal approvals (e.g., communications, legal, compliance, government relations, patient financial services, Medicaid enrollment, or community health leadership).
- Assign clear owners for preparation, distribution, staff education, digital communications, community outreach, and ongoing maintenance.

2. Prepare Materials
Finalize the toolkit resources before sharing them with patients, staff, or community partners.

- Prepare patient-facing flyers, posters, FAQs, and handouts for printing or electronic sharing (if higher resolution versions are needed outside of the PDFs available for download via the CHA website toolkit, contact communications@cthosp.org).
- Add approved organization branding, partner logos, and local contact information, if applicable.
- Confirm translated or accessible versions are available, if needed.
- Prepare concise internal talking points using CHA messaging.

3. Equip Staff

- Ensure staff understand the purpose of the materials and how to use them with patients.
    - Share provider-facing guidance, FAQs, talking points, and referral information with frontline staff and clinical leaders.

  - Provide brief training on the Medicaid eligibility changes and the purpose of the materials.
  - Prepare staff to introduce the information in a clear, neutral, and supportive manner.
  - Confirm staff know where to access the most current toolkit resources.

- Clarify that when interacting with patients or community members, it's important to:
  - Provide patients/community members with a flyer rather than relying only on verbal explanation.
  - Use the flyer to highlight two or three key points instead of attempting to explain every detail.
  - Be aware that the materials are intended to raise awareness and connect patients with assistance — not determine eligibility.
  - Direct questions requiring individualized assistance to an appropriate eligibility, financial counseling, or navigation resource.

- Provide brief scripts to staff to help them introduce the flyer appropriately, raising awareness without causing alarm. Examples:

  - "I wanted to make sure you knew that some Medicaid (HUSKY D) rules are changing over the next year. Not everyone will be affected, but this flyer explains what we know so far and the steps you can take now to stay informed. I'd encourage you to take a look and make sure your contact information with DSS is up to date."

  - "Have you heard that some HUSKY D rules are changing? Not everyone will be affected, but we want people to know about the changes early so they have time to prepare. This flyer explains what to expect and where to get updates. Even if you're not sure the changes apply to you, it's a good idea to review it and make sure DSS has your current contact information."

  - "Before you go, I'd like to give you this information about upcoming HUSKY D changes. Some Medicaid rules are changing including new work rules, although not everyone will be affected. Please take a few minutes to review it, and if you have HUSKY D, make sure your contact information with DSS is current so you can receive any important updates."

  - "We're sharing information about upcoming HUSKY D changes so people have time to prepare. The changes won't apply to everyone, but this flyer explains what we know today, how to stay informed, and where to watch for updates from DSS. We encourage you to use the DSS online pre-screener to see if the changes might apply to you."

- Share with staff the name and contact for who they should contact if they have questions [identify an internal point of contact]

- Promote the importance of outreach that goes beyond simply distributing flyers. Encourage brief conversations, confirm that the key message is understood, and provide patients and community members with a clear next step.

4. Distribute Materials

Post materials in high-traffic areas, or areas in which patients/community members may go to discuss assistance, such as:

- Emergency departments
- Registration and admitting areas
- Patient financial services offices
- Outpatient clinics and exam rooms
- Pharmacy areas
- Discharge planning areas
- Cafeterias
- Other high-traffic patient locations

Provide copies to staff who regularly assist patients, including:

- Patient navigators
- Medicaid enrollment assisters
- Community health workers
- Social workers
- Case managers
- Discharge planners
- Financial assistance counselors
- Front desk and registration staff

Whenever possible, place materials where patients can review them privately and take a copy home.
Include patient-facing information in appropriate print or direct-patient communications, such as:

- Appointment reminders or follow-up communications
- Discharge packets
- Billing assistance materials
- Patient portal messages

5. Use Digital Communications

Use existing digital channels to reinforce patient and community outreach.
Post or share approved information through:

- Organization website
- Patient portal
- Social media
- Community benefit webpages
- Staff or community newsletters (internal and external communications)
- Public email communications
- Waiting room screens or screensavers

6. Monitor and Update

After rollout:

- Track where materials were posted, shared, or distributed.
- Confirm posters and flyers remain stocked and visible.
- Collect feedback from staff and community partners about common patient questions or additional resource needs.
- **Update materials and talking points as state or federal guidance changes.**
- Document outreach activities to support internal reporting and future planning.

Part B: Community Partners and Settings

Extend outreach through trusted organizations that serve individuals who may be affected.

Share HUSKY D member*-facing resources with community partners and/or participants in your Keep Your Health Coverage Coalition such as:

- Community-based organizations
- Federally qualified health centers
- Physician practices and dental clinics
- Food pantries
- Shelters
- Libraries
- Schools
- Faith-based organizations
- Local health departments
- Other community partners

Encourage partners to use the resources in ways that fit their existing outreach, such as:

- Display posters and flyers in public areas
- Include information in newsletters or outreach efforts
- Distribute materials through enrollment or assistance programs

Provide partners with:

- A brief overview of the Medicaid work requirement changes
- Guidance on the intended audience
- Information on where to direct member questions
- Information on how to update
- Co-branded materials, if appropriate
- Draft scripts for beginning conversations when providing the materials directly to community members, including HUSKY D members, such as:
    - “We're sharing this flyer because some Medicaid (HUSKY D) rules are changing over the next year. Not everyone will be affected, but we encourage anyone with HUSKY D to review this information and stay informed about future updates.”
    - "If you or someone in your household has HUSKY D, we'd like to share this information about upcoming Medicaid changes. The flyer explains what we know today and the steps you can take now to stay informed."
    - "We're providing information about upcoming HUSKY D changes so people have time to prepare. Even if you're not sure the changes apply to you, we encourage you to review the flyer and watch for updates from DSS."
    - “If you have HUSKY D, make sure your contact information with DSS is current so you can receive any important update. We also encourage you to use the DSS online pre-screener to see if the changes might apply to you."

Note any partner requests for additional copies, translations, or follow-up support.

**Note that “HUSKY D members” refers to HUSKY D recipients or beneficiaries.*

Quick Implementation Checklist
Before launch, confirm that you have: ☐ Reviewed the toolkit and obtained necessary approvals ☐ Identified locations for distribution, including hospital departments, healthcare settings, and community settings ☐ Customized materials with approved branding or local contact information (if applicable) ☐ Shared provider-facing guidance with staff ☐ Prepared staff to introduce the materials and refer patients appropriately ☐ Printed, distributed, and posted patient-facing materials ☐ Distributed materials to community partners ☐ Posted information throughout healthcare settings, including through digital communications channels ☐ Established a process to monitor distribution, restock materials, collect feedback, and update resources as needed