



# Engaging Parent Mentors to Increase Participation of Eligible Children in Medicaid and CHIP

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# Agenda

- Introduction and Overview
- What are Parent Mentors?
- Overview of Kids' HELP Program
- Aims of Kids' HELP Randomized Trial
- Parent Mentors Training Overview
- Study Outcomes
- Study Conclusions
- Implementation Tips
- Campaign Resources
- Questions and Answers



# Kids' HELP Program

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# Closer Look at Parent Mentors (PMs)



# What are Parent Mentors? What is Their Significance?

- **PMs** – Specialized form of community health workers in which parents of children with particular health condition or risk leverage relevant experience, with additional training, to assist and counsel other parents of children with same condition or risk.
- **Kids' HELP PMs** – Experienced parents who already have child covered by Medicaid or CHIP who received training to assist other parents with uninsured children.



# Background on Kids' HELP (Health Insurance by Educating Lots of Parents) Program



# Overview of Kids' HELP and the Purpose of this Research Trial



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# Rationale for Trial?

**There had never been one...until now**

- Not enough known about most effective ways to insure uninsured children
- No study had examined effectiveness of Parent Mentors (PMs)



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# What is Kids' HELP?

- **Kids' HELP** stands for:
  - Kids'
  - Health Insurance by
  - Educating
  - Lots of
  - Parents
- Kids' HELP trial: randomized, controlled trial of effects of PMs on insuring uninsured minority children

# Primary Aim of Kids' HELP

- To determine whether PMs are more effective than traditional Medicaid and CHIP outreach and enrollment methods in insuring eligible, uninsured Latino and African-American children



# Secondary Aims

- Determine whether PMs are more effective than traditional Medicaid and CHIP outreach and enrollment in:
  - Obtaining insurance faster
  - Renewing coverage
  - Improving access to medical and dental care
  - Reducing unmet needs & out-of-pocket costs of care
  - Achieving parental satisfaction and quality of care
  - Teaching parents to maintain children's coverage up to two years after intervention cessation
  - Saving money



# Parent Mentor Responsibilities

- Provide information on types of insurance programs and application process
- Provide information and assistance on insurance program eligibility requirements
- Complete child's insurance application together with parents and submit application with family



# Parent Mentor Characteristics

- Primary caregiver for  $\geq 1$  child covered by Medicaid/CHIP for  $\geq 1$  year
- English proficiency, and if Latino, bilingually fluent in English and Spanish
- Available time and commitment to assist families with obtaining Medicaid and CHIP for their uninsured children
- Able to attend two-day training session
- History of on-time arrival to clinic appointments
- Has trusting and long term relationship with clinic staff



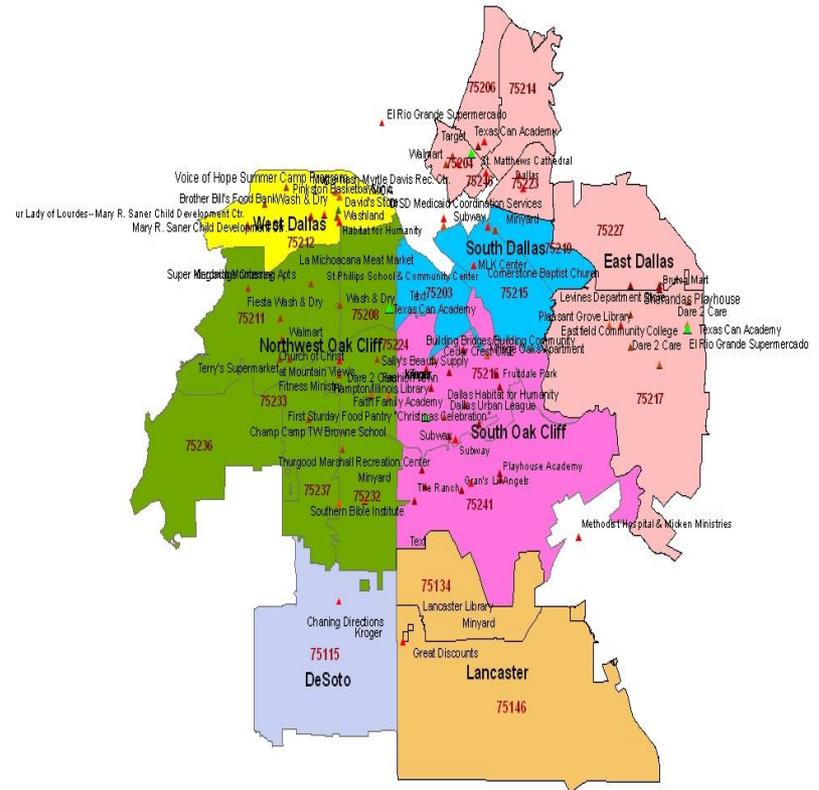
# Parent Mentors Training Overview



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# Overview of Research Design

Setting: 7 Dallas communities with highest proportion of uninsured and poor minority children



# Training Overview

- Parent Mentors underwent a two-day training session where the following was discussed:
  - Types of insurance programs
  - Application process
  - Completing and submitting applications with parents
  - Being family advocate/liaison with Medicaid and CHIP programs
  - Renewing coverage
  - Obtaining pediatric and dental care and medical and dental homes
  - Helping families with food, clothing, and other social determinants of health

# Parent Mentors Activities

- PMs met with families in their homes and at community sites and contacted them regularly via phone, e-mails, and texting
  - PMs followed up to 10 families at a time



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# Parent Mentor Screening and Training Videos



[Parent Mentor Screening Video](#)

[Parent Mentor Training Video](#)



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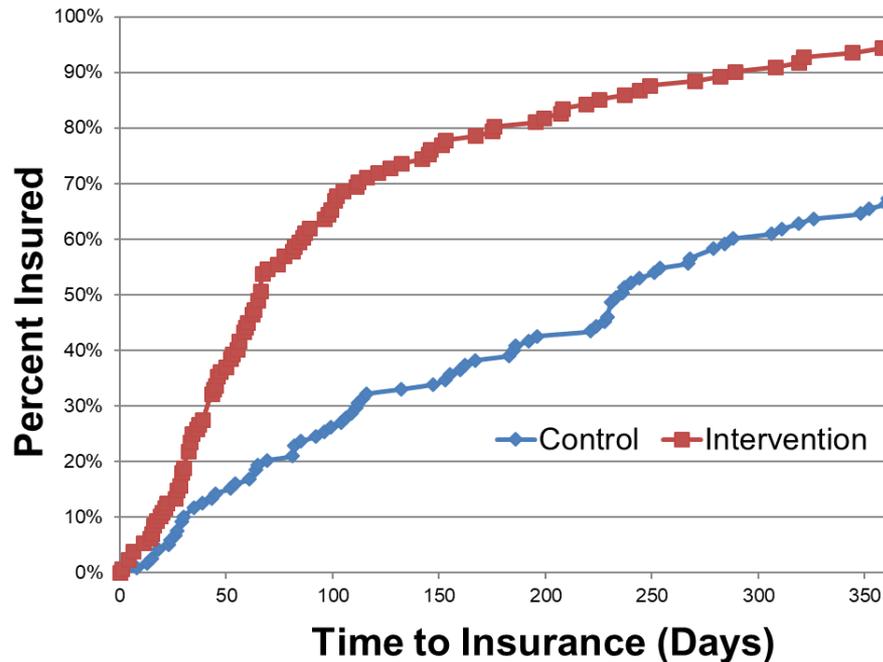
# Study Outcomes



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# PMs are More Effective in Coverage Kids than Traditional Methods

- Significantly higher proportion of PM group obtained health insurance vs. control group, at **95% vs. 68%**



# Kids with PMs Received Faster, Longer Coverage and Better Access

- Families working with PMs reported that their children receiving better care than those who did not.
  - Insured faster (62 days vs. 140 days, on average)
  - More likely to renew insurance and retain coverage, even 2 years after PMs stopped working with them
  - More likely to have primary-care provider
  - Had much better access to:
    - Overall health care and preventative care
    - Specialty care
    - Acute care
    - Dental care



# Parental Satisfaction, Out-of-Pocket Costs & Program Savings

- PM parents were significantly more satisfied than controls with process of obtaining coverage
- Quality of well-child care rated higher for PM group
- PM parents reported significantly lower out-of-pocket costs than controls for:
  - All doctor visits
  - Sick visits
  - Preventative-care visits
  - PMs saved \$6,045 per insured child per year

# Important Takeaways from Study



# Study Conclusions

- PMs are significantly more effective than traditional Medicaid and CHIP outreach and enrollment efforts in:
  - Insuring uninsured minority children
  - Obtaining insurance faster and renewing coverage
  - Improving access to medical and dental care
  - Reducing unmet needs and out-of-pocket costs of care
  - Achieving parental satisfaction and quality of care
  - Teaching parents to maintain children’s coverage up to two years after intervention cessation
  - PMs are relatively inexpensive but highly cost-effective
    - Average Cost: \$636 per child per year
    - Average Savings: \$6,045 per child insured per year

# Implications

- Given that up to 3.8 million US children are uninsured and eligible for Medicaid and CHIP, and 53% are Latino or African-American, the findings suggest implementing PMs nationally for minority children could save over \$12.3 billion
- If PM intervention shown to be effective for all racial/ethnic groups, findings suggest implementing PMs nationally for all uninsured children could save \$21.7 billion
  - PMs and peer mentors for adults could prove to be highly cost-effective interventions for eliminating disparities and insuring all Americans

# Recruitment Venues for Parent Mentor Candidates

- Primary-care and specialty clinics
- Federally Qualified Health Centers (FQHCs)
- Emergency departments
- Public-health departments
- Community-based organizations
- State, county, and local agencies
- Schools
- WIC offices
- Food pantries
- Health fairs



# Implementation Tip: Provide Flexibility with Training Sessions

- PM trainees may have multiple competing demands, including part-time employment and responsibility for several children
- Plan on holding multiple sessions on different days (weekdays and weekends) and times (morning, afternoon, and evening)
- If possible, offer meals, childcare, and transportation vouchers or gas money
- Hold training sessions in convenient locations, such as in the communities where PMs live



# Helpful Tips on Being a Good Parent Mentor

- Be understanding
- Let the speaker finish
- Finish listening before you talk
- Ask questions
- Give families positive feedback
- Give suggestions



# Problem Solving as a Parent Mentor

- Identify the problem
- Think of ideas that would eliminate the problem or make it better
- Pick one idea that is the best way to solve the problem
- Identify ways to accomplish the family's goal
- When in doubt, the Program Coordinator will be available to address any questions and concerns

# Implementation Tip: Importance of Ongoing Monitoring of Parent Mentors

- PMs should maintain careful logs of all contacts with target families, including dates and times of all texts, phone calls, e-mails, and home visits:
  - Facilitates quality control
  - Ensures that PMs are reaching out to families enough to be effective
  - Identifies areas where additional training may be needed
  - Allows detection of underperformance and specific corrective action, as needed

# Potential Challenges and Solutions

- Poor and low-income families eligible for Medicaid and CHIP move often, with frequent changes of address and phone numbers
- Important to have PMs obtain as much contact information as possible, including cell and land-line numbers and addresses of all family members, close relatives, and several friends
- PMs might ask for both home and work addresses
- Home visits and registered letters may be necessary for non-responding families



# Implementation Tip: Assisting Families with Insurance Renewal

- It is important for PMs to anticipate assisting families with insurance renewal well ahead of deadline
  - Non-renewal is one of most common causes of children losing Medicaid and CHIP coverage
- Preparation time (to obtain paystubs and complete forms) may be substantial, so PM having good head start with family is critical

# CMS CKC Campaign Materials

- Outreach Materials— Customizable Posters/Palmcards, Videos, Tip Sheets
- Informational Webinars
- “Campaign Notes” eNewsletter
- Ready-Made Articles, Radio Scripts
- Digital Media Tools
- TV & Radio PSAs
- Email us at: [ConnectingKids@cms.hhs.gov](mailto:ConnectingKids@cms.hhs.gov)

The screenshot displays the InsureKidsNow.gov website. At the top, there is a navigation bar with the InsureKidsNow.gov logo and a search bar. Below the navigation bar, there is a purple header with the following menu items: Find Coverage for Your Family, Campaign Information, Outreach Tool Library, Webinars & Videos, Campaign Notes eNewsletter, and Initiatives. The main content area is titled "Outreach Tool Library" and features a sub-header "Outreach Tool Library". Below this, there is a paragraph of text explaining the campaign's goal and a list of resources. The resources are categorized into "Online Materials" and "Print Materials". The "Online Materials" list includes Social Media Messages, Facebook Images, Twitter Images, Web Banners & Buttons, and Find a Dentist Widget. The "Print Materials" list includes Palmcards. Below the text, there is a photograph of a young girl smiling, with an orange overlay containing the text "#Enroll365 ¡Asegúrate que las fotos de la escuela incluyen una sonrisa excelente!". The InsureKidsNow.gov logo is visible in the bottom right corner of the photograph.

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home > Outreach Tool Library

## Outreach Tool Library

The [Connecting Kids to Coverage National Campaign](#) works with outreach grantees and a variety of partners—including government agencies, community organizations, health care providers, schools and others—throughout the nation, with a focus on reaching children and teens who are eligible for Medicaid and the Children's Health Insurance Program (CHIP), but are not enrolled.

The Campaign has produced various resources to help our outreach partners connect kids to coverage and spread the word about Medicaid and CHIP resources. From [customizable materials](#) (PDF 4 as 18) like select posters and palmcards to social media messages and images to strategies and ideas, InsureKidsNow.gov provides a wide range of free outreach materials to help support your outreach initiatives—explore the resources below!

- [Online Materials](#)
  - [Social Media Messages](#)
  - [Facebook Images](#)
  - [Twitter Images](#)
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¡Asegúrate que las fotos de la escuela incluyen una sonrisa excelente!

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# Questions?



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# Thank you!

