

North Carolina Covering Kids: A Retrospective

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Introduction

In January 1999, three months after NC Health Choice for Children was first offered, North Carolina launched its Covering Kids initiative. Health Choice is North Carolina's Children's Health Insurance Program (S-CHIP). Covering Kids, a national health access initiative for low-income, uninsured children, is a program of The Robert Wood Johnson Foundation. Covering Kids helps states and local communities increase the number of eligible children who benefit from health coverage programs. The initiative facilitates efforts to: design and conduct outreach programs that identify and enroll eligible children into Medicaid and other coverage programs; simplify the enrollment processes; and coordinate existing coverage programs for low-income children. The Southern Institute on Children and Families provides direction and technical assistance for the program nationally. The North Carolina Foundation for Advanced Health Programs served as the lead agency for North Carolina's initiative.

At the time Covering Kids began in North Carolina, the State had already enrolled 18,000 children into Health Choice, representing approximately 25 percent of those estimated to be eligible. The early success was largely attributed to a grassroots approach of community-based outreach; a simplified, mail-in application and the availability of a widely published and popular toll-free hotline that families could use to request an application and get information about the program in English or Spanish.

By the time we at Covering Kids came on board, broad-based coalitions with representation from public and private agencies and organizations were actively engaged in outreach in counties across North Carolina. An outreach coalition was hard at work at the state level as well. Staff from the Children and Youth Branch (Division of Public Health) and the North Carolina Healthy Start Foundation were providing leadership, guidance, technical assistance, and educational and marketing materials to support local efforts, while engaging in targeted outreach at the state level. A statewide provider task force, which would build support for the program through professional associations and tackle issues as they arose, had been established.

The State had also made major strides in simplifying the enrollment process and in coordinating Health Check (children's Medicaid) and Health Choice before Covering Kids was launched. The mail-in application combined Health Check and Health Choice. The two programs, which had similar comprehensive insurance benefits and criteria to determine eligibility, were being marketed as one. There was one system and agency that handled eligibility determination. The State had adopted "12-month continuous eligibility" for Health Choice (later also adopted for Health Check). There was no assets test for either program.

North Carolina's Covering Kids initiative was conceived as an integral component of the State's outreach and enrollment effort. It provided North Carolina with an opportunity to design and test strategies for reaching families and enrolling children. Five Pilot Counties would serve as laboratories where strategies were designed and tested. Successful strategies could be used as models to be replicated in other communities in the state. In addition, the Covering Kids project provided North Carolina with an opportunity to continue to simplify and enhance processes, systems and materials, and build on state and local efforts to coordinate Health Check and Health Choice.

In this report we give an account of our experiences and the lessons that we learned over the three-year project period. We focus on outreach in the first part of the report. Following an overview and chronology of our outreach activities is a series of summaries about the initiatives that five Pilot Counties undertook to target different community sectors. In the second part, we discuss our efforts to simplify and enhance enrollment and re-enrollment processes and materials for families. Finally, we sum up what we have learned overall, and offer some recommendations and concluding thoughts.