



Medicaid and CHIP Engagement and Enrollment Strategies for Multi-Generational Families

January 24, 2017

2:00 p.m. EST



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Agenda

- Overview and Introductions
- Multi-Generational Families & Healthcare
- Prioritizing Access to Healthcare for Children
- Reaching Multi-Generational Families Through School-Based Health Outreach
- Service Linkage Through Family Engagement
- Comprehensive Case Management for Children and Families
- Campaign Resources
- Questions and Answers



Poll Question: Which multi-generational family structure does your organization see most frequently in your community?

- a. Multiple generations living in one household**
- b. Single parent homes or diverse family structures**
- c. Children being raised by grandparents, aunts/uncles, or other relatives**

Multi-Generational Families & Healthcare



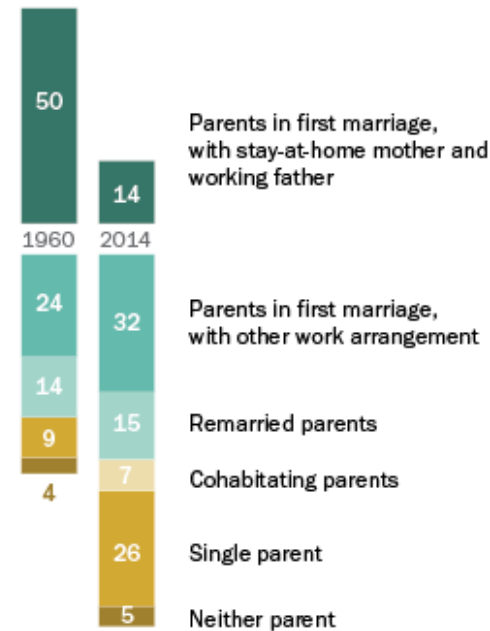
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Changes in the American Family

- The structure of families and households has undergone significant changes in American society in recent years.
- What was historically thought of as a “traditional” family – a husband, wife, and children – has been represented in American culture for much of our history.
- In the last few decades we have begun to see many different forms of household structures start to emerge.
- The public opinion of how we define and create families has also evolved.

How the American family has changed

% of children under 18 living with ...



Note: In 1960, data for children with cohabiting parents were included with “single parent.” Figures may not add to 100% due to rounding.

Source: Pew Research Center analysis of 1960 decennial census and 2014 American Community Survey (IPUMS)

PEW RESEARCH CENTER



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Modern American Families

- A number of social and economic factors have led to significant changes in the way modern Americans structure their home lives.
- Modern Americans are marrying less or later in their lives, having fewer children, living alone or cohabitating more often, divorcing more often, and marrying multiple times.
- Fewer than half (46%) of U.S. kids younger than 18 years of age are living in a home with two married heterosexual parents in their first marriage.

<http://www.pewresearch.org/fact-tank/2014/12/22/less-than-half-of-u-s-kids-today-live-in-a-traditional-family/>



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Diverse Family Structures

- 15% of children are living with two parents who are in a remarriage.
- 34% of children today are living with an unmarried parent—up from just 9% in 1960, and 19% in 1980
- 4% of children are living with two cohabiting parents, according to Current Population Survey (CPS) data.
- 5% of children are not living with either parent. In most of these cases, they are living with a grandparent.



The Rise of Multi-Generational Households

- The number and share of Americans living in multi-generational family households has continued to rise.
- A record 60.6 million or nearly 1 in 5 Americans live in multi-generational households.
- Growing racial and ethnic diversity in the U.S. population helps explain some of the rise in multi-generational living.



Connecting Families to Healthcare

- Multi-generational households, kinship care, same-sex parents, single parents, and siblings living together are just some of the many diverse family structures in which children live and thrive.
- Medicaid and CHIP offer health coverage for all eligible children and families.



The background of the slide is a close-up, slightly blurred image of a computer keyboard. Several keys are visible, each with a different social media icon. From top to bottom, the visible icons include a blue Twitter bird, a red and white YouTube play button, a blue Facebook 'f', a blue and white YouTube 'Tube' logo, a blue and white Facebook 'f', a blue and white YouTube 'Tube' logo, a red and white Pinterest 'P', and an orange and white Instagram camera icon. A semi-transparent blue rectangular box is overlaid on the keyboard, containing the poll question and options in white text.

Poll Question: What percentage of outreach and enrollment work does your organization do with multi-generational families?

- a. 0-25%**
- b. 25-50%**
- c. Over 50%**

Prioritizing Access to Healthcare for Children

JaNeen Cross, DSW, MSW, MBA
HEALS Policy Fellow
National Association of Social Workers



National Association of Social Workers



- Social work membership organization
- Improves growth & development
- Develop professional standards
- Advance social policies



Locating Eligible Families

Point of contacts:

Family Engagement

- Clinics, hospitals
- Schools, day care programs
- Shelters, community centers (community)
- Agencies
- Mental health, child welfare, juvenile justice



Connecting Kids to Coverage

Policy

Bridge access gaps & health disparity:

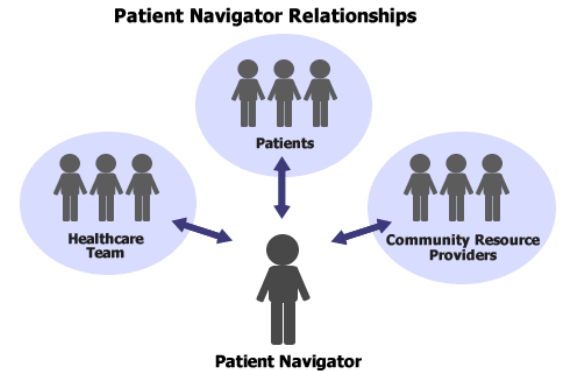
- Monitor policy changes
- Employment trends & opportunities
- Address current events
- Education



Insurance Enrollment

Practice:

- Identify uninsured & underinsured
- Refer or initiate insurance coverage
- Educate about insurance (eligibility, benefits, provider options)
- Assist in reinstating lapses or coverage losses
- Navigating coverage options



Insurance Enrollment

Medicaid & CHIP:

NASW Activities & Programs

- Policies
- Insurance open enrollment
- Health promotion & health literacy
- Champion for overall health



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Community Outreach

Partnerships

Government

Centers for Medicare & Medicaid Services, Department of Health and Human Services, National Institute of Health, The White House, Agency for Healthcare Research & Quality, Substance Abuse & Mental Health Services Administration

Professional Organization

Society for Social Work Leadership in Health Care, Association of Oncology Social Workers, National Association of Perinatal Social Workers, American Psychological Association

Education

Council for Social Work Education, Society for Social Work Research, Schools of Social Work



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Community Outreach



Medicaid & CHIP:

- Health education & leadership scholars (HEALS)
- Healthcare champions
- Social work day on the Hill
- Grassroots toolkit



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Resources & Tools

Open Enrollment Resources

- [Families USA Enrollment Assister Resource Center](#)
- [Enroll America](#)

ACA websites

- [Kaiser Family Foundation](#): includes a health reform FAQ and glossary, research and analysis, state resources.
- Families USA: [Health Reform Central](#) has numerous resources and fact sheets on the ACA
- [Health Reform GPS](#) - has numerous resources relating to ACA implementation and challenges.



Resources & Tools

NASW

- Practice Perspectives
- Smartbrief

Population Specific Organizations and Resources

- Young People: [Young Invincibles](#)
- African American & Faith Based Community: [National Action Network](#)
- Latino: [National Council of La Raza](#)
- Asian: [Asian American Pacific Islander Health Forum](#)
- Women: [National Women's Health Network](#)
- Families and Children: [Families USA](#)
- Additional Toolkits for Targeted Groups: [Enroll America](#)

Social Work
SmartBrief



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Thank you!

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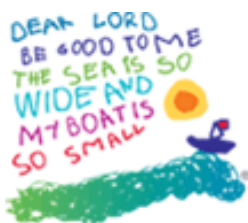
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Reaching Multi-Generational Families Through School-Based Health Outreach

WyKisha McKinney

Program Director

Children's Defense Fund–Texas



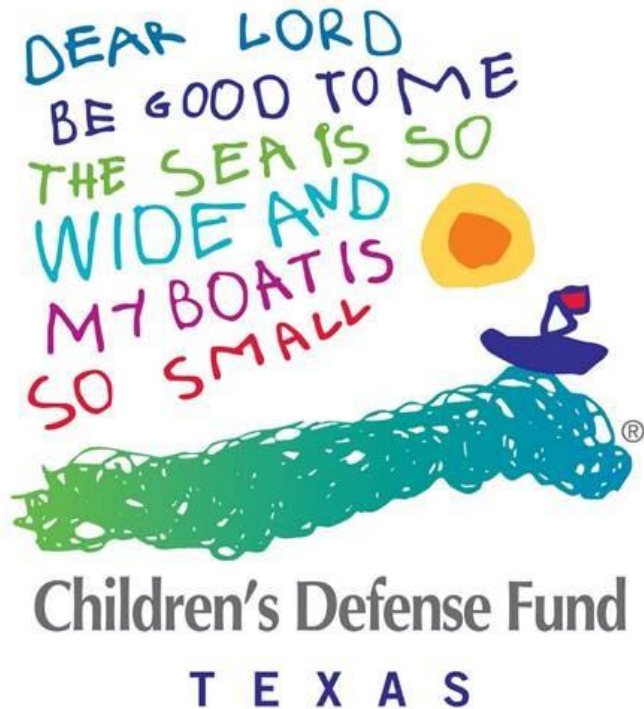
Children's Defense Fund

A strong, effective, independent voice for *all* the children of America



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About Us



The Children's Defense Fund Leave No Child Behind® mission is to ensure every child a **Healthy Start, a Head Start, a Fair Start, a Safe Start and a Moral Start** in life and successful passage to adulthood with the help of caring families and communities.



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Ensuring a Healthy Start for Children

The CDF Child Health Outreach and Enrollment project helps to ensure a Healthy Start for Texas children, so that every child has access to affordable, comprehensive health and mental health coverage and the care they need to grow and thrive.

We do this work by:

- Meeting families where they are
- Collaborating with schools, businesses, media and community partners
- Providing education and training about affordable coverage options for children and families



School-based Health Outreach

More than 35 Texas school districts and other organizations the country have taken part in the campaign by:

- Adding a health insurance question to school enrollment forms
- Collecting data to identify the need
- Following-up with information about how to apply, use and renew CHIP and Medicaid
- Educating those who do not qualify about Healthcare.gov or other community health clinic options



www.insureallchildren.org

http://www.insureallchildren.org/

Insure All Children

Page Safety Tools




Does your child have health insurance?

About Vision Build Identify Reach Enroll Sustain Engage Download the Toolkit

Happy, Healthy, and Ready to Learn! #InsureAllChildren

Schools are in a unique position to identify and connect eligible children to health insurance. Our goal in offering this toolkit is to provide school and community leaders and parents and child advocates with a framework to build community support for connecting children to health insurance through schools and to provide the practical steps schools need to take to implement a successful and sustainable campaign. This toolkit sets the stage for school districts to partner with community agencies to identify and enroll eligible students in health insurance through a proven strategy in a simple, routine and cost effective way. **When we insure our children, we ensure our future.** Asking this simple question, **"Does your child have health insurance?"** on important annual school forms, is central to ensuring all children in your school district are happy, healthy and ready to learn.

Make sure to visit the [Toolkit User's Guide](#) as you get started.



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Expanding Our Work

CDF-Texas is currently working to improve health outcomes for children in six rural counties across Texas:

- Hidalgo
- Willacy
- Cameron
- Nacogdoches
- Smith
- Shelby



Reaching Multi-Generational Families through Schools

- New student enrollment/orientations
- Referrals from school staff/administrators
- Special events for families
 - Donuts with Dad
 - Muffins with Mom
 - Grandparent's Day



Key Players Within the School

- Health/Nursing Leads
- Administrators/Principals/Teachers
- Parent Involvement Representatives
- Community Partners (i.e. Communities in Schools, School Health Clinics, etc.)
- Parents and Students (Word of mouth is the best form of marketing)



Tips for Assisting the Family

- Take the time to learn about the family
 - Who lives in the home?
 - Who takes care of the children?
- Make home-visits if/when necessary
- Include resources specific to multi-generational families
- Remember that many families have limited experience with technology and online processes
 - Paper applications can be still downloaded at www.yourtexasbenefits.com



Thank you!

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A strong, effective, independent voice for *all* the children of America



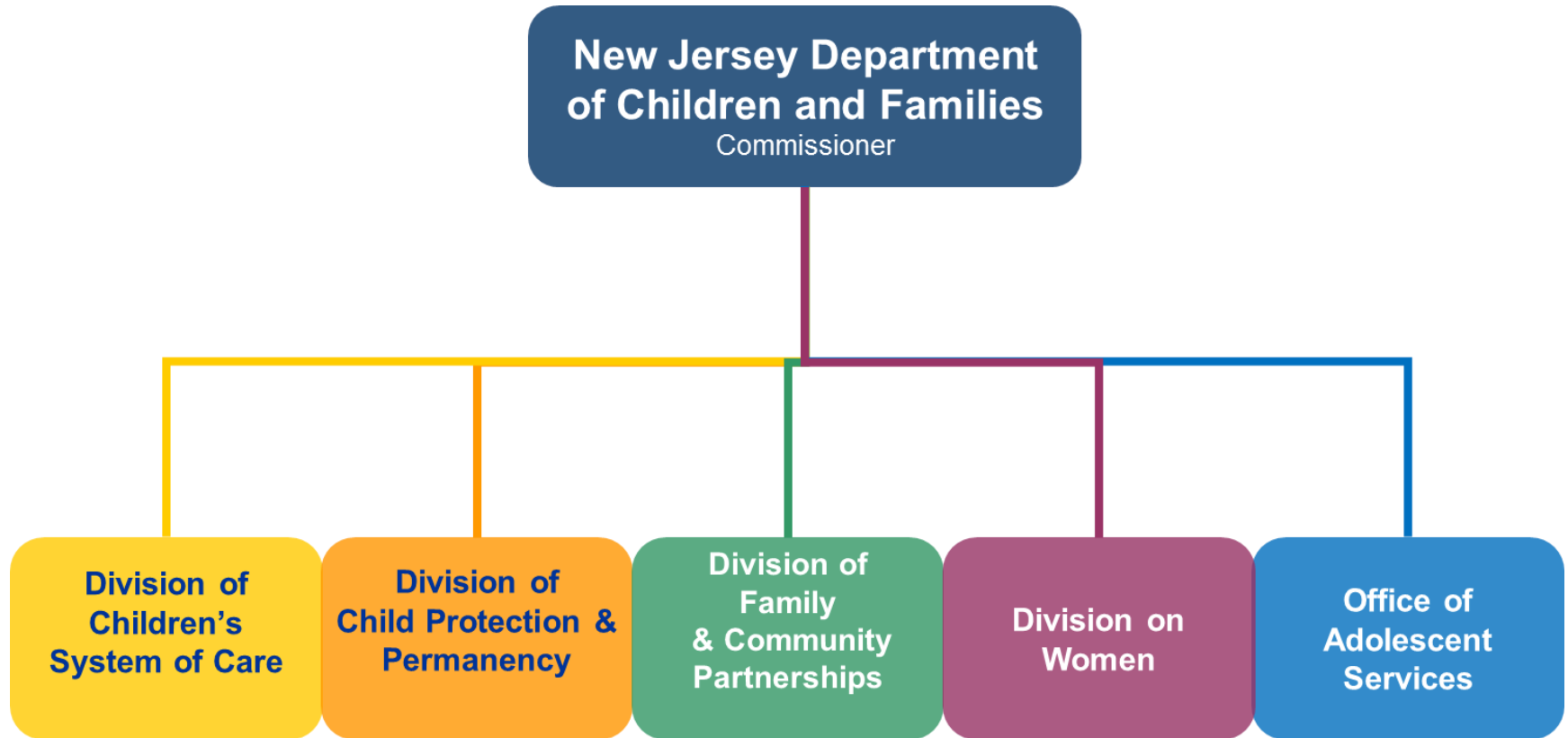
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Service Linkage Through Family Engagement

Alan Vietze, LCSW
Deputy Director
Children's System of Care (CSOC)



NJ Department of Children and Families



Children's System of Care Objectives

To help youth succeed...



At Home

Successfully living with their families and reducing the need for out-of-home treatment settings.



In School

Successfully attending the least restrictive and most appropriate school setting close to home.



In the Community

Successfully participating in the community and becoming independent, productive, and law-abiding citizens.



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Language is Important!

Language of CSOC

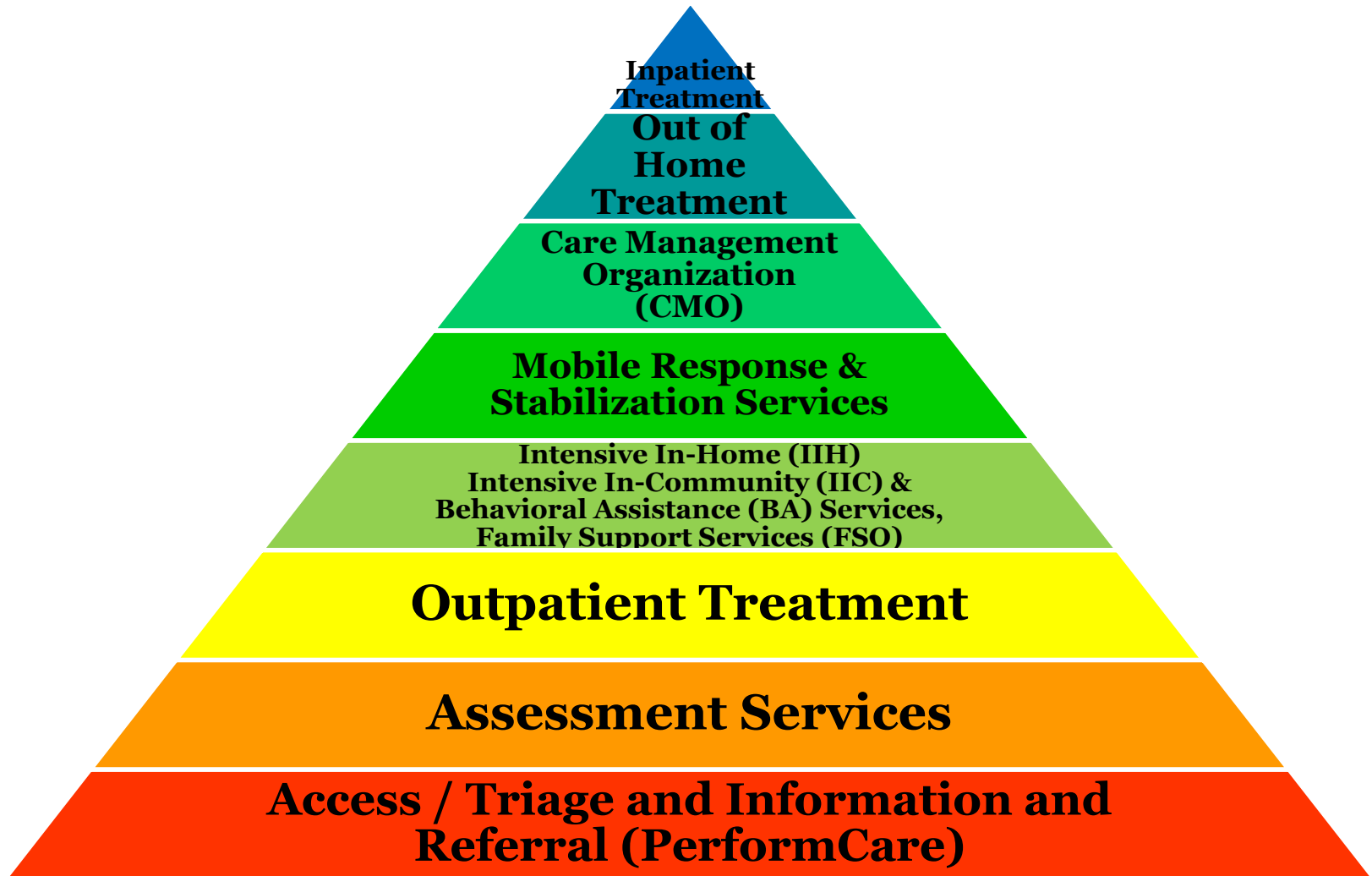
- Child, Youth, Young Adult
- Parent/Caregivers
- Treatment
- Engagement
- Transition
- Missing
- Home Visit

NOT the Language of CSOC

- Client, Case, Consumer
- Mom and Dad
- Placement
- Motivated
- Close/Terminate
- Runaway
- Therapeutic Leave



CSOC Continuum of Care



Child Family Team (CFT) Model



- Child Family Team (CFT): A team of family members, professionals, and significant community residents identified by the family and organized by the care management organization to design and oversee implementation of the Individual Service Plan
- CFT members should include, but are not limited to, the youth, parent/legal guardian, CMO, natural supports, treating providers, educational professionals, probation, DCP&P, etc.
- Decisions are driven by the CFT
- Family members are encouraged to actively participate in all aspects of treatment (including family therapy, treatment meetings, visits)



Presumptive Eligibility (PE)

- Granted if youth appears eligible for CSOC services based on assessment and clinical need
- Declared “presumptively eligible” for service
- Service authorization linked to billing; based on 3rd party review by CSA
- 3560-vs-full Medicaid coverage
- Medicaid coverage under waivers
- Covers CSOC services-CMO, FSO, OOH, IIC/BA, MRSS, IDD services, substance use service
- PE Coordinators at every CMO
- CYBER tab to monitor eligibility status



How Does NJ's Children's System of Care Model Impact the Youth We Serve?

The system of care model works

- Less children in institutional care
- Less children accessing inpatient treatment
- Closure of state child psychiatric hospital and RTCs
- Very few children in out-of-state facilities
- Children in out of home care have more intense needs than prior to the system of care development
- Wraparound works
- Less youth in detention centers – many reasons, not necessarily because of the system of care

Federal funding support under Title XIX



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For more information...

Children's System of Care

<http://www.state.nj.us/dcf/families/csc/>

PerformCare Member Services:

877-652-7624

www.performcarenj.org



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Thank you!

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www.nj.gov/dcf/about/divisions/dcsc/



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Comprehensive Case Management for Children and Families

Ann Bacharach

Special Projects Director

Pennsylvania Health Law Project



*Helping People in Need Get
the Health Care They Deserve*



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Focus on Vulnerable Adolescents

- Adolescents (13-25) in alternative education sites
 - Alternative high schools
 - GED to community college programs
- Youth involved with juvenile justice system
 - Opportunity at intake
 - Arrested and warned
 - Youth on probation, not adjudicated delinquent
 - Opportunity at discharge
 - Youth leaving supervision

Focus on Vulnerable Adolescents

Adolescents ages 13 – 25

- Can be living with parent, grandparent, aunt, uncle, sibling, nieces, nephews, their children or on their own
- Most applications have been for the adolescent but some have included other family members – parents, siblings, nieces
- Most applicants are citizens but the project has assisted lawfully present immigrants, a refugee, an asylee and a family with suspended deportation



Alternative Education

Youth under 21 returning to school after leaving high school

- Must be over 18 but under 21
- Full time students
- School requires health coverage
- Case managers identify youth without proof of coverage
- Youth also self-refer
 - Themselves
 - Their friends



Alternative Education

- Transition to adulthood – first steps on their own
- Many youth are not aware of their lack of coverage or don't know how to go about applying
- Navigator set up regular times to be on site
 - Varying to meet attendance needs and other schedule demands
 - Provided pizza at lunch time
 - Worked with case managers to identify youth without health insurance
 - Check Medicaid enrollee database



Alternative Education

- Use the state's web portal for applications
- Capacity to upload documents
 - In-person
 - Share the screen and complete together
 - Over the phone
- Use text messaging as reminders to complete the verification
- Use cell phones to take photos of proof
 - ID, Social Security cards, pay stubs



Success Story

YouthBuild Philly

- Alternative high school for adolescents who are getting a GED and vocational training
 - Building trades, home health, food service, etc.
- Goal – 100% of students will have health coverage
- Case managers identified students without proof of insurance
- Navigator assisted uninsured students through the application process
- Of 100 students in the cohort, 11 students remain uninsured – half of them had insurance recently



Juvenile Justice

- Outreach to juvenile probation officers and staff, public defenders, child welfare staff
- Interest from multiple counties
- Distribution of outreach materials
 - Palmcards, posters, flyers in English and Spanish
- Presentations to juvenile probation staff
- Newsletter article through PA Juvenile Court Judges' Commission



Youth Involved with Juvenile Justice

Persuasive reminders about Medicaid

- Covers all medically necessary services up to age 21
- Can be secondary coverage when there is employer-based or individual coverage
- Covers Multi-Systemic Therapy, a common treatment recommendation, not usually covered by private insurance
- Medicaid payments can offset juvenile justice costs
- Medicaid coverage provides continuity
 - Medications, therapy, health services



Thank you!

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the Health Care They Deserve*



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Connecting Kids to Coverage National Campaign Resources



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Additional Campaign Materials



- Outreach Materials— Customizable Posters/Palmcards, Videos, Tip Sheets
- Informational Webinars
- “Campaign Notes” eNewsletter
- Ready-Made Articles, Radio Scripts
- Digital Media Tools
- TV & Radio PSAs (forthcoming)



Digital Media Tools



- Social Media Graphics & Guide
- Web Buttons & Banners
- Sample Posts



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Customizable Materials

Posters, flyers, palmcards and tear pads

You may choose to insert your program name(s), your state's annual income eligibility limit for a family of four, your website address and/or phone number, and up to two logos. **Please Note:** You may request these changes on all customizable materials.

Your program name(s)

Your state's annual income eligibility limit for a family/household of four

Your website and/or phone number

Up to two logos



Learn how to request material customization here:

<https://www.insurekidsnow.gov/downloads/library/print/materialscustomizationguide-english.pdf>



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Outreach and Enrollment Best Practices

- Outreach Video Library
 - <https://www.insurekidsnow.gov/webinars-videos/video/index.html>
- Webinar Archive
 - <https://www.insurekidsnow.gov/webinars-videos/webinars/index.html>



Keep in Touch With the CKC Campaign

- Follow us @IKNGov
- Engage with the Campaign on social media
 - Re-tweet, share or tag messages using the hashtags #Enroll365, #KidsEnroll, #Medicaid and #CHIP
- Sign up for eNewsletters here:
 - <https://www.insurekidsnow.gov/newsletter/subscribe/index.html>
- Email us at: ConnectingKids@cms.hhs.gov



Questions?



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Thank you!



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