



Steps to Starting

SHOUT at Your School (Student Health Outreach Project)

This SHOUT manual has been designed to assist students and faculty members who want to “SHOUT” about free and low-cost health insurance in their community. It is intended as a guide and can be adapted to the needs of the local community. In this manual can be found information about SHOUT, the Children’s Health Insurance Program (CHIP), and Medicaid, as well as suggestions for starting a SHOUT project in your community.

Produced by The Children's Defense Fund Washington, D.C.



The mission of the Children's Defense Fund is to *Leave No Child Behind*® and 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.

CDF provides a strong, effective voice for *all* the children of America who cannot vote, lobby, or speak for themselves. We pay particular attention to the needs of poor and minority children and those with disabilities. CDF educates the nation about the needs of children and encourages preventive investments before they get sick, into trouble, drop out of school, or suffer family breakdown.

CDF began in 1973 and is a private, nonprofit organization supported by foundation and corporate grants and individual donations. We have never taken government funds.

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Shout

—the Student Health Outreach Project for children—is a student-run project of the Children’s Defense Fund.

The project was conceived to recruit students to work on the issue of children’s health by helping to enroll all eligible children for the health insurance they deserve through either the Children’s Health Insurance Program (CHIP) or Medicaid.

The Children’s Defense Fund believes that children have a basic right to health insurance coverage. Without insurance, children are at risk of preventable illnesses, learning problems, and certain disabilities. There are nearly 11 million uninsured children in this country; more than six million of them are eligible for either CHIP or Medicaid.

The ultimate goal of SHOUT is to reach all eligible children and sign them up for health insurance. Students can play a key role in this endeavor by partnering with community-based organizations (CBO’s) to help with outreach and enrollment efforts. There are thousands of families who need to be informed and educated about CHIP and Medicaid. Experience has shown that only after receiving information anywhere from three to seven times do families become compelled to enroll their children. Many of them want assistance in completing the application form—another area where students can be trained to help out. Conducting follow-up with families is crucial for ensuring that eligible children get the health insurance they deserve. But this effort requires a lot of people and energy. SHOUT was designed to create opportunities like this for students throughout the country who would like to share their experiences and become part of the CDF national child advocacy agenda.

Marian Wright Edelman, president of the Children’s Defense Fund, has compared the plight of uninsured children today to that of children



facing the polio epidemic during the early part of the 20th century. The difference is there’s a remedy for today’s situation: free or low-cost health insurance is available. The challenge is to reach those families with eligible children. Many persons representing state agencies, schools, health organizations, community-based organizations, faith-based organizations, and the business community are engaged in this work. But resources are limited and finding and enrolling all children eligible for CHIP and Medicaid is labor-intensive.

CDF believes students, with the energy and interest they bring, can play a unique and significant role in reaching families! Consider joining CDF in this important work—to make sure every child gets the healthy start they deserve.

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A Profile of Uninsured Children

- **Nearly 11 million children, or 1 out of 6, are uninsured** according to the Census Bureau.
- **Most eligible children are from working families.** Nine out of 10 uninsured children have at least one parent who works. A growing number of uninsured, working Americans are employed by small businesses. Few of these companies offer coverage because insurance premiums are higher for small businesses, as are employee contributions (particularly for family coverage). Others are self-employed or not eligible for coverage because they are new employees, part-time, or temporary workers.
- **More than half of all uninsured children live in two-parent families.**
- **Over two-thirds have family incomes above the Federal Poverty Level (FPL) but less than 200 percent of the FPL (\$35,300 a year for a family of four).**
- **Minority children are disproportionately represented among uninsured children:**
 - One in three is Hispanic.
 - One in five is African-American.
 - One in nine is White.
- **Uninsured children are at risk of preventable illnesses.** Uninsured children in low-income families get sick more often from preventable, acute, and infectious illnesses such as measles and ear infections. Low-income children are also more likely to suffer from lead poisoning, serious dental problems, and chronic medical conditions such as asthma and diabetes.
- **Most uninsured children do not have a regular source of care.** Compared with insured children, uninsured children are up to eight times less likely to have a regular medical provider.
- **One in four uninsured child uses the hospital emergency room for health care** or has no regular source of health care. Florida has found that when parents were helped with getting coverage for uninsured children, their children were more likely to receive medical care from a doctor's office than at a hospital emergency room. Emergency room visits dropped by 70 percent in areas of the state served by the new program, saving the state's taxpayers and consumers \$13 million in 1996.



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oth CHIP and Medicaid are health insurance programs that provide access to health services for children. Both are operated at the state level and have specific income guidelines and insurance benefits. Children may be eligible for one program or the other, but not both. Following is a brief description about each program.

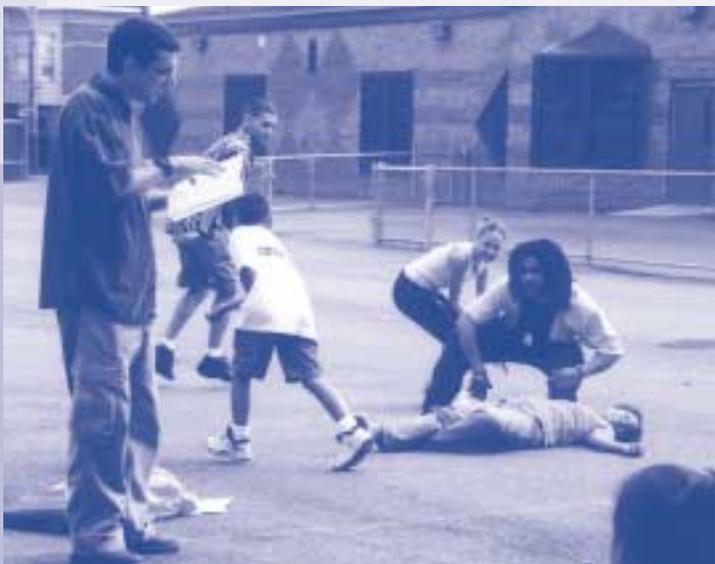
CHIP is funded jointly by the federal and state governments and administered by the state. CHIP provides children with health insurance coverage that includes: regular medical check-ups, immunizations, doctors' visits, prescription drug coverage, emergency care, and more.

and insurance status. Applications may also require copies of documents that verify income (pay stubs, letters from employers, or the most current tax return), proof of residence (in most cases, a utility bill) and, for recent immigrants, proof of citizenship for the children only. Many states now have a mail-in application that can be completed without having to visit a state office.

The Barriers to Enrollment in CHIP and Medicaid

Families face many barriers while trying to enroll their children in CHIP or Medicaid. In order to get health coverage through CHIP or Medicaid, a family needs to go through the application process, which can be difficult and intimidating. Some states have made it easy for families—others have not. Check with local outreach organizations in your community to learn more about the enrollment process in your state. Students, working with local organizations, can play an instrumental role in assisting families with this process. Following are some of the most common barriers that families face.

- **Not aware CHIP and Medicaid exist** – Many families are simply unaware that CHIP and Medicaid exist. This remains one of the greatest barriers to enrolling all eligible children. Despite all of the good work to educate families, much more remains to be done. This is where trained student volunteers can play a key role in actively educating families about CHIP and Medicaid at community centers, libraries, health fairs, clinics and service organizations, grocery stores, and anywhere else families can be found!
- **Families with eligible children do not think they are eligible** – Seven out of ten families with eligible children do not believe they are qualified to participate. Many believe that their income is too high. Others believe that there are limits on who can be enrolled or think they must be enrolled in other programs to qualify. By



Medicaid is a health insurance program that was established in 1965 to provide access to health care for very low-income families, individuals in long-term care, and persons with disabilities. Medicaid covers all services that a doctor or other health care professional identifies as being “medically necessary.” To enroll for either CHIP or Medicaid, families must complete an application with the state in which they live. Applications vary by state but, generally, applications request information about the family, place of residence, income,

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working with trusted sources in the community (health clinics, community-based organizations, schools), students can reach out and inform low-income working parents about CHIP and Medicaid, their potential eligibility, and assist them with enrollment.

- **Missing documentation and incomplete applications** – Most families do not realize that certain documentation is required to apply for CHIP or Medicaid. Some do not fully complete the required application, which can slow down or even stop the application process. Letting members of the community know what is required by your state in order to enroll eligible children will help ensure that families are better informed. Many organizations in your community already provide assistance filling out the application. Students can also be a part of this process by learning what is required and how to best assist families in correctly completing an application.
- **Reaching out to children in immigrant families** – A large number of eligible children come from immigrant families, including families where the children are U.S. citizens but the parents are not. Consequently, many of these families are fearful of enrolling a child because of their concern that it may jeopardize the immigrant status of a non-citizen member of their immediate family. In conversations with families, students can allay these fears by providing information from the Immigration and Naturalization Service (INS) about applying for CHIP or Medicaid. INS, the federal agency that deals with immigration issues, clearly states that information provided to enroll a citizen child can not be used to threaten the immigrant status of a non-citizen parent. Once families realize that

they can enroll their children without any penalty due to their immigration status, they are more likely to do so.

Many immigrant families remain reluctant to enroll their eligible children for fear of being determined to be a “public charge.” Being deemed a public charge is based on a federal policy stating that adjustments to immigration status or re-entry to the United States can be denied. Deportation may occur in limited circumstances if a person is, or may become, dependent on support from public financial assistance. For more information on public charge, visit the INS Web site at www.ins.usdoj.gov.

- **Breaking down language obstacles** – In many communities, families with eligible children may not speak or read English well enough to understand CHIP or Medicaid. Materials written in English are the most widely distributed; second language materials can be difficult to find. This means that students who speak a second language can provide a valuable service by developing language- and culture-specific flyers and promotional information for distribution to families. *Bilingual students* can also offer application assistance to families in their native language, making it easier for families to understand the health care system and the importance of health care coverage.

There are likely to be other barriers specific to each community. Talk to local organizations engaged in outreach and enrollment activities to find out what barriers exist in the community. It is likely that students can then play a role in assisting families to overcome these barriers.

What has SHOUT done so far?



The SHOUT project was piloted in 1998 at Columbia University in New York. The Children's Defense Fund trained student volunteers from Columbia University to work in community-based organizations where they educated families about Medicaid and CHIP, screened families for eligibility, and assisted them with the enrollment process. Each SHOUT student dedicated approximately two hours per week to a particular community-based organization, enrolling children at nine different CBO's throughout northern Manhattan.

The Columbia SHOUT project also reached out to families in northern Manhattan by employing an energetic group of high school students from the youth organization Prep for Prep. The high school students contacted families in commercial areas,

at community events, and by going door-to-door at public housing sites. In addition, 100 Columbia students who were volunteering in other community service projects, such as tutoring and advocacy for the homeless, were trained and involved in educating families about the availability of children's health insurance.

Today there are 15 SHOUT projects in New York state with more than 500 student volunteers, including high school students, undergraduates, as well as medical students. In the summer of 1999, CDF-NY initiated a partnership with the Student Section of the Medical Society of New York State—a statewide collaboration of the American Medical Association chapters at 14 medical schools throughout New York. In December 1999, the American Medical Association-Medical Student Section, a national collaboration of AMA



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chapters representing 40,000 medical students at 140 schools across the country, adopted SHOUT as their National Service Project 2000-2001. Because SHOUT is a national project of the Children's Defense Fund, new SHOUT initiatives have been launched in conjunction with CDF's California and Texas offices. In partnerships with local advocates in several states, CDF is working to launch SHOUT projects at schools and campuses across the country. Now we are inviting you to join this national movement to Leave No Child Behind®!

Why participate?

Across the United States, many of the initiatives to enroll children in Medicaid and CHIP are being handled through small, community-based organizations that are short on staff and overworked. There are simply not enough people doing outreach to get to all of the necessary families, which means that all eligible children may not be found. By partnering with local outreach efforts, students can enhance the staff size of these organizations, creating a more efficient and dynamic force for reaching out to families. SHOUT participants can help educate more parents about the opportunities created by CHIP and Medicaid and assist in conducting health fairs and other events where families can enroll their children. Students also bring a lot of energy and fresh insight that may help reinvigorate local efforts that have been in place for a while.

Rewards of participation

SHOUT provides students with an opportunity to develop effective leadership skills, as well as time management and coalition-building skills. Students who participate in SHOUT will be connected to other students around the country who are working on CHIP. They will also work with local advocates and others involved in outreach, giving them a chance to develop relationships with professionals who are working in areas in which they may be interested. By working with CDF and other national agencies, SHOUT students will also have the opportunity to be engaged in shaping the national agenda on important issues affecting children. At the same time that students are participating in SHOUT and providing an essential benefit to families, they may also be able to earn course credits. Demonstration of leadership in the SHOUT project may help with college and graduate school applications.

How can I get involved with the Children's Defense Fund and SHOUT?

Following is information on how to start a SHOUT project at your school. You will find ideas for getting started, suggestions for connecting with community-based organizations involved in CHIP and Medicaid outreach in your community, and information on the barriers to accessing health insurance faced by families and how to help them overcome these barriers. Also listed are information resources to assist you in setting up a project. So why wait? Join CDF in working to enroll all children eligible for CHIP and Medicaid!



Once a student group has decided to join with the Children's Defense Fund and SHOUT, there are many different ways to set your project in motion. Talk with other students and faculty. Consider holding a one-day event or a series of educational and enrollment activities. The group decides what will work. Determine how SHOUT would best work at your school or organization.

- *If your university has a service-learning curriculum, think about any service-learning classes that could take on SHOUT as a project.*
- *If you are already involved in a student service organization, think about how SHOUT might work as a project within that organization.*
- *If your school sponsors a community service day, think about how you might work with local community-based organizations to set up a booth.*
- *If you are required to do a field placement/internship for your major, think about community-based organizations and local initiatives that are already working on children's health insurance outreach and enrollment.*
- *If you are in a high school service group, discuss with your advisor and your friends whether SHOUT might be a project for your group.*

As you are deciding how to proceed, assess what resources are available to you. One of the advantages that college and high school students bring to children's health efforts is their schools' community service programs, relationships with community organizations, and other infrastructures that can support outreach and enrollment



efforts. Learning what resources exist so you can better utilize them in launching and running your SHOUT project is the key to success.

Talk to School Administrators

At your school, contact the Office of Community Service, the Office of Student Activities, the Dean of Student Affairs, Counseling Office, or other offices. They should be able to put you in contact with student service organizations that already focus on children's issues as well as student organizations that might be interested in joining SHOUT efforts. These organizations may include:

- Health Organizations – hospitals, community clinics, and health outreach services
- Children's Advocacy Organizations
- Child Care Centers
- Faith-Based Organizations
- Fraternities/Sororities
- Office of Field Placements/Internships
- Mentoring/Tutoring Programs
- Other Service-Oriented Organizations

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Check the Internet

Student organizations generally have Web sites that can be accessed through the university's Web site. Look for organizations with missions that might support SHOUT. Check the CDF SHOUT Web page at www.childrensdefense.org/SHOUT.html for ideas and ways to connect with other students involved in SHOUT.

Talk to Your Friends and Classmates

Though it may be obvious, your peers can provide suggestions on how or where SHOUT might fit in best on your campus. If they have a similar interest, they might also be willing to help you recruit and organize volunteers.

Following are ideas about where a SHOUT project might fit at your school. There may be other places as well. This list is meant to give you a starting place.

- **Student Organization** – Students participate in SHOUT as part of a student organization and adopt SHOUT as a community project. Students have participated in SHOUT through ongoing community outreach efforts seeking to link families with enrollment sites and/or special enrollment days. These efforts have included the distribution of educational materials, street outreach, and presentations.
- **Class Project** – Students participate in SHOUT as part of a class with a community service component. As part of the class curriculum,

students learn about children's health insurance and outreach and enrollment strategies, and are charged with devising successful outreach efforts in their communities.

- **Community Service Day** – Schools often sponsor community service days or drives where students participate in SHOUT as part of a one-day or periodic outreach effort. CDF-NY has had great success in partnering with schools for these special events. In conjunction with Columbia SHOUT, more than 100 students distributed 40,000 pieces of literature in one day as part of a university-wide community service day. Other students have had similar successes by recruiting students from their schools for large outreach events.
- **Field Placement/Internship** – Students can participate in SHOUT through an internship or field placement which is required as part of their studies. Several graduate students from Hunter School of Social Work and Columbia School of Public Health have fulfilled field placement requirements through SHOUT by serving at agencies working on children's health insurance enrollment.

As you begin to develop a project, you may think of other ideas. There are a variety of innovative ways to start a SHOUT project at your school. Please share them with us so, as this manual is updated, we may include new ideas that have worked for you!

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nder CHIP, every state has its own children's health insurance program. Some states have an expanded Medicaid program and other states have a separate state program in addition to Medicaid. Eligibility requirements and the application process differ for each state. To learn what the eligibility level is in a particular state, check the CDF Web site at www.childrensdefense.org/signup. Every state also has different outreach and enrollment efforts underway. Before starting your SHOUT project, you should find out what efforts are already taking place in your state and how your group can partner with them.



Following is a checklist to serve as a guide for you to become more informed about children's health insurance in your state. Most of the information should be readily accessible on the Internet, but if not, it shouldn't be difficult to locate. Before beginning your SHOUT project, share the results of your findings with other interested students.

- Learn basic information about your state's program on the CDF Web site at www.childrensdefense.org/signup.
- Contact state child and health advocacy organizations. These organizations should be able to provide important information or point you in the proper direction.
- Contact your state's Children's Health Insurance Program, which you can reach via the CDF Web site.
- Use your college library to search recent periodicals for articles about key CHIP events in your state.

Information You Should Know About CHIP

Important things to know about CHIP and Medicaid in your state:

- How many children in your state are uninsured and potentially eligible for CHIP or Medicaid? This is good background information to have and share with others interested in SHOUT. This can be obtained from the Internet.
- What are the child health insurance program(s) in your state? Did the state expand the Medicaid program or is there a separate CHIP program?

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- What measures has the state taken to make the application process easier?
 - ✓ State has developed a single application for both Medicaid and CHIP
 - ✓ Mail-in application has been developed and put in place
 - ✓ Information and applications are available in different languages
- What are the major initiatives currently ongoing in your state around children's health insurance outreach and enrollment?

Learning about Efforts in Your Community

Across the country, many local advocacy and service organizations are involved in the effort to sign up eligible children for free and low-cost health insurance. These community-based organizations are crucial to children's health insurance outreach and enrollment campaigns.

Organizations such as schools, day care centers, health clinics, faith-based organizations, and multi-service agencies know the families they serve and can offer insight into crafting effective outreach and enrollment strategies targeted to the unique needs of their community. These organizations can help students discover the best ways to reach parents, as well as provide information on what is already being done. The first step in starting a SHOUT project is to understand the needs of your community. You will discover that many local organizations have resources to conduct outreach and enrollment projects. Collaborating with these organizations will ensure that families receive consistent messages about the availability of children's health insurance and where to enroll. Such collaborations will also secure the success of your efforts by linking them to the already existing outreach and enrollment infrastructure.



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ven if you already have a community-based partner in mind for your SHOUT project, it is important to know what outreach efforts are already in place in the community. For example, imagine that you are partnering with the elementary school near your school. The SHOUT team decides to set up enrollment hours on Thursday evenings. What you don't know is that the childcare center half a block away provides enrollment assistance every day from 8 AM to 8 PM, but has had a difficult time getting their message out to families in the community. In this situation, SHOUT volunteers will be more effective if they focus their time and attention on informing families in the community about the childcare center enrollment site, rather than setting up their own site. But you will only know this if you look into existing efforts first. Try to learn about the best ways to reach people in the community and what is already being done. By uncovering the most effective ways to provide assistance in your community, you can maximize the number of children enrolled through SHOUT.

Starting in the Community

- What organizations in your community are already involved in outreach and enrollment campaigns?
- What groups in your area provide training on insurance enrollment?
- Are there outreach and enrollment sites near your school? If so, what are their hours of operation?



Once you are familiar with the ongoing campaigns, resources, outreach strategies, and organizations in your community, you will be able to identify outreach opportunities.

Finding Resources in Your School

Whether you are planning a one-day event or an ongoing outreach campaign, think about resources that may be available to you through your school.

Student Government – Typically, student governments provide support to officially recognized student groups on campus.

School Administration – School administrators will be able to provide guidance on school rules and resources as well as contacts within the larger community.

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Student Organizations – Cooperating student organizations might be inclined to co-sponsor events. Some schools provide funds for selected student organizations as well as other resources.

Planning a Successful Outreach Activity

Outreach activities can take place in many different venues: shopping areas, schools, day care centers, community centers—any place where families gather. During outreach activities parents should be informed about children's health insurance options, where to obtain an application, and any follow-up help necessary to complete the application.

Before Your CHIP Outreach Event

1. Identify where and when you want to conduct the outreach event and discuss it with your community partners. This may cut down on the duplication of efforts and help improve productivity.
2. Identify how many volunteers you will need and schedule them for the event; make sure your volunteers are trained.
3. Be prepared to answer simple questions about your state's children's health insurance options and know where to refer parents with more difficult questions.
4. Promote the outreach activity prior to the event. Coordinate with your contact person at the location; they may be able to help post or distribute flyers.
5. Make sure that you contact your partners a couple of days before the outreach activity to re-confirm the schedule.

6. Make a list of what you will need for the day: giveaway incentives and promotional materials. Often the state agency responsible for enrollment can provide these.
7. Bring plenty of materials: informational brochures, applications, pens and paper, etc., and family encounter forms, so that you can follow-up with families after the event.

On Your Outreach Activity Day

1. One person should get to the location early.
2. If you have a table to work from, try to place it in a prominent area.
3. Place volunteers in key locations around the venue in order to engage families at many different points. This may require coordinating teams and having team leaders.
4. If your event is more than a couple of hours long, make sure you have volunteers scheduled for the entire time.
5. Remember to fill out the evaluation forms at the end of the day. It is important to track the success of your efforts.

After the Event

1. Leave the site as it was. Take unused materials and completed family encounter forms.
2. Talk with your community partners and contact at the outreach site. Let them know how the event went and thank them.
3. Follow-up with partners who were not able to be at the event. A meeting might provide an opportunity to review the day.

CDF's Role in SHOUT



The Children's Defense Fund will provide technical assistance and overall support to students interested in implementing SHOUT projects. Though our involvement may change over time, CDF is committed to supporting SHOUT. The activities below are some of the services that we plan to provide nationally.

CDF National Office

Develop SHOUT materials for students and school administrators. We will continue to update the tools and the manual as we receive feedback and updates from SHOUT projects around the country.

Identify local advocates and key state officials working on CHIP and Medicaid. As SHOUT grows, we will work to identify specific states in which we are able to maximize our impact. We will work to create partnerships in states where we do not have offices and establish a network of advocates and state officials that students can work with on outreach and enrollment activities.

Develop and maintain communication tools for SHOUT. CDF will work to develop a listserv that distributes information to students and advocates involved in SHOUT projects across the country. This will be used to alert them to changes in CHIP policy, "best practices," and general information about other CDF issues relevant to students. On CDF's Web site there will be a SHOUT section where we will post information about programs and key student contacts at various schools.

Identify key SHOUT leaders. As the project moves forward we will identify key student leaders and incorporate them into CDF's youth leadership network.

Develop a fact sheet for colleges and school administrators. We will develop materials to inform school officials about ways they can get involved in SHOUT, as well as ways to create a SHOUT-friendly environment at their institutions.

Create linkages with other national organizations. We will identify groups that have a student population and may want to pursue SHOUT in different parts of the country (e.g., nursing and medical student associations, service organizations, etc.).

CDF State Offices

In states where we have offices engaged in the SHOUT program, our state staff members will serve as key contacts for students and administrators interested in establishing SHOUT projects. Refer to the CDF Web site for a list of state offices working on SHOUT. State offices will provide state specific CHIP and Medicaid materials, links to community-based organizations, information on the application process, and updates on policy changes within the state.

Recruit students. Some state offices will conduct outreach for SHOUT to identify committed students and select students who can be leaders/liaisons with CDF.

Expand statewide networks. CDF state offices will work to include key students in statewide networks to reach, educate, and enroll families into CHIP and Medicaid.

Develop tracking mechanism. State offices will help students develop detailed plans for conducting outreach, which will allow them to change focus if their ongoing outreach strategy is not working.

Questions Frequently Asked by Families

Q. What is the Children’s Health Insurance Program (CHIP)?

The Balanced Budget Act of 1997 created a new children’s health insurance program under Title XXI of the Social Security Act. CHIP is specifically targeted to serve uninsured children from low- and moderate-income families.

Q. What is the difference between the Medicaid program and CHIP?

In some states there is no difference. CHIP can simply be an expansion of the Medicaid program that allows children of parents with higher incomes than in the past to participate and receive health insurance through Medicaid. In other states, CHIP is a separate program from Medicaid and covers children who are older and/or children whose parents have incomes higher than the state’s Medicaid eligibility level.

Q. Who is eligible for either CHIP or Medicaid?

The programs are designed to provide health insurance coverage to children in families who are unable to afford private health coverage. While eligibility criteria vary by state, most uninsured children in families of four who earn up to \$35,300 a year would qualify.

Q. Who is not eligible for CHIP or Medicaid?

Children who presently have health insurance coverage and some immigrant children are not eligible. (See the question below on legal immigrants.)

Q. How do I apply for CHIP or Medicaid?

To find out if a child qualifies in your state, call 1-877-Kids-NOW (1-877-543-7669). You will be connected automatically to your

state’s CHIP and Medicaid information hotline. In most states, you can request that an application be sent to you. You can then fill out and send your completed application back to the state for review.

Q. How and when do I find out if my child is covered?

After you send in your application with the necessary documentation, you will receive notification whether or not your child is eligible for CHIP or Medicaid.

Q. If I accept this coverage, am I on welfare?

No. These programs are designed to provide all children with the healthy start they deserve. Many eligible children have parents who do not have access to affordable health insurance through their employers.

Q. Will I be allowed to choose my child’s doctor?

Yes. In most states, you will have the ability to choose from different provider networks and doctors who participate in your state’s CHIP and/or Medicaid programs.

Q. If I have more questions, who can help me?

Call the toll-free number 1-877-Kids-NOW (1-877-543-7669) for more detailed information about your state’s program.

Q. Are Native American children eligible for this benefit even if they have Indian Health Services (IHS) coverage?

Yes. The federal statute is very specific about the inclusion of Native American children. However, the state can use 100 percent federal funds to purchase health care services from the IHS under the Medicaid option.

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Questions Frequently Asked by Families (continued)

Q. Are legal immigrant children eligible for these programs?

Generally, legal immigrant children who were already in the United States before August 22, 1996 can be eligible for Medicaid and CHIP. Immigrant children who entered the United States on or after August 22, 1996, as lawful residents, must be continuous residents for five years to be eligible for CHIP and Medicaid. (Earliest eligibility date for this group will be August 22, 2001.) Under Federal law, undocumented children are completely excluded from coverage in CHIP, just as they are from Medicaid. States may use state funds to provide health care to these children. Several states have decided to cover these children with state funds. Check to see if your state covers undocumented immigrant children.

Q. What is public charge?

“Public charge” is a term used in immigrant law to describe people who cannot adequately support themselves and who must depend on public benefits for income. Public charge determination can affect an immigrant’s entry, status adjustment, and in some cases, deportable status.

Q. How does public charge affect enrollment of immigrant children into the Children’s Health Insurance Program and Medicaid?

The Clinton administration clarified the public charge rules for immigrants. This clarification states that children can be enrolled in Medicaid and the Children’s Health Insurance Program without fear that they or their families will have their immigrant status jeopardized. A summary of these

guidelines can be downloaded from the INS Web site at www.ins.usdoj.gov/graphics/index.htm.

Q. Does the state offer a different benefit package for children with special health needs?

States that choose to expand Medicaid as their children’s health insurance program offer these children Medicaid benefits. In states with separate state programs, some offer different benefits for children with special health care needs, while others do not. All states with separate state programs must include supplemental service for children with special health needs based on medical necessity, as defined in the Americans with Disabilities Act.

Q. What will it cost for my child to get health coverage through CHIP or Medicaid?

For families with children in the Medicaid program, there is no cost to the family. For families with children in their state’s Children’s Health Insurance Program, costs will vary. Most state programs do not have co-pays and premiums for families at or below 150 percent of the federal poverty level (\$26,475 for a family of four). For families with higher incomes, premiums and co-pays are minimal and vary from state to state.

Q. What benefits will my child receive once enrolled in CHIP or Medicaid?

In most states children will receive regular check-ups, immunizations, doctor visits, eyeglasses, prescription drugs, hospital care, dental care, and more.

Roles and Responsibilities of Partners Involved in SHOUT

The success of a SHOUT initiative will depend on the commitment of the students involved, as well as the level of collaboration they are able to generate with local community partners. Below is an example of the roles that SHOUT partners will likely play as students develop and implement their projects.

| Stages | Student Groups | Community Groups | State Health Advocates | CDF |
|--|---|---|---|---|
| Should be in place before SHOUT starts | <ul style="list-style-type: none"> Students should develop an understanding of their school and community environments Develop a plan for the types of SHOUT activities that they want to coordinate Contact CDF, state advocates, CBO's, and school officials | <ul style="list-style-type: none"> A partnership with a local community group is essential to the success of SHOUT Students must solicit the assistance of local groups in their area that can provide information on community dynamics | <ul style="list-style-type: none"> Advocates working on the state level can provide students with information on health policy issues, which may assist students in the development of their outreach strategy | <ul style="list-style-type: none"> CDF will assist students in identifying key state contacts Establish communication tools and provide some technical assistance Provide information on SHOUT projects around the country |
| Role of key partners after SHOUT starts | <ul style="list-style-type: none"> Maintain communication with CBO's, school officials, CDF, and health advocates Stay engaged in their state's health policy discussions Develop a leadership network at your school that will allow SHOUT to continue after the current leaders depart | <ul style="list-style-type: none"> Students must develop relationships with community groups where they can <ul style="list-style-type: none"> learn about community dynamics interact with families work on outreach events | <ul style="list-style-type: none"> Students will continue to communicate with state advocates, which will allow them to stay current on the key policy issues in their state | <ul style="list-style-type: none"> CDF will continue to provide technical assistance, update training materials, and facilitate communication among students Will also provide national updates on CHIP and Medicaid as well as policy issues of interest to students |

Tips for Approaching a Community-Based Organization



I

f you have not had experience in working with a community-based organization (CBO), you may be unsure about how to approach the first meeting with a CBO. We have prepared some tips that can help guide you through the conversation. These are only intended as suggestions; feel comfortable taking the conversation in whatever direction seems most productive.

- Ask the CBO staff person whether his/her agency is involved in CHIP/Medicaid outreach. If it isn't, explain the CHIP program briefly and talk a little about your state's program. The information you collected in the "Get Informed" section of this tool kit should be all that you need to briefly describe the CHIP/Medicaid program. Have descriptive information with you that you can leave after the meeting.
- Explain the basics of SHOUT:
 - ✓ The Student Health OUTreach (SHOUT) project is dedicated to getting the word out about CHIP and Medicaid and enrolling eligible children in the program.
 - ✓ SHOUT is designed to build partnerships between students, CBO's, and other institutions in the community for the purpose of assisting families in enrolling their children in CHIP/Medicaid. We want to work with groups that have access to families and children so we can draw from their expertise.
- ✓ Each SHOUT partnership is unique. For example, students might work together to sponsor health fairs; in another instance, SHOUT students might set up regular office hours in a community-based organization to meet with families about children's health insurance. The strategy for enrollment depends on the dynamics of the community, and the guidance of the partners at the CBO. In all cases, SHOUT aims to provide CBO's with additional support staffing to identify, educate, and enroll children in health insurance.
- If the CBO is familiar with CHIP, ask about local outreach efforts and find out what they are already doing to address the problem.
- Learn about the CBO partners. Ask if partnering with the SHOUT project will fit into the organizations outreach activities. Make suggestions about ways that students could be active in reaching out to families within the context of the ongoing outreach activities.
- If it becomes clear during the meeting with the CBO that a partnership would work, discuss concrete ways that student volunteers could participate in community outreach. Suggest possible arrangements (regular office hours, weekly information sessions, health fairs, etc.) and brainstorm what might be most effective in your community.

CDF SHOUT Information Form

The Children's Defense Fund is interested in learning about SHOUT activities around the country. As a simple way of informing us about what your SHOUT project has done, please take a few minutes to complete this form.

Fax it back to the CDF SHOUT project at (202) 662-3550.

Contact Person:

Name _____ Email _____

Name of Student Organization _____

Is this part of a national organization? Yes _____ No _____

If Yes, are other local groups in different locations involved in SHOUT efforts?

Please list community and school-based organizations you have worked with:

Name _____ Email _____

Organization _____

Thanks for taking the time to complete this form and returning it to CDF!

Local Advocates Working on CHIP

| First Name | Last Name | Company | State | Phone | E-mail |
|-------------|-------------|---|-------|---------------------------------------|----------------------------------|
| Jay | Livey | Department of Health & Social Services | AK | (907) 465-3030 | Jlivey@health.state.ak.us |
| Deborah | Smith | Department of Health & Social Services | AK | (907) 465-1696 | Deborah_smith@health.state.ak.us |
| Tracy | Palmer | The University of Alabama | AL | (205) 348-9641 | Tpalmer@ches.ua.edu |
| Rex | Culp | The University of Alabama | AL | (205) 348-6172 | Rexculp@ches.ua.edu |
| Amy | Rossi | Arkansas Advocates for Children and Families | AR | (501) 371-9678 | Amyrossi@swbell.net |
| Rhonda | Sanders | Arkansas Advocates for Children and Families | AR | (501) 371-9678 | Rsanders@aristotle.net |
| Laura | Oven | Children's Action Alliance | AZ | (602) 266-0707 | Ldoven@azchildren.org |
| Victoria | Martin | Community Health Councils, Inc. | CA | (323) 295-9372 | Victoria@chc-inc.org |
| Bruce | Guernsey | Colorado Dept. of Public Health and Environment | CO | (303) 692-2377 | Bruce.guernsey@state.co.us |
| Judith | Solomon | Children's Health Council | CT | (860) 548-1661 | Jsolomon@hartnet.org |
| Kim | Bell | DC Covering Kids/DC Action for Children | DC | (202) 234-9404 | Kimbell@dcckids.org |
| Prue | Albright | Division of Public Health | DE | (302) 739-4735 | Palbright@state.de.us] |
| Mary | Figg | The Chiles Center College of Public Health | FL | (813) 974-8310 | Mfigg@com1.med.usf.edu |
| Fran | Yelton | GA Partnership For Caring | GA | (706) 854-0089 | Fyelton@gmcf.org |
| Barbara | Luksch | Hawaii State Primary Care Association | HI | (808) 536-8442 | Coverkids@aol.com M. |
| Jane | Borst | Department of Public Health, Family Services Bureau | IA | (515) 281-4911 | jborst@idph.state.ia.us |
| Gabrielle | Lessard | Mountain States Group, Inc. | ID | 1-888-423-5036 (208) 336-5533 X383 | glessard@mtstatesgroup.org |
| Robyn | Gabel | Illinois Maternal and Child Health Coalition | IL | (773) 384-8828 | ilmaternal@aol.com |
| Ann | Marchetti | Illinois Maternal and Child Health Coalition | IL | (773) 384-8828 | ilmaternal@aol.com |
| James | Hmurovich | Family and Social Services Administration | IN | (317) 232-4705 | jhmurovich@fssa.state.in.us |
| Linda | Noland | Kansas Children's Service League | KS | (785) 274-3100 x520 | Inoland@kcsli.org |
| Julie | Reid | Kansas Children's Service League | KS | (785) 274-3100 x407 | jreid@kcsli.org |
| Julia Field | Costich, JD | University of Kentucky Center for Health Services | KY | (859) 257-8709 | jfcost0@pop.uky.edu |
| Daniel | Payne | Louisiana Office of Public Health/Covering Kids | LA | (504) 568-5073 | dpayne@dhh.state.la.us |
| Josh | Greenberg | Health Care for All | MA | (617) 350-7279 x154 | greenberg@hcfama.org |
| Kery | Hummel | Maryland State Program | MD | (301) 777-9150 x105 (410) 706-7004 | khummel@allconet.org |
| Claudia | Baquet | University of Maryland | MD | (410) 706-1742 | cbaquet@som.umaryland.edu |
| Bonnie | Post | Maine Ambulatory Care Coalition | ME | (207) 621-0677 | bdpmacc@mint.net |
| Thomas | Ehrlichmann | Children's Defense Fund of Minnesota | MN | (651) 227-6121 | ehrllich@cdf-mn.org |
| Marilynn | Knipp | Missouri Department of Social Services | MO | (573) 751-4815 | mknipp@mail.state.mo.us |
| Mary | Honse | Missouri Department of Social Services | MO | (573) 751-4815 | mhonse@mail.state.mo.us |
| Jane | Boykin | Mississippi Forum on Children and Families | MS | (601) 355-4911 | msforum@meta3.net |
| Dick | Paulsen | Healthy Mothers, Healthy Babies | MT | (406) 449-8611 | dpaulsen@hmhb-mt.org |

Continued on back ►

Local Advocates Working on CHIP

(continued)

| First Name | Last Name | Company | State | Phone | E-mail |
|------------|-----------|--|-------|----------------|--------------------------------|
| Sari | Teplin | NC Foundation for Advanced Health Programs | NC | (919) 821-0485 | sarit451@aol.com |
| Rosemarie | Myrdal | Children's Services Coordinating Comm. | ND | (701) 328-2200 | csc@pioneer.state.nd.us |
| Jenny | Witham | Community Healthcare Association | ND | (701) 221-9824 | jenny@communityhealthcare.net |
| Rachelle | Weight | Voices for Children in Nebraska | NE | (402) 597-3100 | voices@uswest.net |
| Kathy | Moore | Voices for Children in Nebraska | NE | (402) 597-3100 | voices@uswest.net |
| Debra | Nelson | Covering Kids New Hampshire, University of NH Institute on Disability | NH | (603) 862-0560 | djnelson@hopper.unh.edu |
| Katie | Dunn | New Hampshire Department of Health and Human Services | NH | (603) 271-5249 | kdunn@dhhs.state.nh.us |
| Firoozeh | Vali | New Jersey Hospital Association/HRGT | NJ | (609) 275-4146 | fvali@njha.com |
| Carla | Chavez | Covering Kids New Mexico | NM | (505) 244-9505 | kgchavez@hotmail.com |
| Kay | Monaco | New Mexico Advocates for Children and Families | NM | (505) 244-9505 | nmacf@nm.net |
| Linda | Sheldon | Great Basin Primary Care Association, Inc. | NV | (775) 887-0417 | nevadacoveringkids@hotmail.com |
| Judith | Arnold | New York State Department of Health | NY | (518) 474-0180 | vlh02@health.state.ny.us |
| Katy | Hamtak | Ohio Commission on Minority Health | OH | (614) 466-4000 | katy.hamtak@ocmh.state.oh.us |
| Anne | Roberts | Oklahoma Institute for Child Advocacy | OK | (405) 236-5437 | aroberts@oica.org |
| Allanya | Guenther | Oregon Health Division | OR | (503) 872-6742 | allanya.guenther@state.or.us |
| Donald | Dodson | Oregon Department of Human Services | OR | (503) 731-8606 | |
| Ann | Bacharach | Pennsylvania Partnerships for Children | PA | (717) 236-5680 | Annbach@papartnerships.org |
| Dorothy | Stamper | Rhode Island Kids Count | RI | (401) 351-9400 | dstamper@rikidscount.org |
| Tambra | Medley | South Carolina Health Alliance | SC | (803) 796-3080 | tmedley@scha.org |
| Scot | Graff | Community HealthCare Association | SD | (605) 357-1515 | sgraff@usd.edu |
| Jennifer | Carlat | Tennessee Health Care Campaign | TN | (615) 227-7500 | jcarlat@thcc2.org |
| Jose | Camacho | Texas Association of Community Health Centers | TX | (512) 329-5959 | jcamacho@tachc.org |
| George | DeLavan | Utah Department of Health/Community and Family Health Services | UT | (801) 538-6901 | gdelavan@doh.state.ut.us |
| Nancy | Pare | Utah Department of Health | UT | (801) 538-6871 | npare@doh.state.ut.us |
| Judi | Cramer | Virginia Department of Social Services | VA | (804) 692-1040 | jfc900@dss.state.va.us |
| Benjamin | Winslow | Virginia Department of Social Services | VA | (804) 692-1910 | bhw2@dss.state.va.us |
| Carol | Baron | Virginia Department of Social Services | VA | (804) 692-1040 | cx2@dss.state.va.us |
| Peter | Holman | Vermont Association of Hospitals and Health Systems | VT | (802) 223-3461 | pete@VAHHS.org |
| Claudia | Sanders | Washington Health Foundation | WA | (206) 216-2508 | claudias@wsha.org |
| Elizabeth | Nucci | Washington Health Foundation | WA | (206) 577-1809 | elizabethn@wht.org |
| Robert | Peterson | ABC for Health, Inc. | WI | (608) 261-6939 | bobbyp@safetyweb.org |
| Renate | Pore | University System of West Virginia | WV | (304) 558-0530 | pore@scusco.wvnet.edu |
| Linda | O'Grady | Wyoming Department of Health | WY | (307) 777-5472 | lograd@state.wy.us |
| Kristina | Musante | Wyoming Department of Health | WY | (307) 777-7574 | kmusan@state.wy.us |

Family Encounter Form

Parent/Caregiver:

Name: _____

Street: _____

City: _____ State: _____ Zip: _____

Phone: _____ Primary Language in Household: _____

Child(ren)'s Name(s) & Age(s): _____

I would like more information or assistance in getting health insurance for my child(ren).
Please contact me so that I can:

_____ Receive more information about health insurance for my child

_____ Find out how to apply for health insurance for my child

_____ Other _____

Notes:

Location: _____ Date: _____

Volunteer: _____

Outreach Activity Evaluation Form

Please take some time at the end of your day to complete this evaluation form for the outreach event.

Name of Organization: _____

Location: _____

Date of Outreach: _____ Time: _____

Contact Name/Phone at Outreach Location: _____

Student Organizer: _____

Volunteers Participating: _____

1. How many families did you speak with? _____

2. What literature was distributed? How many copies? _____

3. How many Family Encounter Forms were filled out? _____

4. How many referrals to enrollment sites did you make? _____

5. How many applications were filled out? _____

Notes/Comments:

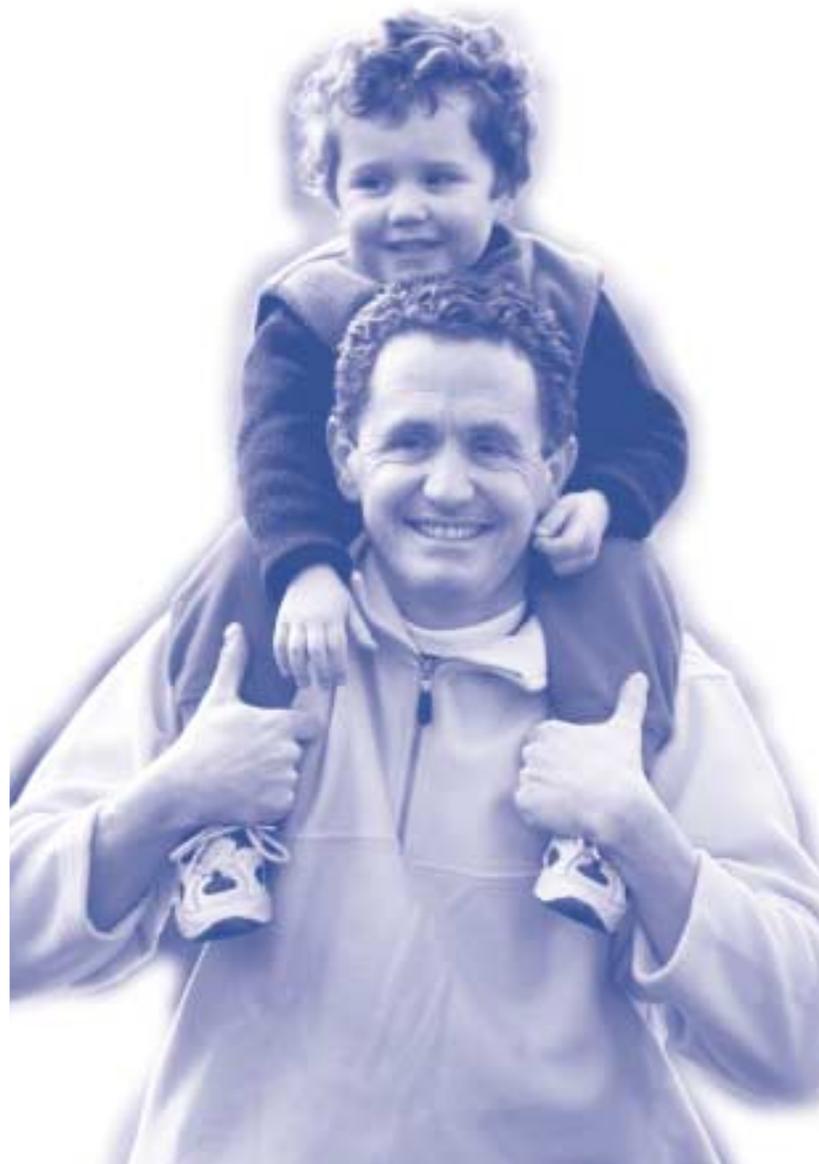
* Please share relevant information with CDF's SHOUT project and send responses to SHOUT@childrensdefense.org.

Problem: There are almost 11 million children in America without health insurance.

SHOUT

Student Health **OUT**reach

A student-run project of the Children's Defense Fund



Come find out more
about SHOUT:

Date _____

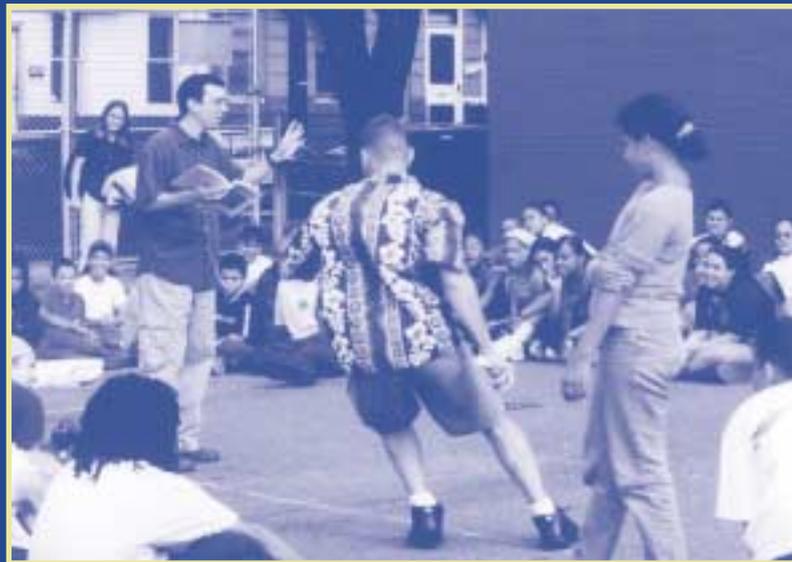
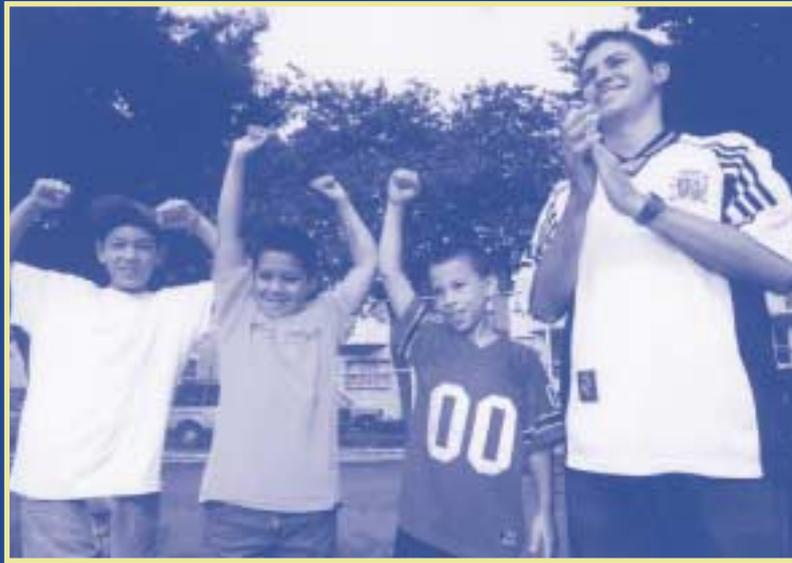
Time _____

Place _____

Contact person _____

Email _____

Phone _____



For information about free or low-cost children's health insurance, call **1-877-KIDS-NOW (1-877-543-7669) toll-free.**

For additional information about your state's Children's Health Insurance Program or Medicaid, visit our Web site www.childrensdefense.org/signup or call 202-628-8787.



Children's Defense Fund[®]

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www.childrensdefense.org