Encouraging Outreach Practices for Public Health Insurance

Introduction

With the current expansion of Medi-Cal in California, effective outreach practices must be adopted in order to maximize the enrollment of all eligible individuals in the state. When the State Children’s Health Insurance Program was signed into law in 1997, California decided to design a new health insurance program for children whose family incomes exceeded the Medi-Cal income requirements.

California’s plan consisted of an expansion of Medi-Cal to children under age 19 with family incomes up to 100% of the federal poverty level (FPL) and the formation of the Healthy Families program for children through age 19 between 100% - 200% of the FPL.

However, the number of uninsured children in California did not decrease. As a result, several initiatives were implemented to maximize enrollment of eligible children and numerous studies were conducted to determine any barriers that the children’s parents were encountering.

There are a variety of barriers that arise when enrolling children into public health insurance programs, including: lack of awareness among families of the available programs, uncertainty over eligibility requirements, complicated application forms, the stigma associated with Medi-Cal, and apprehension among immigrant families that participation in these programs could be used against them.

Community Health Workers

Community Health Workers (CHWs) were identified as the most effective outreach method implemented in neighborhoods comprised of the Medi-Cal and Healthy Families eligible population. CHWs are often considered important linkages between the community and the health system. A wide range of skills are required from CHWs to effectively carry out the intricate activities of health promotion, including:

- Sensitivity to the needs of the population, including sufficient foreign language skills
- Comprehending the importance of confidentiality
- Representing an organization with a prestigious reputation
- Genuine commitment to aiding the community
- Significant interpersonal and public speaking skills
- Ability to work independently and multi-task
- Flexibility, with schedule and job duties

Outreach workers may often require additional training to supplement any currently possessed attributes and skills. Six core competencies have been found in the most effective outreach workers:

1. Outreach Strategies
2. Understanding of Medi-Cal and Healthy Families eligibility criteria, enrollment forms, and procedures
3. Relevant Immigration and Naturalization laws
4. Knowledge of local community referral resources

5. Sensitivity-based outreach efforts

6. Privacy and confidentiality

**Core Competency 1:** The outreach worker must be adequately equipped to coordinate distribution of informational materials at community events, conduct group presentations at multiple sites, coordinate educational programs, refer applicants to other enrollment programs, network with community-based organizations, effectuate strategies that are sensitive to different cultural needs, and assist families with completion of the Medi-Cal application.

**Core Competency 2:** Outreach workers are required to recognize the eligibility criteria, know the proper way to complete applications, and be able to accurately guide parents through the application process. In addition, each worker must be proficient with the documentation required to complete the application.

**Core Competency 3:** Outreach workers must be capable of appropriately advising applicants of relevant immigration and naturalization laws. Community outreach workers are not to offer detailed explanations, interpretations, or legal advice regarding these laws, however, they must be adequately familiar with immigration matters to be able to respond to questions and properly refer clients for legal advice.

**Core Competency 4:** Outreach workers should be well-informed of health, educational, and social and welfare programs in the community. The community outreach worker must know specific contact persons, such as Medi-Cal eligibility workers. It is likely that outreach workers be required to collaborate with staff from Medi-Cal and other programs to develop procedures that benefit the applicants.

**Core Competency 5:** Outreach workers should receive sensitivity training to be able to appropriately approach eligible individuals and families about their health insurance problems. Sensitive issues may include: legal guardianship of dependents, immigration status, and medical history. Outreach workers should be empathetic towards the population they work with.

**Core Competency 6:** Outreach workers will require privacy training to enable them to provide individuals with privacy when discussing health and health insurance materials and solidify the critical importance of keeping all discussed information confidential.

**Outreach Strategies**

There are various avenues that can be taken to provide effective outreach to a population and may involve: person-to-person contact, usage of existing institutions, and several public communication strategies. These efforts should be supplements to customized efforts in order to achieve optimal results.

Person-to-person contact may include street outreach and site visits to various companies that employ a significant portion of the target population. Additionally, effective person-to-person outreach will consist of continual contact with the enrollee and must be maintained, in order to ascertain that the applicant sustains enrollment during reauthorization periods.

In the utilization of existing institutions, establishing partnerships with schools, hospitals, health clinics, and other institutions can be beneficial. Schools may be able to assist in identifying eligible children and could potentially offer space for education events. Hospitals and health clinics may be highly receptive to CHWs as they directly incur costs from the uninsured population’s use of services. Health clinics can
provide family members various opportunities to interact with CHWs.\textsuperscript{ii} Other effective settings for CHWs can be: churches, day care centers, community centers, and community-based organizations.\textsuperscript{ii} All these settings could assist in expanding access to target populations.

Public communication strategies can be used for county-wide outreaches, including community events and radio coverage.\textsuperscript{ii} Community events can assist in engaging hard-to-reach populations. Radio coverage is key as many low-income families listen to the radio at home or work and 1-800 numbers could be advertised if they need more information or assistance.\textsuperscript{ii} Radio talk shows have proved crucial for immigrant communities because the U.S. health care delivery system is convoluted and challenging to understand, particularly for individuals accustomed to foreign health systems.\textsuperscript{ii}

**Effectiveness of Outreach Strategies**

For years there was sparse information about the effectiveness of different strategies or the impact of combined strategies for enrollment. Unfortunately, enrollment data cannot always be attributed to specific outreach strategies, particularly if the enrollee was encouraged by multiple strategies.\textsuperscript{iii}

One study explored the effectiveness of different approaches to outreach on public health insurance enrollment in 25 California counties with a Children’s Health Initiative. The study found that the increase in enrollments for public insurance programs were the result of many factors including the efforts of the local, county outreach and enrollment programs.\textsuperscript{iii} Technology-based approaches, such as the One-E-App, resulted in an increase of new enrollments by 10-11%.\textsuperscript{iii} School-linked systems were the only non-technological approach that showed a 12% increase in the rate of new enrollments over county quarters without school-linked strategies.\textsuperscript{iii} Most significantly, county quarters where 7-8 strategies were launched enrolled 54% more children.\textsuperscript{iii}

There is value in using numerous strategies for identifying and enrolling eligible uninsured individuals, since they yield substantially better outcomes when compared to less inclusive approaches. The study indicates that in order to maximize enrollment of eligible populations, state, local government, and community-based organizations should launch a comprehensive campaign using multiple outreach strategies while taking advantage of technology, to achieve the best results.\textsuperscript{iii}

---

