



# Enrolling Eligible Children and Teens in Medicaid and CHIP Year Round

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## Connecting Kids to Coverage National Campaign

### Webinar Transcript April 3, 2014

**Riley Greene:** Good afternoon everyone, and thank you so much for joining our webinar. This is Riley Greene with the Connecting Kids to Coverage Campaign, and we're very excited to have you all on the line to talk about Enrolling Eligible Children and Teens in Medicaid and CHIP Year Round. I'm going to talk to a few housekeeping items before I pass it over to Donna Cohen Ross. We will have a couple of question and answer sessions throughout this webinar. We'll keep your lines muted the whole time, but you'll be able to ask questions through the chat or question feature on your control panel that you should see on the right hand side of your screen. This will allow you to submit questions throughout the webinar as they come up, and we'll keep good track of them and answer them during the question and answer session. Just as a note, we will be making these slides and a recording of the webinar available on InsureKidsNow.gov following the webinar, and that should do it for housekeeping so I will turn it over to Donna Cohen Ross with CMCS.

**Donna Cohen Ross:** Thanks so much Riley, and good afternoon everyone. We're really pleased to be here this afternoon because we have a lot of new things to share with you, and we're very, very excited about them. The first thing I want to do is just share with you a little bit of our agenda so we know the road map for the next hour or so. The first thing I'm going to do, and I take great pleasure in this, is talk a little bit about some new data that we have, which I think, I know it motivates me so I hope it motivates you as well. We're going to do that in a moment. We're going to spend a good deal of time on the big push, and that's our next big message and push for our Connecting Kids to Coverage Campaign. You see that our main message is that kids and teens can enroll in Medicaid and CHIP all year round, and that's going to be really a very important message going forward for those of you who have been focused on getting people, families that you work with past this March 31st date that we just passed. We've got, there's life after March 31st and we're going to talk about it. Sandy Won is going to share a lot about what we're doing in that respect in just a moment. Then we are really thrilled as always to have partners and grantees join us to talk about what they're doing in the field, some of their most important and effective outreach and enrollment strategies. So we have some folks from Nevada who are going to join us, I'll introduce them in a little while, and some of our friends from Texas will be telling the story of enrollment. And I just wanted to point that out. So much of what we do is creating a narrative about what we mean, why we're doing it, what is pushing us forward in our efforts to get eligible children health coverage. And that narrative is just so important, because we can create that story and make it real and everything that everyone is doing is part of that story, and so we're really very happy to be sharing a lot about that in a lot of different ways



on this webinar. And I think that's going to bring me to the first slide, because this is a really important part of the story. And I think probably everybody on the webinar, if you've been on past webinars you've seen this picture before, or something like this picture. This is a story of Medicaid and CHIP participation rates for the nation starting in 2008 and moving forward every year. You've seen a picture with the first four bars of this graph, but what's new is the fifth bar. We are now, the latest data that we have from our friends at the Urban Institute tell us that we are up to 88% of eligible children enrolled in Medicaid and CHIP. That's 88%. And it shows also that every year since we've begun to look at these data and use them as part of our campaign we've gotten better and better each time. It's something to be tremendously proud of, and I hope that it acts as a catalyst for all of you in moving forward. These are the national data, but we can break it down again with the help of our friends from the Urban Institute who've done this for us, to state by state numbers. And here's what I want to share about the state by state numbers. Again, the Medicaid and CHIP participation rate for the nation is 88.1%. When you go onto InsureKidsNow.gov, and we've given you a little cheat sheet on how to easily find this map and it's an interactive map, and when you get to that place on Insure Kids Now, you can click on your state and it will tell you what the participation rate is for your state. And hopefully the first thing you'll do is compare that to the national average. And many of you are above the national average, some of you are still below the national average, but one piece of data that I'd really like to share is that every year we've had a growing number of states that are 90% or more in terms of participation rates. Every year we have more states in that realm, and that again means that we really can get very close to getting every eligible child enrolled. So getting into that 90% range is a great goal, and when you look at that map and you have a chance to play with it you'll see that there are states in every area of the country that are reaching those goals. And if your state is not there quite yet, these kinds of webinars where we talk about effective strategies and materials we have on Insure Kids Now, are created to help you get there. So once again these are the new data, we're using them in the work that we do in telling the story of Connecting Kids to Coverage. We hope that you'll use it as well. So I'm very, very proud of all the work that's gone on to make this happen. So what about this big push? We're changing our message, we're tweaking our message. Why now? And again it goes back to the message that we really need to begin to convey in a very strong way. There's been a lot of focus, understandably so, on that March 31st deadline that just passed, and that was the deadline for individuals to enroll in coverage through the marketplace. But of course all along, and we've been saying this, we hope you've been saying this too, that individuals, whether they're children or adults, if they're eligible for Medicaid or CHIP they can enroll all year round. Well now we really need to ramp up that message. We need folks to know that Medicaid and CHIP enrollment is available all year round. If you're eligible you can sign up any day, any time, you haven't missed out, it's not too late. And we really need to ensure that people don't think that they have missed an opportunity to get something that's critically important for their children and also for themselves if they're eligible. In states that are expanding Medicaid, more parents will now be eligible for Medicaid than ever before. Many parents who may have tried to apply in the past and were denied can now get coverage, and we don't want to have them think that this opportunity is not available to them. Again, we know that many of you are in states that have not expanded Medicaid yet, and so the message becomes a



little bit more difficult for you, but what I would share, and we don't have a map on this, but again the folks at the Urban Institute have looked at participation rates among eligible parents and it's much lower state to state and nationally than it is for children. If you look at that 88% for children, for parents it's more like 66%. So even in the states that haven't yet expanded Medicaid, we have a long way to go for parents. And so as you are looking for eligible children, look for their parents too and try to help them understand if they might be eligible for Medicaid coverage and help them get enrolled. This next slide gives you a little bit of a visual that tells you where we're going with our campaign. I guess we're in the bright blue section right now, April to May 2014, and that is again our message of year-round enrollment in Medicaid and CHIP is available. Very, very important, and of course, we're not going to let you go after May. Back to school time, probably our most productive time, and we are going to again be with you to gear up for that when we get to that point and time. But in the meantime we have a lot to do, and what I'd like to do is get us going and introduce you to some of the new materials that our Connecting Kids to Coverage team has produced for us. I am very, very excited about these new materials. I hope you're going to love them as much as I do, and in just a second you're going to see why. I'm going to turn this over now to Sandy Won, who is going to talk to us about the materials and also about some of the other ways that you can get even more deeply involved in the campaign. So get ready, this is going to be a lot of fun. So Sandy, thank you.

**Sandy Won:** Thank you Donna for that great introduction too. We're really excited about the material that we have for all of you to be using in your outreach and enrollment efforts. As Donna said, we really want to ramp up the message here that kids and teens and eligible parents can enroll all year long. So what we've done is tweaked the message. We know that there are many things about Medicaid and CHIP that resonate with parents. The peace of mind you get from knowing that your kids are insured, the great benefits that Medicaid and CHIP offer, the fact that you can be eligible for reasonably decent incomes and still qualify for these programs. So all of those standard tried and true messages are included, but what we've done here is really include a new twist to it, because we are in a new landscape now. We've just finished open enrollment, a lot of people might just be a little bit confused about these deadlines and what it means for them. Especially for those parents and children and teens who are eligible, and as Donna said in those states that we really want to get those eligible children enrolled, we want to give you the tools and resources to do that. So our first piece here is our Kid in Charge flyer. He's young, but he wasn't born yesterday. And he likes to talk up Medicaid and CHIP. So what you see here is a flyer that's got our standard tried and true messages, but we've also reinforced for folks that he knows a good thing when he sees it, and that the great thing about Medicaid and CHIP is that enrollment is year round. So these materials are available in English and Spanish. We will also be working on getting these materials in other languages as well, and we definitely would love to hear from you all about languages that you need in your outreach, we can certainly try to help with that. But one of the things that we want to point you to is these are now available on the Insure Kids Now website. If you go to [InsureKidsNow.gov](http://InsureKidsNow.gov), you will see in the right hand spotlight box a big headline for New Poster Medicaid and CHIP Year Round Enrollment. So we hope you will go there. We can customize these for you with your state program name, your organization's contact information, we can add a logo for you. But really we wanted to get these



out in front of you very early into the post open enrollment season so you can start getting these customized and distributed in all of your outreach and enrollment activities coming forward. The next thing we have here is the Kid in Charge PSA. So our little boy with the blue mustache has a bunch of covered kids who are friends of his, or who want to be covered and need to be covered. So we've got a little girl named Sophia who is featured in our radio PSA that we're going to play for you right now.

**Narrator:** The following message is about Medicaid and CHIP free or low cost health coverage for kids and teens. Enrollment is open year round.

**Child:** Hey voice lady, give me the mike.

**Narrator:** Uh, okay.

**Child:** Hey DJ, let's crank up the music. [ strong drumbeat starts ] That's better. So listen up moms and dads out there. There are these programs called Medicaid and CHIP. They offer free or low cost health coverage for kids. You get doctor and dentist visits, prescriptions, and shots are covered. All the stuff that keeps kids like me healthy and in charge.

**Narrator:** So as you can tell, a covered kid is a confident kid. And it means confident parents too. To learn more about affordable health coverage for your family, visit [healthcare.gov](http://healthcare.gov), or call 1-877-KIDS-NOW. That's 1-877-543-7669.

**Child:** Yes, you can do something big for your family today, because enrollment is open year round.

**Narrator:** This has been a message from the U.S. Department of Health and Human Services.

**Child:** And Sophia. [ music ends ]

**Sandy Won:** Sorry about that little technical glitch there, but we hope you enjoyed that, that is a really fun spot, we had a lot of fun putting it together. It is going to be available on Insure Kids Now, it's not quite up there yet but it will be very soon in English and Spanish for you to use as a PSA in your local area. We've got some tips on Insure Kids Now as well about how you might be able to use this PSA as your hold music. You can share it with partners, you can have it play in people's waiting rooms, partner with healthcare providers. But again a fun way to convey the message about Medicaid and CHIP and also about year round enrollment. We will also have live radio readers, so these are things that will be available in 15 second, 30 second, and 60 second scripts that you can share with radio stations. They might have a little bit of time where they can make an announcement for you. Again, you can use this in your hold music or have it be your voicemail message for folks who are waiting, and we recommend you think of creative ways that you can use these readers and again it sort of all goes along with our same theme of covered and confident kids. So a little bit about the campaign. Last year if you were part of Connecting Kids to Coverage you know that we worked specifically in target markets. These are cities and local grantees in states where we know there is a need to increase participation rates based on the number of uninsured but eligible children. And the grantees that are working with CMS on the



ground there, we've chosen five target markets this year, and they're right here on the screen. We've got Detroit, Michigan, Tampa, Florida, Dallas, Texas, Telluride, Colorado - it's really the rural areas around that city, and then Las Vegas, Nevada, you'll be hearing a little bit more from them today. And what we're doing in these markets specifically is running a paid radio advertising campaign. So that PSA that you just heard we'll be customizing for our lead organizations in those markets, but I encourage all of you, if you are in those neighboring areas to these cities and those target markets, we really encourage you to get in touch with our campaign field desks. We would love to connect you to the work that they're doing on outreach and enrollment, help you provide referral networks, partner with groups on the ground. If you are engaging with families who could be eligible for Medicaid and CHIP, we would love to learn more about the work that you're doing and find ways to connect you with our partners on the ground here and especially in the week that we have the advertising running, as families hear more about it I think it would be great for everyone to sort of work together to help spread the message through materials and all of the other things that we have available for you. So we will give you ways to get in touch with the campaign field desk, but we certainly want to encourage you to be involved. So here, this is something that, as Donna said, this is our big push for the Connecting Kids to Coverage Campaign. We've been sort of laying low through open enrollment, we know a lot of you have been already doing great work in enrolling eligible families, parents and children into Medicaid and CHIP. But we really want to give you ideas on how you can get involved in this campaign at this point. It's going to take all of us to amplify this message across the country. So we hope you will help spread the word by planning outreach and enrollment activities as you've been doing, as you do more of. I know a lot of you have been doing work through the Navigator grants and all that good stuff, but after you take a short little break we're hoping you get right back into it for the eligible families that are out there for Medicaid and CHIP. As we said, the flyer that we have available, we've got a whole series of material that you can access in many different languages. We hope you will place your order to customize all of that and use it in your local information. We'll also have social media graphics and social media posts that you can use to share with your families and community partners to really help spread the word. We know a lot of people are on social now, and this another great avenue for you to share this message. We'll have web buttons for your organizations' websites, for folks who want to promote that message on their site. As I mentioned we've got the radio PSA and the live radio readers. We'll also be creating, or we are creating, a web video that you can share through your organization's website, social media channels, have it go viral around the country. And then really ultimately what we want you to do is connect with your local application assisters to enroll these families and make sure that you have the contacts that you need to get these families enrolled in these health coverage programs. So a little bit more specifics. When you order materials. As we said, the new flyer is available. If you go to InsureKidsNow.gov you'll find it through this link, and as Riley mentioned, these flyers will be available up online so this link will be a lot easier to use then. The materials are all available in English and Spanish. Some materials are available in Chinese, Korean and Vietnamese. And we're also working on additional translations, which are Tagalog, Haitian, Creole, Portuguese, Hmong, and as we said if you need another language or if you find there's something that you



need that's missing up here please get in touch with us and let us know. We can certainly work with CMS and try to find ways to get that material translated for you. We also have a Customization Guide on InsureKidsNow.gov to give you a little bit more specific instruction on what is available for the customization process and it just gives you a little more information on how to place your order. And here at the Connecting Kids to Coverage Campaign we are also reaching out to a slew of really terrific national partners who are all very supportive of this campaign, have been working with us over the past year and a half and are really excited about launching into this new effort to let families know that kids can enroll year round. These are just a sample of some of the groups that we've worked with, there are plenty more that we are getting in touch with, who have volunteered to help out in our target markets, across the country, at the national level. And again, if you are a national organization that is interested in being part of this campaign we encourage you to contact us. If you are a local group that is interested in connecting to a national organization, one of the ones you see here or are there other groups that you would really like to try to connect with as you do your work in outreach and enrollment, we encourage you to get in touch with us as well and we can certainly help you make connections as needed. We know so much of this work happens at the grass roots level among all these groups that we have here on the phone today with us and other groups beyond, and we really want to try to connect all of you together as much as possible, give you resources that you need to do your outreach and enrollment and really ultimately enroll as many families as we can in health coverage. So some of that, if you are a national group or if you're an organization that has local partners on the ground, we would love for you to be part of this effort as well. There's information about the campaign that you can share with your members through your organization's newsletter or e-blast. Again if you get in touch with us we can provide you with some template language that can help you share this message. There is campaign materials, the flyers and the PSAs are available to everyone and anyone who needs to use them in their outreach. We would encourage you to go and download them or get in touch with CMS about getting them customized for your work as well. Through the campaign social media posts, I know a lot of organizations especially at the national level have lots of followers and have very good networks to share this information. Again we hope that you will also connect with local application assisters especially where you have local chapters of your group to really strengthen the referral systems that are out there. If you need help getting started, this is the InsureKidsNow@fleishman.com, that's the campaign field desk. We're available by email and by phone, this is toll free 1-855-313-KIDS. We encourage you to sort of let our phone lines go on fire, I mean, we're ready and willing to help with anything. So we really look forward to hearing from you with any kind of request that you need for outreach and enrollment materials, for connections to our target market groups, for connections to local and national organizations. We are ready and available to really launch this effort in a big way, and as Donna said we are doing this for the next several months. We will also be rolling right into back to school, but we know that this is an opportunity given all of the attention that's been put on the marketplaces and the great figures that have come out in terms of enrollment and we wanted to keep that momentum going and make sure that we have that new Medicaid expansion where you are expanding in



states and especially for the kids who we know are eligible but unenrolled in Medicaid and CHIP, we want to make sure we get every last one of them into the program.

**Riley Greene:** Great, thanks Sandy. And we now want to take a minute to just do a short poll here via our webinar service. So you should see this popping up on your screen right now, and we want to know how you would most likely use the resources that we just went through. Do you want to order customized print materials? Do you want to use our online content, use the radio PSAs and readers? Are you interested in exploring partnerships with local chapters of organizations? Hopefully it's all of the above, hopefully it's not none of the above. But just take a second here and answer the polls on your screen, the poll question on your screen, and we will share everyone's answers live in real time so we can see what you're most interested in. And I'll give you just a second to do that. Thank you all for your participation so far. We're at almost 50% participation I can see. Just another second here. What resources are you most likely to use in your outreach? Of everything that Sandy just described as part of the Connecting Kids to Coverage Campaign, what do you think would be most helpful for you? All right. Thank you so much for your participation. I'm going to go ahead and close the poll now and share the results with everyone. So you can see customized print materials are very popular, 84% of you are really interested in learning about these customized print materials. Online content is also popular, so we're excited to share these awesome social media graphics and web videos with you through Insure Kids Now. And I'm glad we only saw 2% of you saying you wouldn't use these resources [ laughter ] because we do want to be sure that we have helpful things for you. I'm going to go ahead and close this poll and we're going to move on with another question that we have for you. This isn't a poll, we're just going to ask you in an open ended way. You can use your chat feature here and send us, what other resources would your organization find useful for your outreach and enrollment efforts this spring? So if it's not something that we covered, what could you use? Again, you have a chat feature in your control panel of the webinar service, and feel free to just shoot those ideas my way. And we'll collect those throughout the webinar and count it as great feedback from you. Thanks in advance for your participation. Now we wanted to open it up to some questions and answers. Again, just like you're using the chat box to tell us what resources you would like, you can use either the chat or the questions to type in questions that you have. And we have gotten some questions throughout the presentation that we will address now.

**Donna Cohen Ross:** Before we go to the first one Riley, first of all I want to thank you for helping us with the poll. It's going to help guide us as we move forward, and we're really pleased for your participation. I wanted to thank Sandy also for that great presentation on the materials. I really hope you all liked the poster and the radio PSA and are thinking about ways you can use it. As Sandy said, we had just a ton of fun putting those things together. I do need to mention something which I forgot at the beginning, but I'm contractually bound to let you know, for those of you who have been good enough to put the button on your website to help people understand about open enrollment through March 31st, many of you got those buttons from folks at CMS, from HHS, maybe from other partners in your state. The ones for healthcare.gov are deactivated now as we're beginning to revamp and reconstruct the message. So I'm bound to tell you that those marketplace open enrollment widgets or buttons have been deactivated. So I didn't want to



lose that opportunity. But I do want to say one more thing, Sandy brought it up. And I just want people to really understand that it isn't a matter of, you know, open enrollment being over and then we stop and enrollments for Medicaid and CHIP go forward. Folks have been enrolling in Medicaid and CHIP all throughout this entire process since October. The great work that has gone on to focus attention on open enrollment and the marketplaces has helped to get millions of people enrolled in Medicaid and CHIP as well. We've seen a great surge of enrollment and what we like to call our "welcome mat effect," of people who are already eligible getting the message that it's time to apply. So we're really grateful for all of that help. Great, we're ready for questions. Thanks Riley.

**Riley Greene:** Great, thanks Donna. Just a couple questions I've seen come through that we can answer right away, is will the slides and webinar recording be available? Yes they will, following this webinar you'll be able to find them on InsureKidsNow.gov. We'll have both the slides and a recording of this presentation, so that will be available. Now we've got a lot of questions here on the customization of the materials. So one person, Danielle Zurkell, is asking, is there a cost to have the material customized on Insure Kids Now?

**Donna Cohen Ross:** The answer is, there is no cost to have the materials customized. If you look at that customization guide that we have, it tells you exactly what you need to do, what information we need in order to customize for you. But I do want to make the distinction, we'll do the customization but the printing still is up to you. So do keep those two things separate in your mind so you know what responsibilities and things we'll offer and what things will still be something that you need to do. But we hope that is a help to you.

**Riley Greene:** Great, thanks Donna. Someone is also wondering about the FPL level views. Right now we have 2013 level views, they're asking are income levels customizable and when the national materials will feature 2014 levels.

**Donna Cohen Ross:** I think we're using 2014 levels now for 200% of the poverty line. Now, many of you are in states that for children cover kids above that income level, and if I'm not mistaken that's part of what we will customize for you, Sandy is shaking her head yes. So again if you look at that customization guide it will ask you what you want us to customize. If you are in a state that covers kids above 200% of the federal poverty line you let us know that and we will make that adjustment on the print pieces.

**Riley Greene:** Great, thanks Donna. And that actually answers one of our other questions about what the FPL percentage is, and to Donna's point that is state by state. So when you know what the percentage is for your state, that income figure becomes customizable on the materials.

**Donna Cohen Ross:** And if you don't know what it is in your state, if you tell us what state you're in we'll let you know. It is something we can share with you. Maybe one of the things we can do after this webinar is, if there are folks who aren't familiar with it, we have a state by state chart where we can share that information.



**Riley Greene:** Great, thank you. And those are our top line questions for that Connecting Kids to Coverage resources section. Again, we'll have another Q&A towards the end of the webinar, but for now I will hand it back over to Donna to introduce one of our guest speakers today.

**Donna Cohen Ross:** Thank you so much Riley. It is now my great pleasure to introduce Yvonne Moore, who is with The Foundation for Positively Kids based in Las Vegas, Nevada. Positively Kids is one of our Connecting Kids to Coverage grantees. We are happy to have them not only as a grantee but also as a lead organization in one of our target markets. Nevada is a state that we know has a ways to go in terms of enrolling kids, so we're very happy to have Yvonne with us today to talk about what her organization is going to be doing in this next period of time in the campaign. So Yvonne, I hope you're with us on the line right now, I'm going to pass the mike to you.

**Yvonne Moore:** Okay great, yes I'm here. Thank you so much for allowing us this presentation to share with everyone of our strategies for this next campaign rollout. We're really excited about it, our staff are gearing up and getting ready, and I wanted to share today a lot of tips, tools and tactics that I think some organizations might be able to incorporate to really help push and get the message out. So again, I'm Yvonne Moore with Positively Kids out here in Nevada. I just want to tell you who we are. The Foundation for Positively Kids is a nonprofit child health agency providing a variety of healthcare services for children throughout Clark County, Nevada. Positively Kids employs only board certified pediatric physicians and licensed nurses and social workers to provide care in our programs. We have six programs currently, and we're partnering with the Clark County School District to provide children's well and sick healthcare at three school-based health centers here in Nevada. And these school based health centers actually have started out to be the hub for all of the outreach and health insurance enrollment activities we're doing with PK-HIP, is how we call it, to share and spread the message. So basically, the main thing I want get across in presenting today is keep your eye on the prize. I think it's so important that we know the great need everyone has, and here in Vegas as soon as we were able to get the message out I had various groups calling from senior centers to homeless shelters to free medical agencies who wanted to know if I can sit in their office and help enroll all these folks they see day in and day out with no coverage. So it was amazing that the need was so great. So from that, I really focused all of our staff to really look at the Clark County School District impact we can have by using the funnel of referrals through the school and the children we know in these schools who are uninsured, and a large variety of these children are on the free and reduced lunch program. So with that we always use our messaging and our screening to highlight that we are here for Clark County School District children to help enroll uninsured families and at the same time we will help apply for the parents if they are in the household for either TANF, SNAP, and also medical coverage. So we want to include the whole family while we're sitting and doing this one on one application strategy. So keep your eye on the prize, that's one of our main tips that I can give you for today. And as families, if other individuals call and seniors are calling we always make sure we have a referral base to send them to. So I've been lucky enough to build some great relationships and we exchange clients back and forth and make sure we can get them in the loop and keep our word and our message out there and also share other events



that might be happening for a population that just doesn't have anywhere to go for assistance. The other thing that I was able to secure is building some great relationships with our partnerships. In doing that, in an MOU I was able to secure some space. Now we started at the school based health centers, and as we grew and developed it started getting a little smaller space, and we wanted to find out where are other venues where we know there are children that need our service. So Southern Nevada Health District is our newest site and we actually have two staff out there helping enroll families into Medicaid and Nevada Check Up. Another location, the Salvation Army. We know that there are hundreds of people daily who go through the Salvation Army to get a multiple of services, so it has been a great location for our cross referral base and it's a busy area in that location with a lot of low income families in the area. So the other location I have are children who come through the foster care system, we actually do a lot of the pediatric care for these children and we have our main headquarters, which is where I sit, funnel through a lot of these kids who come through, are placed with relatives who don't know how to now get this child on insurance. We've been able to streamline and reconnect them to help for one on one enrollment assistance. And the last location is, always finding those opportunities where you can connect and do satellite partnerships. So it's been really great. Through these 43 targeted schools, we've found locations where I have staff go and sit at parent resource center rooms on a once a week basis or every other week. They have bounced around from four different schools in one location and have learned to build relationships with that office staff to always make referrals or even have families sitting waiting there for when my enrollment specialist Monique comes over she's ready to sit with them and start filling out applications and helping them with their questions. So that's another great tip to suggest, that partners start looking on where they can actually send their people to sit in the satellite location. So from that you can tell, the initial strategy of PK-HIP was always to build a program that is going to be mobile. We know that the population that need our services are pretty remote, they don't come out of the house too often. If they do they're not informed as much. They use public transportation a lot. In Nevada, we have a high need for Spanish language, so we do have a lot of bilingual staff who then reach out to families and have presented on Spanish radio to kind of target the market that way, and it's been very successful to be able to answer the phones, sit with the families, and use that skill set. Tools that are effective. Currently I have about ten staff. We all have mobile cell phones, which makes it easy for us to move around and not worry about desk phones and having to sit somewhere. Our 1-800 number is actually an office that has kind of a cloud system so it actually will ring directly to the various departments to the cell phones that everyone carries. So we always want to make sure we are accessible and available to our new clients but also our ongoing clients for follow up. We use laptops and tablets with hot spots and jet packs in order for us to connect to the internet. We have found, when you start a program it's very important to figure out the technical piece of it. At some locations we weren't able to get a strong signal for internet. Other locations, the school system blocks every single portal that you try to go and reach, and we're trying to apply families online which then caused a barrier. So by being more mobile and having our own set of tools we are now right in line and ready for this new campaign. The other thing that's so important and is an extremely important tool is your customized database tracking software for your case management. I use ChallengerSoft



currently, and the way I found ChallengerSoft is through one of the first grantees of the CMS CHIPRA grant had helped customize and built the first database system. So from that I can see that it can be used in ways that can help streamline and benefit my need of only tracking Medicaid and Nevada Check Up families. And from this I've been able to successfully train staff to then enter the data so we know everything about the family we need to know, because our measurables are to follow this family for a year out so that they don't lose coverage. So it's very important that all the grantees find that tool that's going to keep them organized that everyone has access to. And you cannot make too many data entry mistakes so it's clear and concise when we need to report back. And the benefit of having ChallengerSoft for me is, we're in the need for more money to apply for new grants because the need is so great and my staff are very, very busy. We see that we need to use numbers and pull reports a lot more often. The other things that I want to share are the tactics. Now, when you have a mobile --

**Riley Greene:** Hi, this is Riley. Yvonne, this is Riley, and I'm so sorry to interrupt. I think we went over a little bit on our time towards the beginning. So we're actually going to advance your slides here to focus on the activities that you're doing in the spring. So we're going to get here - one back please - to these "Be Positively Covered" materials and messages. I'm so sorry to cut you off, but we know that Foundation for Positively Kids has a lot of great activities going on in the spring that I think will be really helpful for folks on the phone to hear about. So we're just on your "Be Positively Covered" Materials and Message Distribution slide, and if I could get you to start there that would be great. Thank you so much, and sorry folks to cut Yvonne off. These slides will be available.

**Yvonne Moore:** Okay. The main piece though, the school release form, really take a look at that. Because we've already been able to reach over 30,000 kids by sending the school release form in the backpack at these 43 schools. That's one of the main strategies I want to elaborate on, and that's helped us already submit over 1,200 applications for children, and we're only 5 months in. So we're definitely busy, and partners are always sending us additional referrals. You'll be able to see all my partnering streamlined referral sources, and it's all about building those relationships. So when our messaging comes out at the end of April we are so grateful and happy that we have developed some partnerships in areas that we will be able to release this campaign material. Our email blasts. We are going to make sure all the school leadership and the staff know about all this material. Video clips. In the Southern Nevada Health District front main lobby, they have TVs, just like the DMV. We're going to have TV video clips going on, and we're also going to share the video clips on the school system website. The TVs on the websites of any partners, if they want to clip it onto their website, and I'm also going to have it attached to my email so that families or any partner who is looking at one of my emails, they can click on that and say oh, now I know more about what Positively Kids does and I'll help spread the word. Posters, we're going to get these posters in all of our target schools, at least three of them in the main areas where we have parents float. Flyers and palm cards. We're going to be distributing those at various events, and we're really doing a lot of outreach to keep the message going about Medicaid and Nevada Check Up. Our spring paid media launch, we are going to get ready, go on the radio in English and Spanish, have our staff prepare to do presentations as needed. But I



think it's important that as you participate and go into coalition meetings that you always share what the latest and greatest is about your program and keep spreading the message about year round enrollment. Positively Kids, our activities and events. We do a lot of partnering and get invited to activities. We are going to be in the Immunization Week of activities and events. We participate in Title I school activities. We had a 40 parent mandatory meeting that we showed up at and were able to present and distribute information and get already on the spot names and numbers of families who we need to schedule appointments with. The Village. This is a monthly food distribution, that's Three Squares, Eye Care 4 Kids, Future Smiles. We all come together every month at a school and help distribute food. There are 300 to 400 families standing in line, so each one of them as they pass by we hand them a flyer. We tell them what we're doing, we ask them if they want to schedule an appointment. So we're getting the message out as we travel around with our other partners. New school enrollment. This is a great strategy and opportunity that everyone can reach out and find out how you can get your information and materials onto the school bulletins, onto the newsletters that principals do, and even a lot of school districts will have the robocall to the parents, and that's the ParentLink where out in Nevada there are messages being distributed every week through ParentLink sometimes, and we have PSA scripts already ready for them to read and verbalize. So we're excited about those campaign material events that we have scheduled and planned. The last thing that I wanted to share is about the follow-up and feedback. We already are going to be calling these principals of the 43 targeted schools to sit down with them, the nurses, the social workers, whoever we have connected with already, and talk about how it's been, how to keep generating the message and to present them with all of the great new campaign materials that they can get out. I think in closing, the most important thing also is your parent satisfaction surveys. Every program should have some feedback loop tool. So just as we're sitting with the principals, we ask every family to complete a parent satisfaction survey. This will be used with other grants and other funding streams, but the main message to get across and kind of complete is, with your community partners you can build a lot of cross referral base. You can offer to do the immunizations for their youth camp summer and they will then give you space or make referrals straight to you. You can partner with local application assisters, which is what I did, and they were primarily focused on the qualified health plans, and when they came across a Medicaid family they sent them over to us. The Nevada Health Link, their customer service line knew about us also, and when they became overwhelmed and there is so much need out there, they started referring families to us. I developed a great relationship with DWSS and their community liaison person who I stay in contact with on a regular basis. We do weekly huddles over the phone with all my staff on a free conference line. So we're able to invite other partners and ChallengerSoft trainees to then share with staff what needs to happen or how we need to strategize the next move we're going to make. DWSS calls in and will tell us the update on the backlog of applications, what the new online website errors mean. There's a lot of good communication that has come from building these partners and relationships. I recently got connected with the Child Support Chief. They're actually interested in putting our information right there in their offices, and their officers will then make cross referrals to us. Along with the City of Las Vegas and the Metro Police, it's another venue. By attending some of their events and honing in on apartment complexes has



been another way we've partnered with Metro Police. They host these events, and it's really important that we keep the message out and keep our face out there in sharing what service we can offer. It's really strategic in doing one on one. There is a lot of work to do, but nurturing those relationships with your partners, keeping your messages simple, and Be Positively Covered is all I can say. So with that I'll go ahead and close. If you have any questions or want to get connected to any of the services that I use here in Nevada, please feel free to give me a call. I appreciate your time today. Thank you.

**Donna Cohen Ross:** Thank you so much Yvonne. And we know that you have lots more to share, we're really grateful for the very rich presentation you just shared, and we will open it up for questions in a while. We do want to move ahead though, we have lots more to talk about. One of the things that we wanted to spend a little time on is something that many of you have been asking for for a while, and it goes back to this idea we talked about in the beginning of creating a narrative about what we're trying to do with respect to outreach and enrollment. And using personal stories is a really important way to do that, an important and compelling way to do that. We're going to have a presentation about how one of our groups has been doing that to really great effect, but first we're going to get some overview information. I'm going to turn it over to Sarah Wilkinson, who is on the Connecting Kids to Coverage Outreach Team, and she's going to share with us some high level thoughts about what using personal stories can do for you.

**Sarah Wilkinson:** Thank you all, and thanks for joining us today. So I'm just going to give a really quick overview of what makes a good story. The most important thing you can see up here is having an engaging story with a really clear narrative. Most simplistically what does that mean? Well, for this instance it means having a problem, having a kid without health insurance, and then solving that, having a solution. Getting them connected and enrolled in Medicaid and CHIP. It helps if you can add some details, if you can say, there was a really pressing health need, maybe they had asthma, it's a great time to do that in spring. Maybe they have allergies, maybe they have something more pressing. But just asking those questions. The second most important thing is making sure that that family is an effective spokesperson. So that they're comfortable talking with the media, they're comfortable sharing their story, answering questions. They stay on message, so key. You know people have really complicated lives, and we want to make sure the stories that we highlight are families that are approachable, are people that can be identified with across a really broad segment of the population. So just keeping that in the back of your mind. Just going onto the next slide. We kind of already talked about this, but the details really do matter here. So when you're talking with the families, and I know Laura and Anat are going to talk a lot more about how to do that, but really getting some good details here. Finding out, have they used their plan, has that been a positive experience. If not, that might not be the story that you want to highlight. And just getting some of the personal demographics. So just verifying their income, verifying the household members, and then going back to your own, doing your own double check to make sure they really are eligible for the program, they really are enrolled in the program. And that's one of the reasons why it is so effective to actually work with people on the ground, the navigators, the enrollers, to have them put you in touch with families that they have actually helped enroll in these programs.



**Donna Cohen Ross:** Great. Thank you so much Sarah, and we'll be again happy to answer some questions about the details of all of this, but now it is my great pleasure to share the microphone with our friends from Houston from Children's Defense Fund in Texas. As you'll see as we go forward, we've had a lot of fun with them throughout the last couple of months in terms of working with them on some great video presentations and also just working with them in a number of ways on the campaign. We're going to hear from two folks from CDF in Texas. Laura Guerra-Cardus, and Laura you're going to forgive me and help me pronounced your name better. And Anat Kelman Shaw, who is the Communications Director at CDF. Once again, they have been doing a really fabulous job in so many areas of the campaign, but particularly in using personal stories to help create this narrative and tell the story of enrollment. So Laura, I think I'm going to turn it over to you first.

**Laura Guerra-Cardus:** Great, thank you. Can you all hear me okay?

**Donna Cohen Ross:** You're loud and clear.

**Laura Guerra-Cardus:** Great. Well, Anat and I are very happy to be joining this presentation to talk about story collection. Our hope is that we have gathered here in our presentation practical tools and best practices to help organizations incorporate story collection into their work. We hope to answer the stories that you see on the slide right now during our presentation, why should an organization consider collecting stories, who and where are the best people and areas to do that. And then, how to do it, what are the important steps to get there. So we can start first on why collect stories. We've been really focused on story collection since 2006, and have found them incredibly useful. And we can go ahead and go to the next slide. We've effectively used them to move policy forward, to raise public awareness in our outreach and enrollment work. Empower families, secure earned media, and even with fund development. Today's presentation will focus on the interaction of stories with our outreach and enrollment work. Many of us I think have been getting a lot of requests for positive marketplace stories in the last month or so, and that's because we know that they are very powerful motivators to getting people who are still uninsured but could be enrolled to get to the marketplace, and the same is true for Medicaid and CHIP. Families are powerful messengers, and using the stories provides a powerful vision for the listener of what is possible for their families. So we do think that they are very useful in encouraging other families to learn about Medicaid and CHIP and get them into your enrollment events or office, and they are also helpful just in other aspects of your organization. For fundraising efforts, we all need to raise funds to be able to continue our work, and incorporating stories of how your organization helped a family connect their children to coverage is very illustrative for a funder to really see the value of your work. And also, there are times as we know, at the federal and state level where we need to demonstrate the value of these programs. And so stories are very important for that. In the next two slides, we tried to have four simple steps of how you can go about starting to incorporate story collection in your project or organization. The first one is to get staff buy in. You really want as many people on your staff to be involved, that's your policy folks, outreach, communications, etc. because most of the staff is involved either in the collection of them or in the use of the stories. In terms of the collection piece, the very best staff to lead those efforts are the ones that have the greatest contact with the



families. So you definitely want them to be very bought in to this concept. If you happen to be an organization that doesn't interact directly with families very often, you can still have story collection initiatives and projects by working with other partners who do have connections, day to day connections with families. The next step would be to develop a database, and this is really, you know, this is the place where you are going to house the stories that you collect. And it's good to develop that first, because as you're creating the columns of your database it allows you to be really thoughtful about which information you want to capture. For CHIP and Children's Medicaid, you probably want to capture which program they're on, how many kids are in the family, what languages are spoken, things of that sort. And we have an example later on of what that day to day will look like. If we can go to the next slide. The third step, and I really should have called it here Develop the Story Collection Mechanism. So that can be, you know, who is doing it, again we recommend the folks who interact with the families, but also how you're collecting it. And we've really benefitted from using a form, a family intake form that allows us to capture the information that we need. It's very important that this form be simple, or we've found if it's too complicated with too many questions it gets used less often. And the form that you create can really be, you know, complicated with the understanding that you'll possibly lose some buy in there, but it could be as simple as you want it. It could be as simple, for example, as simply collecting the family's contact information and one or two sentences on the gist of the story. A family came in, daughter had accident last year, CHIP was a lifesaver. Email, things of that sort. I also feel like I should have put one other step between three and four, which is actually starting to collect the stories. The note I mention on that is, sometimes outreach staff really feel like they already have a lot to do with the events they're doing and with their family interactions and might feel a little bit overwhelmed to have another thing put on their to do list. If this happens, it's really important to help them see that this fits naturally with the work they already do. Most outreach workers have conversations with families while they're helping them get enrolled. If the family is renewing, you can just ask, you know, have your children benefitted from Medicaid and CHIP? If they're applying for the first time, you can ask them, could you tell me a bit about why CHIP and Medicaid interest you? How do you see it benefitting your family? And then you can either capture little bits from every family you meet, or just when you see a really good story. And then the outreach worker simply says, that's a really great story, would you be open to sharing your story with others to help them know the benefits of the program? Now how much you collect in that moment is really up to you. It depends on how you want to use those stories and how you want to balance what you want to get out of the first interaction versus a later interaction, let's say once you've decided, these are ten stories we collected, this is the one we really want to use. And then you can reconnect with the family and get more details. And then lastly, the fourth step is to use them. You can either use them within your organization, but if that feels overwhelming look for a partner who can help you use them. You might have a coalition that does social media that would be happy to use the stories that you're able to collect. For folks in Texas, the Children's Defense Fund is very happy to help you do that and usually there are partners in the community who would be thrilled to death to know that you want to do story collection and need support. Two quick best practices on using them. We do recommend that you always check with the family before you use their story. I'm sorry I'm a little ahead, I'm



still on the last slide but that's okay. Always check with the family before you use them, because even if they've given you permission you don't want them to be surprised to see their face all over the billboards in a city or their name in the newspaper without having gotten a heads up. And the other is, before you use their information to make sure you have a signed media release form on file. And with that I'll pass it on to Anat to go through some of our other best practices.

**Anat Kelman Shaw:** Thank you Laura, that's great information. This next part of the conversation carries us a little forward with our best practices. We've learned from doing this over a long period of time a couple of important things to think about. We always need to treat people that we interact with with the dignity, courtesy and respect that we would expect to be treated. And so the stories and images that we may collect, recognizing that they don't really belong to us. We are just stewarding them, and we always need to as Laura mentioned make sure that we have the proper consent and permissions to use them each and every time we have an opportunity to use them. Relationships matter. Someone may be more willing to share their story with us if we can help them in some way, if they see some benefit for themselves. So one way to do that is to help the family understand why their experience matters. They might not feel that it does or that anybody else might care about their experience. But helping them to see that they are part of a greater whole can be of value. And that is all part of building trust, especially among people who may have historically felt disconnected or disenfranchised or for whatever reason not seeing themselves as part of something greater. This can be really valuable in helping to build up the family, empower the family, and build the relationship. Stewarding the relationship carefully. We want to always be careful not to misuse or overuse a family who has given us permission to speak about their experience, and so that is just something to keep in mind as you move forward in your story collection efforts. Some other things that I wanted to address before we move onto the next slide is that it's important to be strategic. You know, the stories that we elevate, and then it was mentioned before, the stories we elevate should support our organizational goals and objectives. Connecting kids to coverage. We want to be selective. Stories and themes should not feed into negative stereotypes or perpetuate myths about CHIP or Medicaid programs or about the families who qualify. It's best to use a positive narrative, finding opportunities to feature or celebrate even small successes with the stories that we collect and share are very important. A child who is able to visit the dentist for the first time, or a grandmother on a fixed income who got help signing up her grandchildren at the school health fair. Something positive goes a long way. Another important thing is to be mindful of diversity, you know, ethnic diversity, geographic diversity. The goal of story collection and storytelling, the goal is for people to be able to see themselves and identify with the stories that we share. And so, because CHIP and Medicaid kids are diverse, we need to reflect our audience and uplift diverse experiences. Perhaps you might find it strategic to tell a story about the unexpected child on CHIP or Medicaid, not the story that people might expect. Emotional connections are powerful. Is there a dramatic life saving difference that a program has made in a child's life or in a family's finances, that would be important to play up. Knowing your targets, making it local. If you're trying to raise awareness about or increase enrollment in CHIP and Medicaid, recruiting stories from a particular target area or perhaps a zip code with high uninsured and low enrollment. Insuring them with reporters there, there's nothing like a local story to make an impact. And if you can



share the story with key influencers in that area, perhaps a business leader, as a messenger for that story or a school or a community center as a messenger for that story can have an even greater impact. And we can now move to the next slide. Another thing we've learned that has been of value to us is erring at times on the side of overprotecting people. You know, it may be appropriate sometimes, people openly share very personal details. Even if at first they reveal more, it's always a good practice to ask, you know, would the details of their story cause some potential harm or embarrassment or possible repercussions at work or school, or is there another way to say it. So there are two examples there. You know, if they tell you they're a shift manager at Pizza Hut, maybe you can say that they are a shift manager at a national restaurant chain. Or if they give very specific details about their medical condition or their child's medical condition, maybe there is another way to say it without specifically saying what those conditions are. And of course, if the subject of a story is a minor, special attention is needed. There are guidelines for journalists reporting on children. It may not be appropriate to reveal identifying details such as last name, where they go to school, where they live. Certainly not if they were victims of a crime. But we tend to follow the Hippocratic Oath, "First, do no harm," when we're sharing stories about children. Next slide please. And here on the screen is just an example of one of our collection mechanisms that Laura briefly touched on earlier. It's the top line of a spreadsheet that we used for story banking. You know, you can segment your information any which way. We have some of our information segmented by story type, with tabs along the bottom of the spreadsheet. Or geographic region if it's helpful to connect stories to certain locations. But you can do that by creating multiple tabs along the bottom. You might organize your data differently. For example, in this particular story bank we have a tab for Medicaid and CHIP stories, positive marketplace stories. Since we're in Texas we might have coverage gap stories. But this is one way to help us organize the information in a kind of one stop shop place where we can go and grab a story quickly in case a reporter calls, those timelines are often pretty tight. A benefit of using Google Docs is that it's free. You can control the access and have multiple users both inside and outside of your organization who can store, maintain and reference the data kind of in a shared space as needed. And that's been helpful to us since we work with coalition partners in our story collection efforts. A down side to using Google Docs is that with multiple users, you need to be more mindful of adopting tighter controls and rules of use to maintain the data integrity and to steward our relationships carefully. One way we've addressed that concern is we've incorporated a checkpoint for ourselves, and we've incorporated into our process a primary liaison for each story sharer, and you can note the first column there. So any one of us needing to use this story first checks in with that primary liaison just to make sure that there aren't any concerns or new developments with the family that may not have been recorded in the document or can't easily be captured in a document like this before we move forward in using that individual story. And we also have a Read Me tab at the bottom with simple instructions where we can quickly reference the rules that we've created for our own use of inputting data and using the data from the spreadsheet. And what's nice also is that here in the same document, if the story sharer has provided a photo or if we've taken one, it's nice to be able to create content online for social media. This column where we've got Photo lets us and others on our team to look for a photo of that family in one of our shared image folders. Next slide. This is just an example of



another story collection mechanism you might be able to build into your website. And the next slide. So on this slide there are some recent examples where we've used images of families with simple quotes as visual media for storytelling. Great for all kinds of social media, Facebook, Tumblr, Twitter. And even if you don't have an image, a quote can be visually represented or even overlaid on a compelling stock photo if you have access to stock images, and I know there are free resources for getting stock images. But the best image is really a real image of an individual who you've worked with and who you've assisted, and I just want to note the attention to diversity in these stories that we've shared. And our last slide here. Another great outreach opportunity may be to feature a family story in a video. This is one which we were fortunate to be able to work with CMS to produce. We helped a family sign up for CHIP at an outreach event that we held in partnership with a local supermarket chain here in Texas. And the family graciously agreed to speak about their experience on camera. A very memorable quote from the filming was that the family went in for beans and rice and came out with health insurance from the experience. And it was just a wonderful example of how a simple story that is authentic and genuine can promote awareness about the programs and about what local partners and businesses can do to improve the health of the community in which they're serving. And we were able to promote the link to this video broadly through our social media channels and through email newsletters and newly extend the visibility of the message. It was a wonderful partnership. Now I'll turn it back over to Laura.

**Laura Guerra-Cardus:** Thanks Anat, that was really great. And just to wrap up, the four key takeaways we'd like to leave with are, once you've set it up, story collection can be simple. Stories are a very worthwhile investment. Caring for story sharers is the key. And if you need help, partner with others who have story collection tools and resources. Thanks so much.

**Donna Cohen Ross:** Thank you so much Laura and Anat, that was a tremendously sensitive presentation and important take on what it means to include families in your campaign. And one of the things that you said early on really struck me, and that is, we're not using their stories, we're bringing them into the campaign, and the families are telling the stories in their own voice, and that is tremendously helpful. Your practical tools were really great as well. There's so much more we could be talking about on this topic and so many. We are coming close to our time now. I think we have a couple of questions that we wanted to raise right now, so I'm going to ask Riley to tell us what those questions are and then we will wrap up with a little bit more housekeeping I think.

**Riley Greene:** Yes, absolutely. So we have one question here from Orland Gonzales, thank you for submitting it. Do people need to sign up for Medicaid before the 15th of the month for their coverage to start the following month like the old Medicaid process?

**Donna Cohen Ross:** First of all I want to thank you for that question, because it gives us an opportunity to reiterate again that you can, people can apply for and if eligible get enrolled in Medicaid and CHIP at any time, and unlike coverage in the qualified health plans, when they get enrolled, when they are deemed to be eligible, when they are determined eligible, they get enrolled right away. And so people should be encouraged to apply and go forward in that



application process, and again we're not just talking about children, we're talking about parents and other adults, other family members who might be eligible as well. So it really is helpful to encourage people to apply. You don't really know until they apply whether or not they're eligible. But they can be covered right away if they are eligible. So thank you for that question.

**Riley Greene:** Yes, thank you. And then we have a note here from Kevin Brown that we appreciate that he submitted and wanted to reiterate to folks on the phone. Kevin makes the good point that especially in states where Medicaid eligibility has been expanded, we can still enroll parents year round as well. So we do not want to forget parents. Our focus is on kids but we do not want to forget parents as well.

**Donna Cohen Ross:** That's really helpful, and again I think those of you who have joined us on previous webinars know that we talk about enrolling parents as a great children's enrollment strategy. When you enroll parents, the eligible children come along with them. Very, very important.

**Riley Green:** Right We have a good question here from Jenny Clevenger that I think Sandy can speak to. How can I reach out to those families that do not have access to the internet? What are some outreach strategies for folks without the internet? And I'll jump in, and Sandy might have something to add, that part of the resources of the Connecting Kids to Coverage Campaign are these partner organizations that we mentioned. And those are folks usually that work in community health centers, that have kind of face to face contact with the uninsured. So I think connecting with local application assisters as well as organizations that work with the uninsured every day will give you that face to face contact and the opportunity to provide application assistance to those people. And Yvonne Moore from Positively Kids in Las Vegas also had great ideas about equipping your application assisters to meet people where they are. So to the extent possible, using tools such as mobile internet and mobile laptops and tablets gives your application assisters the tools they need to help the people that might not have those tools in their own homes.

**Sandy Won:** Those are great points. This is Sandy. I would just add that a lot of the application assistance, especially with our Medicaid and CHIP folks and what has been so successful in outreach and enrollment is really that in-person assistance. And so where you can contact local organizations on the phone. If you call 1-877-KIDS-NOW they can also put you in touch with local, state application, the state Medicaid office. There are other ways to get people in touch with local application assistance. If you need help finding local application assisters please contact our campaign field desk. We work with a lot of great groups through CMS and other coalitions that we know on the ground. So it is really about providing that one on one personal assistance, and I think it's a great point, we can't assume that everyone has got access to the internet here. While many of us communicate this way, there are really a lot of different ways. As Riley mentioned, local partners and schools, community groups, groups that really are in touch with your eligible families on a day to day basis, faith based outreach, there are a lot of tools that we continually drum home through our webinars, are great ways to reach families.



**Donna Cohen Ross:** Great. Thank you so much. We have really come to the end of our time right now. This has been an incredibly jam packed and very rich webinar. So I want to take the opportunity to thank all of our speakers, we've had a lot of them as well. So thank you to Sandy, to Riley, Yvonne, Sarah, Laura and Anat. This was really a great group effort. We thank everyone who participated in the poll, who participated in asking questions and giving ideas. We're going to sort through what you've asked and what you've shared and continue to share that with everyone. I know we've made some promises about what we're going to share back out with you, things like the income levels in the state by state chart that I mentioned. We did mention that the webinar is going to be available on the InsureKidsNow.gov website, that's true. It takes us a couple of weeks to get the slides and the recording in sync and posted, but we will send out one of our electronic newsletters when it is up letting you know, it will have a link to it. We hope that you look at the other resources, that confident kid, the kid in charge is our mascot for the coming campaign. So we hope that you will use that material, get it customized, let us know what you're doing with it so that we can share your great ideas with others. We are going to end here and again say thank you to all of you who participated. Watch your email for our e-newsletter. If you aren't getting our e-newsletter we can fix that right away by sharing with everyone the instructions for signing up for the e-newsletter can be found on InsureKidsNow.gov, and we have thousands of people who get those e-newsletters and other materials. So make sure that you're one of them. Thanks again for the time that you spent with us this afternoon. We look forward to our next opportunity to talk with you. Thank you so much.