

The Santa Clara County Children's Health Initiative (CHI) is an innovative effort to expand health insurance coverage of children in the county. CHI has two parts; the first is a new insurance product, Healthy Kids, which covers children in households with income up to 300 percent of the federal poverty level who are ineligible for the two major state insurance programs, Medi-Cal and Healthy Families. The second part of CHI is a comprehensive outreach campaign that finds uninsured children and enrolls them in the appropriate program. This evaluation of the Santa Clara CHI is funded by the David and Lucile Packard Foundation and is conducted by Mathematica® and its subcontractors, the Urban Institute and the University of California at San Francisco.

Santa Clara County Children's Health Initiative Outreach and Enrollment Efforts Are Effective and Helpful to Parents

by Dana Hughes (UCSF)

A major component of the Santa Clara County Children's Health Initiative (CHI) is expanded and coordinated outreach for the three health insurance programs available to children in families with incomes under 300 percent of the federal poverty level: Medi-Cal, Healthy Families, and Healthy Kids. CHI partners work together to conduct extensive, coordinated outreach to eligible families and assist parents with applying. The intensity and coordination of the outreach provided ensure that all children enroll in the programs for which they are eligible. Between the inauguration of the program in 2001 and December 2005, CHI had processed 105,000 applications, a clear testament to the efficacy of its outreach. This brief provides information about methods of outreach and enrollment, as well as parents' perceptions of the application and enrollment process, with emphasis on the new, locally funded Healthy Kids program, which provides coverage for children in families with income up to 300 percent of the federal poverty level who are not eligible for Medi-Cal or Healthy Families. The information in this brief is derived from a survey of parents with children enrolled in Healthy Kids, focus groups, and site visits.

Outreach and Enrollment in the Santa Clara CHI

Since the launch of CHI in 2001, outreach and enrollment activities have occurred at many different levels and involved a wide variety of players. Participating groups include county agencies, clinics, the county health department, schools, community-based organizations (including one local foundation), and religious congregations. An outreach committee coordinates all activities to avoid duplication and ensure that appropriate areas are served.

Outreach and enrollment are typically performed by Certified Application Assistors (CAAs) linked to community organizations and the county. The state and the Santa Clara Family Health Plan provide formal certification to CAAs allowing them to assist parents in completing the Healthy Families, Medi-Cal, and Healthy Kids applications. The Santa Clara Family Health Plan is a public health plan offering affordable insurance coverage to low-income people in Santa Clara County.

Although application assistance is optional for Medi-Cal and Healthy Families applications, it is required for Healthy Kids applications. CAAs are connected to parents seeking care for their children through clinics where CAAs are present, referrals from community events and schools, agencies that offer parents walk-in assistance to complete applications, and a toll-free number advertised on posters and fliers. All CAAs and county eligibility workers are cross-trained for all three programs, so families can rely on them for appropriate recommendations and are relieved of the burden of determining which program is right for their child.

HEALTH INSURANCE PROGRAMS FOR LOW-INCOME SANTA CLARA CHILDREN	
Medi-Cal	California’s Medicaid program. State and federally funded health coverage for citizen and documented immigrant children under 19 years. Eligibility varies depending on age and family income level.
Healthy Families	California’s SCHIP program. State and federally funded health coverage for citizen and documented immigrant children under 19 years from families with incomes above the no-cost Medi-Cal eligibility level and below 250 percent of the federal poverty level.
Healthy Kids	Healthy Kids—administered by CHI—covers children under 18 years of age in households up to 300 percent of the federal poverty level who are ineligible for the state-run Healthy Families and Medi-Cal programs.

CHI outreach and enrollment consist of a continuum that begins with informing families about the availability of health insurance for their children and ends in providing assistance in completing applications and renewal forms to ensure retention. Methods of informing families include community outreach, such as presentations at health fairs and other events; help centers that provide enrollment assistance and field calls from interested parents; paid advertising in print and electronic media, as well as “earned” or free media coverage; school-based outreach; and “in-reach” assistance, which identifies and enrolls children at places where they come for health care and other services. In-reach has become the primary approach because of the large number of uninsured children seeking health care in clinics and community health centers. To boost its effectiveness, enrollment workers contact parents before health care appointments and ask them to bring needed documents so an application can be completed on the spot.

Other outreach methods, such as community-based events, have declined over time because CHI partners prefer approaches that allow children to be enrolled at the time of an initial contact with parents, rather than at a future appointment. It can also be challenging to complete applications during community events, because parents do not routinely carry needed paperwork with them. The use of paid media has also declined dramatically because it became less productive over time than in-reach and word-of-mouth communications.

All CHI partners use printed marketing materials to advertise and encourage parents to seek assistance through a toll-free number. A committee made up of representatives from each of the major outreach partners coordinates the campaigns of the various partner agencies and approves all marketing materials. CHI partners have been flexible about using different materials in different settings and with different populations.

Parent Perceptions of the Healthy Kids Outreach and Application Process

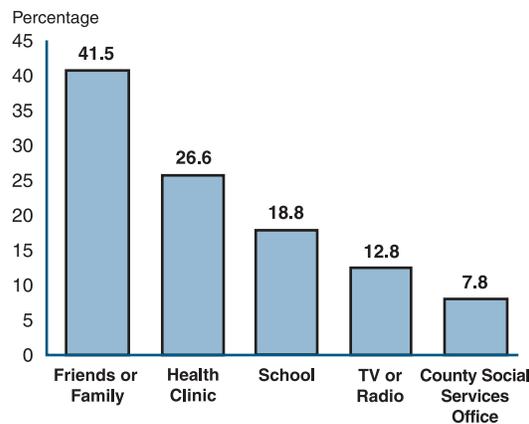
Parent perceptions of the outreach, application, and renewal processes for Healthy Kids include the following:

Most parents heard about Healthy Kids through family and friends. Most parents of Healthy Kids enrollees identified friends or family as the source of their knowledge about the program (42 percent), followed by health clinics (27 percent) and schools (19 percent). Some parents also cited TV or radio (13 percent), the county social service office (8 percent), and many less frequent sources, such as medical

providers, hospitals, print and outdoor media, and churches. It is not unusual for people to learn about programs like Healthy Kids through multiple sources (Figure 1).

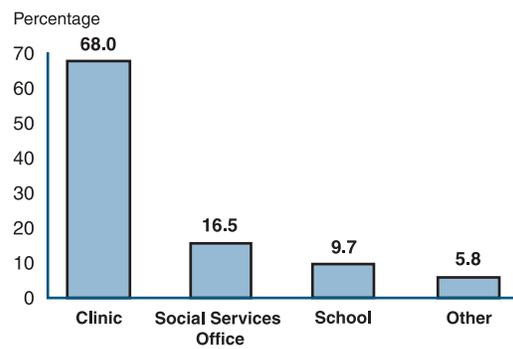
Most parents apply in clinics. Over two-thirds of enrollee applications were completed at clinics or community health centers (Figure 2). Families who heard about the program from family, friends, clinics, or schools were particularly likely to have applied in a clinic. After learning about the program from these sources, some parents then went to a clinic to apply, while others waited until they had a medical appointment at a clinic before applying. Far fewer applied in social service offices (17 percent) and schools (10 percent). One-third of the parents who learned about Healthy Kids through schools actually applied there.

Figure 1: Most Parents Heard About Healthy Kids Through Family and Friends



*Totals add to more than 100 percent. Survey respondents were permitted to cite more than one source.

Figure 2: Most Parents Apply for Healthy Kids Through Clinics



CAAs are very helpful. All Healthy Kids applications are completed with help from trained CAAs. The overwhelming majority of parents (92 percent) said the assistance was very helpful. Almost all (97 percent) rated the assistance as very or somewhat helpful. The survey results are consistent with comments parents made during focus groups. For example, one parent stated, “I went to the clinic ... and asked what I needed to do. I made an appointment for the next day and they filled out my papers.” Another said, “It was easy because we got help.” One parent talked about the importance of assistance for her: “I tried to fill it out on my own and then saw that I couldn’t ... I got help.” In the focus groups, parents also expressed appreciation for assistance provided in their native language, which was typically Spanish; 82 percent of applications were completed in Spanish.

The application is easy to complete. Over half the parents (52 percent) reported that completing the application was very easy. Another 41 percent found the application somewhat easy to complete. Fewer than 10 percent indicated that it was somewhat difficult or very difficult.

The renewal application is also easy to complete. Healthy Kids enrollees must renew their enrollment on an annual basis. Almost two-thirds (62 percent) of parents said that renewal was very easy; another 32 percent said that it was somewhat easy. Only 5 percent reported that it was somewhat difficult; fewer than 1 percent found it very difficult.

CHILDREN'S HEALTH INITIATIVE OUTREACH PARTNERS	
Santa Clara Family Health Plan (SCHFP)	The SCHFP is a non-profit, public, managed care health insurance plan serving Medi-Cal, Healthy Families, and all Healthy Kids beneficiaries in Santa Clara County.
Santa Clara Valley Health and Hospital System (SCVHHS)	The SCVHHS includes the county health department and the Santa Clara Valley Medical Center, and offers prevention, education, and treatment programs to all residents of Santa Clara County.
Santa Clara County Social Services Agency (SSA)	The SSA is a public agency that provides financial and protective services for residents of Santa Clara County, including administering the local Medi-Cal program.
Casa en Casa	Casa en Casa, a project of the Mayfair Improvement Initiative, hires and trains community health educators in the Mayfair neighborhood.
Resources for Families and Children	A community agency based in Santa Clara County, Resources for Families and Children promotes the well-being of children by delivering child support services.
Mayfair Improvement Initiative	The Mayfair Improvement Initiative focuses on community transformation that is built on developing community assets and creating strong foundations for families.
Asian Americans for Community Involvement (AACI)	AACI provides health and human services targeted to Asian-Pacific American communities.
Choices for Children	Choices for Children supports families, communities, and child care providers through child care subsidies and referrals to parents and technical assistance to providers to ensure high quality child care options in Santa Clara County.
Westside CHI	The Westside CHI is a partnership of schools, political leaders, foundations, and community-based organizations. Its goal is to identify children in the western section of Santa Clara County who are eligible for health insurance and to assist those children to enroll in available programs.
Alum Rock Collaborative	The Alum Rock Community Collaborative is a school collaborative that assists families in the Alum Rock school district with health insurance enrollment. It is composed of school personnel, Santa Clara County staff, the California Teachers Association, and local organizations.
Health Trust	The Health Trust is a local health foundation with an active outreach and enrollment program that collaborates with many other community organizations to enroll children in appropriate health insurance programs.
People Acting in Community Together (PACT)	PACT is a community-, faith-based organization which works on a variety of social issues, including seeking universal health care.

What Do These Findings Mean?

Outreach and application assistance for Medi-Cal, Healthy Families, and Healthy Kids is a major component of the Santa Clara County's Children's Health Initiative. These outreach efforts have proven exceptionally productive. A study examining Medi-Cal and Healthy Families enrollment trends in Santa Clara County after the implementation of CHI found a 28 percent higher rate of enrollment in these two programs in the first two years of CHI, compared with trends in other demographically and economically similar areas in California (<http://www.mathematica-mpr.com/publications/pdfs/chiexpandcov.pdf>). More than 13,000 children are enrolled currently in Healthy Kids, and a high level of demand has resulted in a "wait list" for new enrollees age six and older. Since CHI began in 2001, the partners have received 105,000 applications for coverage for the three programs combined.

At the time of the survey of Healthy Kids participants in 2003-2004, word-of-mouth was the most powerful method of informing parents about the availability of health insurance for their children. CHI has been effective in using health care settings as a major venue for enrollment: most parents applied for Healthy Kids in a clinic or community health center, regardless of where they learned about the program. CHI partners have been flexible in using various outreach and enrollment methods. After approaches such as outreach through community events and paid media proved to be less successful in leading to completed applications and enrollment, partners responded by focusing on other strategies, such as "in-reach" and word-of-mouth. From the beginning, partners made a concerted effort to establish the trustworthiness of outreach and enrollment efforts, as well as the Healthy Kids program. This effort is likely to have bolstered the effectiveness of word-of-mouth as an outreach tool. As awareness of Healthy Kids and trust in the program increased, powerful word-of-mouth communication through the community contributed to program credibility and visibility, without the considerable investment of resources required for media campaigns and community events. In counties and communities where the public health care infrastructure is not as strong and where neighborhoods are more dispersed, the most effective mix of outreach approaches may be different.

As policymakers work to ensure all children have access to health care, the application, renewal, and CAA training procedures of the Healthy Kids program could serve as a powerful model. CHI's application and renewal processes make it relatively easy for parents to enroll and re-enroll their children in Healthy Kids. Parents express consistently positive opinions about the outreach, application, and renewal stages, regardless of where they heard about the program or where they applied. In addition, by cross-training CAAs and eligibility workers, CHI has made the three health insurance programs appear as seamless as possible to families, placing the burden of determining which program is right for which child on the enrollment worker, not on the family.

STUDY METHODS AND DATA SOURCES

Information for this report is derived from three sources: site visits, parent focus groups, and a survey of parents of children enrolled in Healthy Kids. Two week-long site visits involving in-depth interviews, review of administrative records, and observation of outreach and enrollment activities were conducted in May 2003 and August 2004. In all, more than 65 interviews were conducted. Two focus groups with parents of children enrolled in Healthy Kids took place in December 2003 and February 2004. The 2003 focus group involved 10 parents whose children had been enrolled in the program for at least one year. The 2004 focus group included 13 parents whose children were newly enrolled. Topics included family health insurance coverage, experiences enrolling in Healthy Kids, the Santa Clara Family Health Plan's orientation program for new enrollees, experiences with the renewal process, experiences with obtaining health and dental care, and views about cost-sharing.

This report also draws from Mathematica's telephone survey of 1,322 parents of Healthy Kids enrollees. Parents were asked how they learned about the program, where they applied, what their perceptions were of the quality of assistance received, and how easy it was to apply and re-enroll. Additional information about the evaluation and the design of the survey can be found in the full report, available at www.mathematica-mpr.com/health/chi.asp.

This brief is based on findings from the final report, "Outreach and Application Assistance in the Santa Clara County Children's Health Initiative," by Dana Hughes, Embry Howell, and Christopher Trenholm. For more information on the report, please contact Dana Hughes at dana.hughes@ucsf.edu.

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This report is one of a series from the evaluation of the Santa Clara County Children's Health Initiative. Information on the series is available at www.mathematica-mpr.com/health/chi.asp.

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Mathematica Policy Research, Inc.
PO Box 2393
Princeton, NJ 08543-2393

(609) 799-3535
www.mathematica-mpr.com

**The University of California,
San Francisco**
San Francisco, CA 94143

(415) 476-9000
www.ucsf.edu

Urban Institute
2100 M Street, NW
Washington, DC 20037

(202) 833-7200
www.urban.org