Project Title: "Starting Points for Idaho Youth"

Project Number: H17MC06710

Project Director: Mary Lou Kinney, MA

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Project Period: March 1, 2006 through February 28, 2011

Total Amount of Grant Awarded: \$250,000 over 5 years (slightly reduced in the last two years due to federal budget cuts)

Abstract

PURPOSE OF PROJECT AND RELATIONSHIOP TO SSA TITLE V MCH PROGRAMS:

From March 1, 2006 through February 28, 2011, our Healthy Tomorrows' (HT) Project "Starting Points for Idaho Youth," focused on reaching and enrolling low-income, uninsured youth (13 to 19 years) into our state children's health insurance programs (CHIP/Medicaid). We targeted our project's outreach to five rural and frontier counties with a high rate of uninsured youth and Hispanic populations. Throughout the five year process, our project sought outreach and enrollment advice and suggestions from our statewide Cover Idaho Kids Coalition (the state AAP and the state MCH directors participate in this Coalition) and, in the last two years, also sought advice from our Idaho AHEC Board who are familiar with health care access and services in rural/frontier Idaho communities. Most importantly, we encouraged and listened to advice and suggestions from individuals, agencies and youth groups in the communities within these five counties.

Although our five-year project produced some strong outreach partnerships and new and effective outreach strategies, we did not meet all of our goals and objectives for this project. Our goal was to reach and enroll 1500 new 13 to 19 year olds in these five counties; we were only able to gain 822 youth (54% of our goal) over the five years. However, of the 822 youth gained, a significant number are Hispanic --as we have detailed in our report narrative.

The primary *Healthy People 2010* objectives addressed in this project were: 1) Increase the proportion of persons with health insurance; and 2) Increase the proportion of persons who have specific sources of on-going care.

GOALS AND OBJECTIVES:

- Goal 1: Through Community youth organizations in five rural and frontier Idaho counties, create new and innovative strategies to reach uninsured youth with information about state health coverage programs.
 - Objective 1: Involve existing youth organizations in designing and implementing outreach;
 - Objective 2: Sustain lasting outreach partnerships with community
- Goal 2: Through the youth organization effort, enroll 1,500 eligible youth in state health coverage program
 - Objective 1: Offer hands-on CHIP enrollment assistance at community events.
 - Objective 2: Promote use of 2-1-1 Careline for CHIP assistance.

METHODOLOGY:

Over the five years of our HT Project, we implemented a wide variety of activities to achieve our goals and objectives. We did market and involve ethnic diverse programs (for

example, Migrant Education Program and Hispanic Community Council) with some success. Every year during the five years, there was an outreach "plan" both informal and formal (as explained in our report narrative) for our youth outreach and enrollment activities in communities within the five counties.

A summary of our activities are as follows:

Goal 1: Create new and innovative strategies to reach uninsured youth

- Objective 1: Involve existing youth organizations in designing and implementing outreach. <u>Activities</u>: Gathered input for outreach strategies from youth in 4-H, YAK, Girls on the Run, and other community youth groups over the five years of our HT project.
- Objective 2: Sustain lasting outreach partnerships with community.

 <u>Activities</u>: Secured outreach commitments from community health clinics, school nurses, schools and youth groups as evidenced by the participation of 51 community contacts in our January 20, 2011 "CHIP/Medicaid Train-the-Trainers" webinar. At the end of the webinar, 81 % of the participants surveyed (using Survey Monkey) thought the webinar was valuable in helping them discuss current CHIP/Medicaid information and materials to share with other key contacts in their communities.

Goal 2: Enroll 1,500 eligible youth in state health coverage program

- Objective 1: Offer hands-on CHIP enrollment assistance at community events.
 <u>Activities</u>: Assisted families and youth at school health fairs, health clinics, and one-on-one in communities throughout the project's five years.
- Objective 2: Promote use of 2-1-1 Careline for CHIP assistance.
 <u>Activities:</u> Disbursed 2-1-1 Careline materials at all events and through mailings and media outreach. Idaho 2-1-1 Careline partnered with us on all Back to School Campaigns over the 5 years of the project.

EVALUATION:

Several evaluation methods were employed to assess the effectiveness of the project in attaining the goals and objectives. These methods included:

- 1. Tracking of calls by Idaho Careline 2-1-1 during and immediately after CHIP/Medicaid outreach events;
- 2. Tracking through data on CHIP/Medicaid enrollment and renewal from Idaho Department of Health and Welfare (IDHW) received on a quarterly or semi-annual basis;
- 3. Participating with our project staff and Coalition representatives in an AAP site visit in 2007;
- 4. Completing and reviewing a mid-Project Written Assessment Report (2008) compiled by an outside-evaluator;
- 5. Using Survey Monkey and other tools to obtain immediate feedback from participants in project webinars and training meetings.

Although our evaluation plan altered after year 2 of the HT Project because of the change from the Americorps involvement, the five evaluation processes listed (above) plus the advice from our Coalition, gave us adequate to good guidance for our project over the 5 years. We used the evaluation information to improve our strategies to reach our project goals and to search for additional funding to sustain our project efforts.

RESULTS/OUTCOMES:

- Goal 1: Through Community youth organizations in five rural and frontier Idaho counties, create new and innovative strategies to reach uninsured youth with information about state health coverage programs. Over the five years, we did create some innovative strategies that were successfully implemented. The local youth input, however, was not to the extent that we had planned using our initial project model of Americorp volunteers as the on-the-ground local contacts with youth leaders.
- Goal 2: Through the youth organization effort, enroll 1,500 eligible youth in state health coverage program
 Our gained enrollment of 822 new youths in these five counties was less than the 1500 that we had anticipated. However, we gained many new Hispanic youth in our enrollment efforts. We also had many state CHIP/Medicaid "process" challenges throughout the five years that we addressed in previous annual reports and in this final report narrative.

PUBLICATIONS/PRODUCTS:

No major publications. Products are listed in past annual reports and in this final report narrative.

DISSEMINATION/UTILIZATION OF RESULTS:

The final HT project report and PowerPoint slides will be shared by stakeholders at the local and state level. We will underscore (for these stakeholders) the strategies that were successful in reaching youth—particularly Hispanic youth—in these rural and frontier communities. We hope this information will guide the investment of future outreach resources in rural and frontier Idaho counties.

FUTURE PLANS/ SUSTAINABILITY:

Over the five year implementation of our HT Project, we gained additional funding from a small grant from the Regence Foundation to engage school nurses' in our CHIP/Medicaid outreach in two of our counties (Cassia and Minidoka). In year five of our project, we also gained an outreach boost for those same two counties (Minidoka and Cassia) through our CHIPRA, Cycle 1 grant that addressed outreach and enrollment for birth to 19 year olds. These additional strategies will help to sustain our HT Project efforts: 1) Our CHIP/Medicaid Train-the-Trainer Statewide Webinar January 20, 2011; and 2) Our February-March "Remember to Renew" Campaign packet mailed to all HT community contacts and (January) webinar participants.

Annotation & Key Words

ANNOTATION

The Healthy Tomorrow's Project "Starting Points for Idaho Youth" increased the rates of insured low-income youth (13 to 19 years old)—with a focus on Hispanic teens-- in five rural and frontier Idaho counties. The project's goals around outreach and enrollment were accomplished through partnerships with key community youth leaders, local agencies and schools. Use of the local media (radio and television), websites, YouTube and e-mail were tools that added to the success of this project.

KEY WORDS

- Adolescents
- Community participation
- Health insurance
- Medical home
- Rural population
- Access to Health Care
- Healthy Tomorrows Partnership for Children
- Uninsured

Final Report Narrative

PURPOSE OF PROJECT AND RELATIONSHIO TO SSA TITLE V MCH PROGRAMS:

From March 1, 2006 through February 28, 2011, our Healthy Tomorrows'(HT) Project "Starting Points for Idaho Youth," focused on reaching and enrolling low-income, uninsured youth (13 to 19 years) into Idaho's state children's health insurance programs (CHIP/Medicaid). We targeted our project's outreach in five rural and frontier counties with a high rate of uninsured youth and Hispanic populations. Throughout the five year process, our project sought advice and suggestions from our Cover Idaho Kids Coalition (the state AAP and the state MCH directors are on this Coalition) and, in the last two years, advice was also sought from our Idaho AHEC Board whose members are familiar with health care access and services in rural/frontier Idaho communities. Although our five years produced some strong and sustaining partnerships both at the

Although our five years produced some strong and sustaining partnerships both at the community and state levels, we did not entirely meet all of our goals and objectives for this project.

GOALS AND OBJECTIVES:

Goal 1: Through Community youth organizations in five rural and frontier Idaho counties, create new and innovative strategies to reach uninsured youth with information about state health coverage programs.

- Objective 1: Involve existing youth organizations in designing and implementing outreach;
- o Objective 2: Sustain lasting outreach partnerships with community

Goal 2: Through the youth organization effort, enroll 1,500 eligible youth in state health coverage program

- Objective 1: Offer hands-on CHIP enrollment assistance at community events.
- o Objective 2: Promote use of 2-1-1 Careline for CHIP assistance.

METHODOLOGY:

Although our goals and objectives were consistent throughout the five years of the Project, our activities changed annually. Our original project proposal indicated that we would use the Americorps volunteers through Serve Idaho (the Governor's Commission on Service and Volunteerism) to help us attain our objectives by working with youth groups in each of the five counties. However, early in year 2 of our project, the Americorps volunteers were no longer available for these counties. The HT Project Director re-organized and assisted by the statewide Cover Idaho Kids Coalition and community entities in each county, identified and secured youth leaders or local contacts who worked directly with community youth. These community contacts were the

volunteer "point people" who worked with the HT Project Director and incorporated the CHIP/Medicaid information, resources and activities directly into their service delivery systems within their communities. Over the next three years, some of these community contact individuals changed and other contacts were identified. To a limited extent, the community contacts provided input to the HT Project Director from the local youth about their ideas for CHIP/Medicaid outreach efforts in their county. Community contacts involved in this outreach effort included Hispanic youth groups such as the Migrant Education Program, YAK (Youth Activities (K)oalition), and the Hispanic Community Council

Over the five years of our HT Project, we planned and implemented a wide variety of activities to achieve our goals and objectives. Two types of plans were implemented annually in each county: 1) The "informal" plan was generated with some local youth input and involved incorporating CHIP outreach into existing local events (for example, the Girls on the Run event in Blaine County); and 2) The "formal" plan of two annual events initiated by the HT Project Director across all counties but imprinted with the individual identity of each community. These two formal activities were the August-September "Back to School Campaign" and the November-December "Holiday Outreach Campaign." The (Goal 1) "new and innovative" strategies for outreach were incorporated in both plans. One such example of "uniqueness" was in the Back to School Campaigns, when local youth would offer suggestions for a CHIP/Medicaid outreach "messenger" who they thought would gain the attention of other youth. As indicated in our annual project reports, in year 2 that messenger was an Idaho Steelheads Hockey Player and in year 5, a Boise State Bronco Football Player.

The two annual outreach events were coupled with major media outreach. We learned that the most effective media outreach was radio—particularly Spanish radio—in reaching youth. We also employed ads in local newspaper, created YouTube and websites, and PSAs for television. At the end of each HT Project year, we assessed the effectiveness of our outreach activities based on the quarterly by-county data that we received from 2-1-1 Careline calls and from CHIP/Medicaid quarterly enrollment data in each of the five counties. We would change or adjust the activities for the next year based on this outcome data.

Goal 1: Create new and innovative strategies to reach uninsured youth

- Objective 1: Involve existing youth organizations in designing and implementing outreach. <u>Activities:</u> Gathered input for outreach strategies from youth in 4-H, YAK, Girls on the Run, and other community youth groups over the five years of our HT project.
- Objective 2: Sustain lasting outreach partnerships with community. Activities: Secured outreach commitments from community health clinics, school nurses, schools and youth groups as evidenced by the participation of 51 community contacts in our January 20, 2011 "CHIP/Medicaid Train-the-Trainers" webinar. At the end of the webinar, 81 % of the participants surveyed (using Survey Monkey) thought the webinar was valuable in helping them discuss current

CHIP/Medicaid information and materials to share with other key contacts in their communities.

Goal 2: Enroll 1,500 eligible youth in state health coverage program

- Objective 1: Offer hands-on CHIP enrollment assistance at community events. <u>Activities</u>: Assisted families and youth at school health fairs, health clinics, and one-on-one in communities throughout the project's five years.
- Objective 2: Promote use of 2-1-1 Careline for CHIP assistance.
 <u>Activities:</u> Disbursed 2-1-1 Careline materials at all events and through mailings and media outreach. Idaho 2-1-1 Careline partnered with us on all Back to School Campaigns over the 5 years of the project.

The activities under the objectives for Goal 1 and Goal 2 have been explained in the Healthy Tomorrows' annual reports and in our PowerPoint for our HT Exit Interview (December 2010). However, the table on the next page offers a quick final summary of our Goal 1 and Goal 2 objectives by county, noting:

- 1) The major community contacts for the HT Project;
- 2) Examples of community CHIP/Medicaid outreach activities that the HT Project implemented;
- 3) The overall percent and number increase in CHIP/Medicaid enrollment of 13 to 19 year olds at the end of the HT Project; and
- 4) The likelihood of our HT Project sustainability in that county.

County	Local Contacts	Local	Enrollment	HT Project
		Activities	Increase	Sustainability
Blaine	Hospital Youth	Health Fairs;	86	Good because
	(YAK) Director	School events;	Hispanic youth	of investment
	& Bi-lingual	Girls on the	enrollment up	in outreach by
	Coordinator	Run events;	by 500%	local hospital &
	;school district;	youth events;		some youth
	Girls on the	ads in local		groups
	Run Director	newspaper;		
		radio spots		
Boise	Library	Library events;	-7	Poor because of
	Director; school	mobile dental	In year 1 &2	transient,
	district staff;	van @ school;	when Boise Co.	frontier
	juvenile justice	school open	was focus, the	population &
	staff	houses; ads in	result was +6	little state
		local		outreach
		newspaper;		
		radio spots		
Minidoka	School nurse;	Youth church	176	Very good
	Hospital	groups; ads in	Hispanic youth	because of
	Eligibility	local	enrollment up	investment of

	Specialist & Business Office Manager; U of Idaho Extension Educator; school principals; Community Health Clinics; CHIPRA Community Outreach Worker	newspaper; radio spots; health fairs; Food banks; youth sports	300%	local hospital, school district, and CHIPRA Outreach Worker
Cassia	School superintendent; school nurse; Community Health Clinics; CHIPRA Community Outreach Worker	Migrant contacts; ads in local newspaper; radio spots; health fairs; Food banks; youth sports	Hispanic youth enrollment up 300%	Very good because of investment of local hospital, school district, school nurse, and CHIPRA Outreach Worker for County.
Twin Falls	Hispanic Community Council; 10 Pediatricians; Head Start Director; Community Health Clinics; two school nurses	CHIP info in flyers, newsletters & websites and at local & school events; radio spots; ads in local newspaper	Hispanic youth enrollment up 300%	Fair because of frequent changes in some contacts & little state outreach

EVALUATION:

Five major evaluation methods were employed to assess the effectiveness of the project in attaining the project's goals and objectives:

1. Tracking of calls by Idaho Careline 2-1-1 during and immediately after CHIP/Medicaid outreach events.

We tracked the outcomes of our major outreach events through the Idaho 2-1-1 Careline call volume. Over the last three years, our Holiday Outreach Campaigns

started in mid-December each year and concluded in late January. The chart below indicates the comparison of call volume in our five Healthy Tomorrows' counties over three years during the month of January. In 2009 and 2010, we timed community outreach campaigns using CHIP flyers (at schools, youth programs and other sites) that coincided with the CHIP January radio spots (in English & Spanish). Using these <u>combined</u> outreach strategies seemed to increase the volume of calls to 2-1-1. In January 2011, Idaho Careline 2-1-1 staff recorded 39 calls (total from all five counties) that were the direct result of the <u>radio spots</u>. Call data is provided from Idaho Careline 2-1-1 documentation as reported quarterly to the HT Project Director.

(HT Project)	January 2009 calls	January 2010 calls	January 2011 calls
County			
Blaine	8	24	39
Boise	0	2	2
Cassia	12	20	29
Minidoka	6	13	14
Twin Falls	27	52	96

Here is a sample of the method used by Idaho Careline 2-1-1 to record their call data:

01/11/2011 <u>Program</u> Medicaid	Call #286142	Referral Name 211 Idaho CareLine	BLAINE	
BELLEVUE-R5 Fer Referred By: Radio	nale	Calls Notes/Details Had general Medicaid questions.		1
01/18/2011 Program Medicaid BELLEVUE-R5	Call #289359	Referral Name 211 Idaho CareLine	BLAINE	
Referred By: Radio	e	Calls Notes/Details Mailed out a CHIP Application.		2
01/19/2011 Program Medicaid	Call #290684	Referral Name 211 Idaho CareLine	BLAINE	
Referred By: Radio	nale	<u>Calls Notes/Details</u> Mailed a CHIP App.		3
01/26/2011 Program Medicaid	Call #295076	Referral Name 211 Idaho CareLine	BLAINE	
BELLEVUE-R5 Fer Referred By: Phonebook/Inform	^{nale} nation	<u>Calls Notes/Details</u> Mailed out the CHIP application.		4
01/27/2011 <u>Program</u> Medicaid	Call #296034	Referral Name 211 Idaho CareLine	BLAINE	
BELLEVUE-R5 Fer Referred By: Repeat Caller	nale	Calls Notes/Details Caller had general Medicaid question.		5
01/25/2011 Program Medicaid	Call #294700	Referral Name Family Medicaid Consolidated Unit DHW - Statewide	BLAINE	
CAREY-R5 Fer Referred By: Repeat Caller	nale	Calls Notes/Details		

10

2. Tracking through data on CHIP/Medicaid enrollment and renewal from Idaho Department of Health and Welfare (IDHW) received on a quarterly or semi-annual basis

Our quarterly enrollment tracking through the state CHIP/Medicaid was challenging throughout the five years of this project. The CHIP process went through name changes and form changes that impacted our data. Most recently, because of the IDHW overall to their system, the data has not been forthcoming. On February 28, 2011, the HT Project Director once again contacted Idaho's Public Records to see if we could receive updated numbers beyond May 2010. The response from Jan Hanke, Administrative Procedures Coordinator:

"Due to the conversion of our data to a new Medicaid Management Information System (MMIS), IDHW is unable to retrieve the data you need. We only have access to data prior to June 2010. We are sorry for any inconvenience this is causing you." (2/28/2011)

3. Participating with our project staff and Coalition representatives in an AAP site visit in 2007;

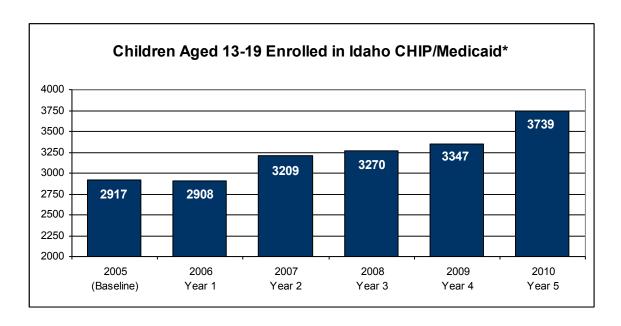
The visit and outcomes were listed in previous annual reports. The visit helped us identify possible new contacts in the communities and some new approaches as well.

- 4. Completing and reviewing a mid-Project Written Assessment Report (2008)
 As mentioned in previous annual reports, compiled by an outside-evaluator
 As this mid-Project assessment helped us identify successful and not-sosuccessful outreach strategies. One example -Reviewing all our media outreach
 stats, the evaluator pointed out that the Spanish radio spots were the best
 investment.
- 5. Using Survey Monkey and other tools to obtain immediate feedback from participants in project webinars and training meetings.

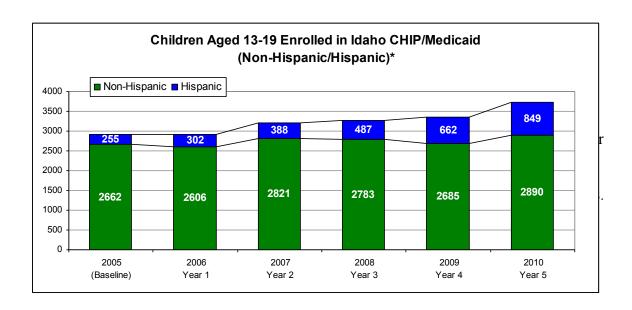
 Our latest use of this survey tool indicated that 81% of our "Train-the-Trainer participants in our 1/20/2011 webinar thought the pre-materials and the webinar itself were helpful in engaging and informing other community contacts on how to help Idaho families enroll and renew their children/teens in CHIP/Medicaid.

RESULTS/OUTCOMES:

HT Grant data outcomes listed (in charts below) are total annual numbers for the five Idaho counties in our project. Data comparison is from **May** of each calendar year starting with the "baseline" year of 2005. The data indicates an increase of **822** teens that were enrolled in CHIP/Medicaid in these counties over the five years of our project. Data Source: Idaho Medicaid, Office of Program Analysis, 11/16/2010.



In our outreach to teens in the five rural and frontier counties, we focused many of our efforts on Hispanic teens. Making sure these teens and their families understood how to apply or renew for health coverage under CHIP/Medicaid. We created and used Spanish outreach materials (for example, flyers, CHIP 3 page Spanish application, and Spanish radio spots) that helped us reach and enroll 594 Hispanic youth during our grant project.



System changes/challenges

- Three name "changes" to the CHIP/Medicaid Program and two state system changes –the latest as of July 2010 (IBES)- since the beginning of this HT Project in Idaho
- Major "cost savings" structure changes at the state level for CHIP/Medicaid during this Project. One of the most impacting was the elimination of regional IDHW offices in some of our counties.

PUBLICATIONS/PRODUCTS:

- List publications/products-no major ones
- Cross-section of products' list over the five years, by year:
 - Year 1 -Idaho AAP Dinner Presentation February 22, 2007; Scott Burt, ID Steelheads Hockey Player promotions
 - Year 2-YAK Director (in Blaine County), Girls on the Run, School Nurses' outreach promotions; School lunch application check-off for CHIP
 - Year 3- Free mobile dental van promotional to Idaho City (Boise County) for one day to provide dental/oral health services and CHIP/Medicaid health coverage sign-up opportunities to middle and high school uninsured students who were in need of dental care; Idaho State Nursing Students helping with outreach promotion in 2 counties; \$10,000 from the Regence Foundation for promotion materials for school nurses to do CHIP/Medicaid outreach.
 - Year 4 Toolkit developed at the request of our state Medicaid to reach uninsured children/youth; CHIP postcard-English/Spanish; "8 Steps to Help Families Apply for CHIP" list; HT Letter to HOSA Teacher in Cassia County; Radio outreach –NRNS Station Usage Report
 - Year 5 BSU Bronco Football YouTube outreach; Spanish radio spot; Back to School Campaign and Holiday Outreach materials. Fifty one community contacts participated in CHIP/Medicaid Train-the Trainer Webinar on January 20, 2011. Webinar (81% of respondents thought that the pre-webinar materials mailed to each registered participant and the webinar information was excellent to good.)
 - Our final project outreach effort "Remember to Renew" campaign is being implemented during February and March 2011 in all five of the HT counties. Materials for this campaign are included in our appendices. The materials (listed above) from previous years were included in the annual HT reports.

DISSEMINATION/UTILIZATION OF RESULTS:

- Within Idaho, we will continue to share our data/results and materials with our state Medicaid administrators and with our community partners and Coalition.
- Outside the Idaho Sharing of BSU radio & television outreach spots with national contacts.

The final HT project report and PowerPoint slides will be shared by stakeholders at the local and state level. We will underscore (for these stakeholders) the strategies that were successful in reaching youth—particularly Hispanic youth—in these rural and frontier communities. We hope this information will guide the investment of future outreach resources in rural and frontier Idaho counties.

FUTURE PLANS/ SUSTAINABILITY:

Over the five year implementation of our HT Project, we gained additional funding from a small grant from the Regence Foundation to engage school nurses' in our CHIP/Medicaid outreach in two of our counties (Cassia and Minidoka). In year five of our project, we also gained an outreach boost for those same two counties (Minidoka and Cassia) through our CHIPRA, Cycle 1 grant that addressed outreach and enrollment for birth to 19 year olds.

These additional strategies will help to sustain our HT Project efforts:

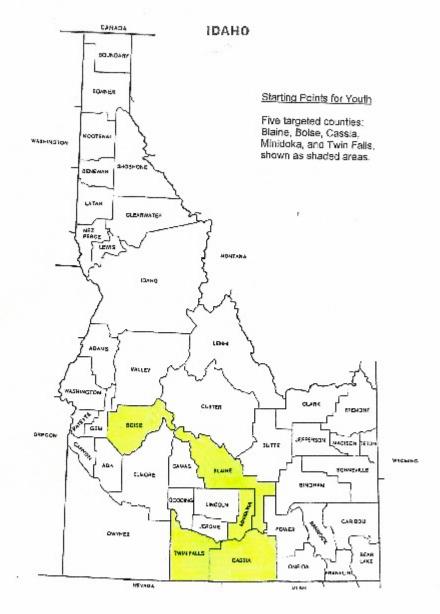
- 1) CHIP/Medicaid Train-the-Trainer Statewide Webinar January 20, 2011 Fifty-four individuals from 22 program sites in our five counties and throughout Idaho participated in our Webinar held at our host partner site (IPCA) on January 20th, 2011. The participants were mailed a pre-webinar packet that included follow-along materials for the webinar. (Please refer to information in appendices)
- 2) February-March "Remember to Renew" Campaign packet mailed to all HT community contacts and (January) webinar participants
 Packet materials included:
 - Cover letter from the Project Director
 - Two CHIP/Medicaid applications (one in Spanish) with two stamped green envelopes
 - o Edited renewal (redetermination) form with appropriate "window" envelope
 - o Ten magnet band aids with 2-1-1 CHIP information
 - o 25 "Remember to Renew" postcards
 - Return postcard on how materials were used. Return postcard (part of our evaluation/assessment) gives entry into raffle drawing on April 2nd. (Please refer to information in appendices)

3) Apply in April 2011 for CHIPRA-Cycle 2 funding
Our current CHIPRA-Cycle 1 grant includes implementing and tracking outreach
and enrollment for CHIP/Medicaid in six counties--and two (Minidoka and
Cassia) are among the five Healthy Tomorrows' counties. The CHIPRA, Cycle 1
grant focuses on all children (not just 13 to 19 year olds) in a county but, like our
HT grant, places a particular focus on Hispanic children. From our HT grant
experience, we learned that having a paid bi-lingual Community Outreach Worker
in a county stabilizes the local resource (Worker) and builds local identity and
trust with that resource. In CHIPRA, Cycle 2, we will propose this model
again—but this time by giving it more sustainability by partnering with the
Community Health Clinics throughout Idaho to train their front desk staff to be
the conduit for CHIP/Medicaid outreach, enrollment and renewal. Through this
strategy, we are working together (MSG, Inc. and IPCA) to position our agencies
for state work around the Health Insurance Exchange which will include CHIP
and Medicaid.

APPENDICES

Appendix 1: Idaho Map-"Starting Points for Youth" –five counties Appendix 2: January 20, 2011 CHIP/Medicaid "Train-the-Trainer" Webinar materials Appendix 3: February-March 2011 "remember to renew materials





Appendix 2:

January 20, 2011 CHIP/Medicaid "Train-the-Trainer" Webinar materials

Idaho CHIP/Medicaid Application and Renewal: "Train the Trainer" Webinar

Presented by CHIPRA and Healthy Tomorrows, Projects of Mountain States Group, Inc.

Thursday, January 20, 2011 9:30 – 11:00 a.m. (MT)

WEBINAR GOAL: To provide Idaho community partners tools and tips to conduct successful CHIP/Medicaid outreach and assistance.

AGENDA

9:30 – 9:45	Introductions and Overview Monica Revoczi Bogaerts
9:45 – 10:30	Presentation: Simple Steps for Idaho CHIP/Medicaid Application and Renewal Mary Lou Kinney, Sara Herring
10:30 – 10:55	Questions
10:55 – 11:00	Wrap Up and Adjourn

Webinar Guidelines:

- 1) During Webinar <u>presentations</u>: Please keep you computer speakers and/or phone on mute, as needed, to manage background noise.
- 2) During Webinar discussion/Q&A time:
 - a. Keep discussions focused to the topic at hand.
 - b. Actively participate. Feel free to submit questions verbally or via the Webinar screen.
 - c. Practice respectful listening and communication.
 - d. Preserve the confidentiality of any applicants or potential applicants by not using their names when discussing questions

Appendix 3:

February-March 2011 "remember to renew materials

Renew It-Don't Lose It!!

To keep your children enrolled, you <u>must</u> renew your CHIP/ Medicaid coverage every year it's not automatic!!

Simple Steps to Renew:

- Know when you're due!
 If you're not sure, call toll-free 1-866-326-2485.
- Fill out the form that comes in the mail.
- Send it back, along with updated income information.



Have questions or need help with the renewal form? Call toll-free 1-866-326-2485 And remember: <u>Renew It—Don't Lose It!</u>

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