

Back-to-School and School-Based Enrollment Strategies:

Tried, True & New Ideas to Reach Families

Connecting Kids to Coverage National Campaign

Webinar Transcript June 22, 2015

Riley Greene: Hi everyone. This is Riley Greene with the Connecting Kids to Coverage Campaign. Thanks so much for joining our webinar this afternoon on Back- to-School and School-Based Enrollment Strategies: Tried, True and New Ideas to Reach Families. We had almost 600 people sign up for this webinar. We're really excited about the enthusiasm and interest in the topic and we have a great lineup of speakers. Before we get started, I'm just going to address a couple of housekeeping items, mainly how we're going to handle our questions. We would like you to submit your questions as you have them throughout the webinar through the chat box in your control panel. That's the little grey box on the right hand side of your screen. You just submit the question through that chat box, and we will read them out and address them to our presenters during the question and answer session at the end of the presentation. And just to anticipate one of our more popular questions, we do record these webinars and we will make both a recording and a copy of the slides available on insurekidsnow.gov just a couple of weeks after the webinar concludes. So with that out of the way, I'd like to hand it over to Donna Cohen Ross, the Director of Enrollment Initiatives at CMCS to get us started.

Donna Cohen Ross: Great, thanks so much Riley and thanks everyone for calling in today. We're glad to have so many participants because this is going to be I think really interesting and a different perspective than we've done in the past on this topic. So I'm very excited about it, and I hope you all are too. Let me give you just a brief overview of the agenda, and I will introduce our speakers right before they speak so that you'll be able to connect their voices with their names. We're going to start off with a number of presentations about school based outreach and enrollment activities that really are focused on integrating outreach and enrollment in the schools' routines. So things that can go on all year long, there is no time like the present to start planning for next year. So first we're going to hear about an integrated, effective school based enrollment campaign, I'll introduce those speakers in just a moment. We're really excited to have a superintendent's perspective and experience today, that's coming soon. One of the things that we always get asked by our outreach and enrollment grantees and partners is, how do I approach the school district in my community? What should I offer to them? How should I make the case that what we're trying to do is of mutual interest? Well, I think you're going to hear a little bit about that in a moment. Then we're going to hear about the important role that school nurses play and how they're making connections in St. Louis with the free and reduced price school meals program. Then we're going to come back to what I know everyone is hopefully deep into planning for, and that is back to school activities which come up faster than we'd like to think. For many of you, school just got out or maybe some of you school is still in session, but those

kids are getting ready to burst out the doors maybe at the end of this week or next. But we're already thinking about back to school in the fall. So overall that's what we're going to talk about today, and of course we won't leave you without going and doing our usual walkthrough of our outreach and enrollment materials and other campaign resources. So stick with us. It's my pleasure now to really dive into our program and to introduce our first two speakers. They come to us from Covering Kids and Families of Indiana, one of our grantee organizations. We're going to hear from Doris Higgins, who is the Director of School Health Services, and Barbara Pitcher, who is the Manager of School-Based Outreach and Enrollment Strategy. Welcome Doris and Barbara. I'm going to turn it over to you now so that you can talk about all of the great work that you're doing in Indiana.

Doris Higgins: Great. Well, thank you Donna. Greetings everyone from stormy Indiana. I'm Doris Higgins, and Barbara and I are part of the Covering Kids and Families of Indiana Connecting Kids to Coverage Outreach and Enrollment Grant. And Donna, I think maybe next time we need a shorter title for the grant.

[laughter]

But this grant we've decided to use school based outreach strategies to enroll kids, help parents ensure their kids retain their coverage, and help connect kids to a medical home. We've been working on this grant since July of 2013. Next slide please. And we are able to do this work because of our wonderful partners. We have six partners in eight counties who are doing school based outreach in fourteen school corporations. These six partners are the boots on the ground, and what you will hear about today is a result of their hard work and their effort. During the past 22 months of the grant, our partners have done over 3,200 applications. Our grant efforts launched as the first open enrollment for marketplace occurred, and was also impacted as Indiana expanded Medicaid through the Healthy Indiana Plan in February of this year. So even though our focus has been on enrolling children, about half of our applications have been for adults. That is kind of exciting that school based outreach serves whole families not just the students. So where are our enrollments coming from? Tracking this connection between outreach and enrollment has been exciting work for us. It has allowed us to use data to drive our decisions, and we are able to track the source of our enrollments, enabling us to make better decisions about starting, stopping, continuing or changing our strategies. In addition to the all-important data, we have had some other important outcomes. We as I mentioned before have reached uninsured adults during an exciting time of new opportunities. We have collected meaningful data that allows us to better evaluate our outreach strategies. And we've also been able to build the capacity of both covering kids and families in Indiana as well as that of our six partners. But for us, I think one of the best outcomes for sustainability has been building a network of peers who learn together, share their successes and their challenges and who have grown this work across many communities. In addition to these outcomes, we have also had some key realizations. Number one is that taking time for process matters. Starting with the end in mind is critical. We all know this but can sometimes have a hard time putting it into practice. Planning before implementing and evaluating constantly takes time in the short run but it pays off in the long run. We all know it's worth it, it's just sometimes it's hard to make ourselves do it. Another realization

is that relationships are foundational. Our most effective outreach strategies that lead directly to enrollments are relationship based, and Barbara is going to talk more about that in just a minute. When we started this grant, there was a lot of focus on the events. School events, community events, health fairs, etc. And we're still doing many events, but through evaluation we have found that events are not always the best strategy for enrollment. Now, they are an important part of marketing, but if they are all you do for school based outreach you can have a hard time meeting your enrollment goals. We've also realized that experimenting can lead to all kinds of discoveries and "aha" moments, especially when you fully evaluate and consider your return on the investment. As part of our work on process, we, Covering Kids and Families and our partners, have created a pipeline visual. I want to mention that our group meets once a month. So we've been meeting and discussing all these things for almost two years now. And so we've created this pipeline visual to help us evaluate how to improve how we successfully move consumers from outreach to enrollment. These are some of our original steps, but just last week a partner shared their insight that if you can not only improve the pipeline but make it shorter by removing a step, you will likely improve your enrollment success rate. They now are starting to do online scheduling at events, eliminating the step of collecting contact cards and then trying to make the follow up phone calls and schedule appointments. They've just completely eliminated that step. Next Barbara will share some of our successful school based outreach strategies.

Barbara Pitcher: Thank you Doris. A few of the strategies that we wanted to highlight were our 100% Campaign, school staff, and leveraging school connections. So first our 100% Campaign. I have to say that we adapted this concept of the 100% Campaign from other grantees in California and Texas. Then with our partners we developed it throughout the school year. And we believe that the campaign will be even stronger as we start out the new school year with that campaign in place. So the 100% Campaign logo is both branding and messaging. It creates a vision or a rallying cry. It gets people excited about making sure that every Hoosier child has health care coverage. As they developed relationships, our partners identified 100% Campaign Champions in the school and in the community, and they enrolled them in a vision. They have them sign an agreement that reinforces the 100% Campaign vision and what it means to champion the cause. Our partners recognize their champions with a certificate that they can display in the workplace. Our partners also provide their champions with information and tools to easily make referrals such as a button campaign which I'll describe in a moment. And we've found that the more embedded our partners were in schools, not necessarily physically such as at school events, but in the systems and processes, the more credibility they gained. Our partners included the 100% Campaign logo, enrollment and contact information on school websites, school calendars, posters, banners, and in sports programs, wherever they had an opportunity. So that was seen on a continual basis. Here we also see the logo on materials for what we termed our Button Campaign, simply because it began with a button reading Ask Me About Health Insurance For Your Kids. But through collaboration among our peer network, we added a lanyard that could be worn or displayed by the champions on an ongoing basis or for a specific time period or school event. It contained business card sized flyers that could be handed to the parents explaining how our partners could personally assist in obtaining health care coverage along with their contact information. This provided our school contacts and champions an easy way to support outreach

and enrollment efforts without having to understand all the complexities of health care coverage options. A down side of the process is it is a little bit more passive, it relies on both the consumer to ask the question and make contact to our enrollment partners, the champions don't collect the contact information. But we polled our champions about the process, and they indicated that those parents who had asked about insurance were consistently favorable to the information that they received. And here is an example, next slide, this is just an example of the 100% Campaign Champion Certificate. It's just an easy and inexpensive way to build on a relationship and reinforce the message. Building partnerships has been absolutely critical to our effort. When approaching school staffs, we need to have a positive attitude, passion for the vision and a lot of persistence. School staffs are increasingly spread thin, so it is important to understand where they are coming from before we can ever communicate a clear vision and make the explicit connection between student health and learning outcomes, and then create a reasonable plan of action. We have to make it easy for people to make referrals or they simply won't happen. We learned that it is important to have a feedback loop. At a conference just last week, a school nurse told us about making referrals at her local enrollment organization, not one of our partners. But she was concerned that she never really understood what happened afterward. So we know it's important to let people know when they make a difference. As we mentioned, relationships are really important, but they don't all look the same. Next slide please. There we go. You need to approach a school from the top down, starting with buy in from the superintendent. But this chart is ordered in terms of ongoing value and the frequency of communication. We have found that school nurses, social workers, counselors, parent liaisons, or school resource officers are often the most critical to our success in schools. This is where the majority of the referrals come from, and these are the folks who are in the know about what's going on in the schools and can get our partners connected in a meaningful way. It's so important that we leverage those school connections wherever possible, and Doris is going to share some of the ways that we've done that.

Doris Higgins: Thank you Barbara. The last strategy we want to highlight today is leveraging that school connection. As you know, schools are the community centers and are trusted sources of information. Getting their stamp of approval can open a lot of doors. For example, getting permission to use the school's logo on flyers provides an important opportunity to cross brand and establish your credibility. One of our partners even used the school colors to visually reinforce their message. Another partner was able to send flyers to all the households at a school. They provided the flyers and paid the postage but the school let them use their envelopes. An envelope from the school is more likely to be opened and read. Thinking about both our process and the consumer's experience can enhance all strategies, even something simple like mailing off a flyer. Schools can also be an important source of data. Last month one of our partners began to work on a new strategy to reach low income working parents. Just by asking the general question "Where do parents work?" resulted in the school district providing them with a detailed list and now they can target one specific employer that they know does not provide health insurance and where most likely the income that the parents there are earning qualifies their children for CHIP. Schools can also provide free marketing that helps the broader community know who you are and what you are doing, giving you that all important name recognition and community trust.

This includes everything from putting your information on their website and social media to doing mass phone calls, sometimes they're also called robocalls, to all of the households telling them about your services. One of our school districts with our partner even hung a banner on a stationary bus parked outside the bus parking lot for the summer. It was at a busy intersection. So having again that connection between the school and the partner is very important and can often be actually difficult to measure, but you know it's important. Another way to leverage the school connection is when approaching other community organizations that also serve these families about collaborating or providing referrals. The school connection gives an immediate level of credibility with them. You're not only saying, oh, we work with the schools. But when they see that school logo it is a visual reinforcement of cross branding on your materials and the level of trust is raised. So you're not starting at step 1, you're starting at step 5 in your process with them. We are able to share these three strategies because of our data collection, and we are able to evaluate what works. However, we all know that data sometimes doesn't tell the whole story. It tells the story of one specific strategy at a certain time in a certain school district. One of our key realizations was that events do not equal strategies for example. Our partners did 269 events that resulted in 136 applications, but only 50 enrollments. By taking the time to further evaluate why more enrollments didn't result from these efforts, we have been able to develop strategies that make those events more successful, improving our pipeline. We have also been able to set realistic goals that the real benefit from these events may be in general marketing and educating consumers in building trust and in building those all- important relationships with staff. We have evaluated other strategies to consider the return on investment. So although a strategy may lead to enrollment, once you factor in the cost of staff and other resources you may find that it's better to spend your time on other strategies that have a greater return on investment. We again want to emphasize that every school district is different. Experimenting and evaluating and checking in with your peer network is what allows us to make data driven decisions for future efforts. I do want to point out that our two most successful strategies, school staff referrals and family/friend referrals are both relationship based. So I wanted to finish up with a list of some resources, including our website and that of the Indiana Health Care Toolbox. The Toolbox is based on the Wisconsin Badger Toolbox, and is a collaborative and ongoing effort to provide information on outreach and enrollment to schools. Also on this list is the website for the Indiana Schoolhouse Network that Covering Kids and Families of Indiana is the lead agency for and I have to do my little plug for on this call. And of course Insure Kids Now that we all know and love. So I just wanted to finish by thanking our partners who work hard every day enrolling kids and families, who share their successes and challenges, and have joined in this work to serve Hoosier children. And if we can assist in any of your efforts in any way, please let us know. We'd be happy to share any and all materials that our partners have created. Thank you Donna.

Donna Cohen Ross: Thanks so much Doris and Barbara, both of you, that was really a great presentation. Stick with us, because we're going to have kind of an extended question and answer period at the end. We're going to wait until all of our speakers have had a chance to share. But we really do appreciate all of what you've given us at the top of the call, and of course you I think gave a great lead in to our next speaker, who is Lillian Maldonado French. She is a School Superintendent for Mountain View School District in California. I had the great pleasure of

meeting Lillian along with a number of other school superintendents at a meeting not long ago that was pulled together by the Children's Defense Fund and the Association of School Administrators. And I cannot tell you how impressive it was to have the school superintendents and other school administrators, who are not only the champions that Barbara and Doris talked about, but they are tremendous leaders. And it is really so important to have those words of support and action at the top. And so Lillian, we welcome you this afternoon, I think for you it is this morning, sorry about that. But I'm sure you'll have a couple of comments on what you've heard and I know that you have things that you'd like to share with everybody as well.

Lillian Maldonado French: Yes I do. Well good morning everyone, it is my pleasure to be here. I truly did enjoy hearing Doris and Barbara's comments because what they say is so true. School districts do receive a lot of requests for participation in different projects. But you can really put yourself at the front of the line by doing a few key things in front to really build that relationship. So today I have for you our story of how we ended up going on this journey with our other health care partners. It's important to share that I'm going to be talking a little bit about how other school districts can do similar work as we're doing, but also maybe how health care partners can help their cause in working and building relationships with school districts. So a little bit about our district. We're the Mountain View School District. We're an K-8 district in a corner of LA County. We have about 7,500 students, and you can see our stats there. Our students, 90% of them are on free and reduced lunch. We feed all of our students, 100%. We have English learners, a great deal of poverty, and along with that some very concerning rates of obesity and actually diabetes among our students. So we were really looking to, what can we do to support our students and support our community in their health? Next slide, thanks. So we had an existing partnership that we had developed over years with the California Community Foundation, several of the local school districts and other community based organizations, really looking at what were those key features of how we could help our community in the area of health but also in the area of academics, college and career going culture, and a number of other initiatives. So when we had an opportunity to hear about a program and a grant that was taking place with the American Association of School Administrators and the Children's Defense Fund, we were very interested. Next slide, thanks. We were able to receive the grant, and it was a one year grant for \$14,000, which really was more like seed money. But it's the idea of, how can we do something intentional and purposeful around the idea of children's health insurance, rather than simply say, this is an important cause, and wait for partners to come to us. But what can we do intentionally to make that a goal, and how can we support those efforts? So we began working with them, and at this point what I want to share with you is, you know, in terms of you being a superintendent and school districts out there, what I would say is look for those grant opportunities, look for partnerships with other groups. And really, it is about creating sustainable programs. What we are very interested, and as a school district are in grants, and are in maybe a project or an event as was mentioned. Those are all great. But what you really want to focus on is, how can you do this long term? What can you do so you continue your efforts and you see that building? And so from a school district's perspective, what you're looking for is an interdisciplinary team. You want to have on your team your food service person, whether it's a director or whomever is in charge of food services. But also, who is that person who works with

the counselors or psychologists, and who are those people who are at the school level who help enroll students or might be the nurse or a health care person. So really bring a team in together and add to that team those community partners that you learn to have a relationship with and you build that so you can have some true strategic focus. So you can not only be a cheerleader, but you can be also a guide and really make that an intentional goal. So how do you get started on this journey? Really, you have to think about, what are those systems that currently exist in your district. And we've talked a little bit about school forms and events and things like that. So think about what are those current outreach events or current outreach efforts that take place for enrollment in your district, and what are those partnerships that exist already. And then take a look at, what are the systems and the needs that take place and what actions do you need to focus on and implement so that you get to your goals. And I think the most important thing here is to have goals. I'll talk a little bit about how we created some goals for ourselves. And then as a superintendent, as was mentioned, we do tend to be more on the vision. So we do have to focus on what are those things that are important and why is it that it's important for our students to be healthy and have health insurance. So from the perspective of our health care provider friends, I think that's the most important thing you can focus on is giving school districts some real information about what is it, what are the benefits to them to have students enrolled in health insurance. So the next slide please. So what happened for us? So one of the things we did is that, of course, was to increase the number of students who have health insurance. And what we did, you know, the low hanging fruit, what is the simplest thing to do? Well the simplest thing to do is change the form. So you change the form of registration that students fill out when they enter the school district but also the form that they fill out on an annual basis. So we ask them what insurance they have, but then the next question is probably the most important, would they mind having someone contact them to support them in health insurance if they don't have any. And we find that when we ask that question, it is a much better outcome. And then we refer them immediately to one of our health care partners, and then we communicate constantly to make sure we have that good communication as was mentioned. Our logo is on many of the flyers they get, then we ask our partners to include their logo on the things that we do. So school events, health fairs, community events, we're part of all those things together. And they see our staff and they see the health care partner staff working side by side. And it does build that sense of trust and an understanding of what it is that we're trying to achieve together. So let's talk a little bit about the strategies. One of the strategies we had was to train health care partners. So these are parents who have information about health care coverage and who can support and build that knowledge out in the community. So we do use health information to track, our student information system to track health information. So in our system, we have a cell or information about which students have information and which don't. And we even include that conversation during parent conferences. So we try to make sure that parents make the connection between health insurance, good health, good attendance, and student achievement. And so that is a very important track and we know that that is the way to make sure kids learn is to make sure they're in school, and they can't be in school if they're not healthy. So we make that connection very, very obvious to families. Next slide please. So one of the things that we have to do is work with our staff to make sure they understand those connections as well. So we plan an annual plan

about, what are those things that we want to do to build that. And sometimes it's working with families and doing things with them. But sometimes in the last year or so it's been about, how do we increase that information to our own staff so they understand the importance, so they have that good connection with our health care providers. So one of the things we did this last year was to do a Three Hour Tour. So you can see there, our Gilligan Island Survivors who went on our Three Hour Tour to our health care facilities to see what exactly they were referring people to. And in that picture, you see school administrators, community liaisons, school secretaries, a variety of folks who got on the school bus and went from agency to agency to learn about those particular agencies. And there's nothing like a personal touch and visiting someone at their home to understand what it is they do and how important that question is when they come and register students, that we're a vital part of that link. So that was a very important thing to do. And one of the other things we do is you see our staff down below brainstorming and thinking about, well, what are our goals? We want to keep increasing, but where are those areas where we need to build and what are those things that we need to focus on. So, we can go on to the next slide. You can see there that we have some annual plans. So we work with the Children's Defense Fund. Here I need to give a shout out to Lorena Sanchez, she's a wonderful support to us. So I would say build and increase that support from other community agencies who can help you develop these plans. And the idea is to take a look strategically at the areas where you want to focus and how is it that you want to have those strategic ideas. It's not about, not necessarily having lots of events as was mentioned. Sometimes events can be a great way to spread the word and awareness, but really what we find is that it is that relationship building and the one on one connections that really make the difference. And then down below you see another photo of another partner that we have that was with local food banks. So we see this insurance initiative as really an overall focus on student health and student wellness within our district. It's nutrition, physical activity, emotional, social wellness, and of course health. Wellness is an important part of making sure our students are ready to learn. Next slide. Here are some of our community partners. They come out and visit us and we go out and visit them. Here you see also our partners with legislators. Here you see Senator Ed Hernandez who is our local state senator who has come out and done presentations at our schools. Many times local legislators love the opportunity to get out and meet with the community, so I would say that's a great way to build that relationship. As a matter of fact, Roger Hernandez, our Assemblyman, sponsored and passed a bill to make sure that other districts do similar work as we're doing. So now all districts have to include a question on health insurance on the registration forms. I think it's going to really be a wonderful way of making sure that our families are insured. So what have been the results of all these efforts? In our district alone, mind you we have 7,500 students, we've given over 1,200 names of uninsured students to our health care providers, and the number of students who now have health insurance has increased by 10%. That has been a huge number and it makes a huge difference in our community. And perhaps it's not a direct correlation, we can't say, but our attendance has increased by 4% in the last two years. We know that that makes a great, great difference in how well our students are ready to learn. And because of that, the grant not only has been extended for an additional year and extended until the year 2016, we're still part of that grant. I think the benefit of that is really to have that connection and focus. So you don't need to have a grant to do

this work. In fact, we've already made plans to make this sustainable. So we are fully planning to continue the work once the grant is over. But what I would recommend is make sure you have that interdisciplinary team and to set goals for yourself every year and have an annual plan thinking about, where are those areas that we need more support, where are those areas that we can increase on. And then every year, focus on those metrics to show you that that's what is happening. The next slide. So here is a formula for success, and these are really lessons that are from the Children's Defense Fund and from AASA who again I give full credit to for being such tremendous partners with school districts. And what they focus on is making sure that at the beginning, the low hanging fruit is that health insurance status question on those annual forms. It's not a difficult thing to do. And then the next part is, make sure you have a team at your district. And I know, you were mentioning about nurses and different groups. But it's important to get buy in from the very top I would recommend, so that everyone understands what it is that you're trying to do. Make sure that you can get annual data about that information, because it really is by tracking the metrics, and on a monthly basis we track it, that I think keeps the momentum moving forward. You can implement many district wide enrollment events, and you can be part of other enrollment events. And we're part of other back to school events, we were part of an event recently in front of a supermarket to focus on our free food program, we call it Cal Fresh. So we participated in that and we actually enrolled five students, you never know. And then, look at other ways to communicate. One of the things we have is we have a mobile phone app. So we are including information about insurance in our app. And focus on those community partners. What I would say to those of you who are wanting to reach out to school districts, it's important to build relationships, but what I find that I really look for is someone who is consistent and someone who has that follow through. I think follow through is really important. It's more important to promise a little and deliver well than to promise a lot and not deliver so much. So I would really think about making sure if you say you're going to do something to do it and being consistent in follow through, I think that's the most important thing that I would share. And then for school districts. I think you need to share your results and spend time talking about all the good things that we do and then making sure that every year you reassess and you think about what is it that we need to focus on. So that is our story. Next slide. Here is my contact information. You are very welcome to reach out and speak with me and I thank you all and I really appreciate all of the work that you do on behalf of our students and our families. I know that without you, this work would be very difficult. So thank you.

Donna Cohen Ross: Thank you Lillian, that was really a tremendous presentation. Your words of wisdom about the balance between what you promise and what you deliver, I think that belongs on a t-shirt, so I'm going to be looking into that pretty quickly. That was pretty important. And I think your message about metrics was so important too. I think for some of us, it is really hard to know what we should get out of a referral of 1200 names of uninsured children. That is really hard to figure out what that means. But then when you say, over time you've increased the number of students with health insurance by 10%, well that really pops. I think everybody can understand what that means for a school community. So I really thank you for providing the data but also helping us understand what it means. Stick with us Lillian, because again we are going to have questions at the end. I would just mention to everybody, if

you do have questions please type them into that chat box. Riley is sitting next to me collecting all those questions for when we are ready for our question and answer period. So please just keep them coming, and we are going to try to get to as many as possible. But before we do that we do have some additional presentations. The next person I want to introduce is Lauren Hamvas. Lauren is from Legal Services of Eastern Missouri, also one of our Connecting Kids to Coverage grantees, working in the St. Louis School District and I think some other places as well, I'll let her tell you about the breadth of their project. But we asked Lauren to join us today because she is going to talk a little bit about the very important role of school nurses. I just would say that, you know, we are going to have an opportunity later this week to really focus on the work of school nurses. Some of you working in school districts may know that later this week is the National Association of School Nurses' annual meeting in Philadelphia. They are one of our really terrific national partners, and I'm really excited to be going there on Thursday, and I'm going to share a lot of what we're hearing today with them to see if we can just spread the wealth a little bit. But Lauren, welcome. I am going to turn it over to you now.

Lauren Hamvas: Yes, thanks so much for having me. I am going to talk briefly today about our experience working with school nurses and one strategy in particular that we have found attractive to school nurses and throughout the St. Louis area and all of Eastern Missouri that we work in. And that is through the free and reduced school lunch program. We just wanted to tell you a little bit about our experiences approaching schools with this, and this is really like I said an attractive strategy for schools because it is a system that is already in place, it won't take a lot of additional work on their part, and can have a great impact on their district. So first a little bit of background about Legal Services. We are the local legal aid organization. We provide free civil legal assistance to residents of Eastern Missouri. Our Connecting Kids to Coverage program provides families with free enrollment assistance for Medicaid and CHIP as well as the health insurance marketplace. We particularly focus our outreach strategies to local schools through school nurses and McKinney-Vento Homeless Enrollment Coordinators which I'll explain a bit towards the end. School nurses are the obvious personnel choice to help identify uninsured families, so approaching them with the school lunch option even though that may not seem like a direct connection it goes hand in hand. Because they are responsive to the work that you are trying to do and can help you navigate the district or the particular school building that you're working within and can really be that champion to help you get the policy implemented within the district or the school. So very quickly a little bit of background about the school lunch program for those who don't know. It is a federal program that provides free or reduced school lunches to low income families. This is obviously a target population for Medicaid and CHIP enrollment. While this is a federal program, the application process itself is very state specific and can often times be very district specific. So I encourage you before approaching a school nurse or any other school personnel, try to get a copy of the target district's application ahead of time, sometimes they have it available on the school website. Today I'm going to talk about specifically our target approach with one particular public school, the St. Louis Public Schools. This is a very large district within St. Louis, over 70 schools ranging from pre-k through high school. They have a high population of potentially eligible families, and we know this because over 88% of their students do qualify for the free and reduced school lunch program. So how can

the free and reduced lunch program be helpful to you? The National School Lunch Program application gives states the option to include a question about health insurance and report that information to the state Medicaid office. I'm not sure how it is across all states, but Missouri has decided to exercise this option. So every applicant for free and reduced school lunches in Missouri has an additional form that they have to complete stating whether or not their children have health insurance. If the family indicates that they don't have health insurance, the school is supposed to give them information about MO HealthNet, Missouri's Medicaid program. We then worked with St. Louis Public Schools through the district wide nurse coordinator to include an additional form with the application which would be a referral form for those families that stated that they don't have insurance but would give the school permission to disclose contact information to us. So again, this is a very state specific thing, please check with your Department of Education to see if your state has a similar requirement. On your screen now you can see the couple of forms that I'm referring to. The form on the left is the required form in Missouri that before we came in touch with the district all schools are required to have with their application. It's a simple form that families specifically say Yes or No whether or not their children have health insurance. We then worked with the St. Louis Public School District to include the form on the right, which is a simple referral form for families to give permission for their information to be sent to us. The schools collect these forms, return them to the administration, and then the administration would only return to us those forms of families that marked that they did not have health insurance and that they would like us to contact them. So we have a great referral system in place now, but it was not an easy process and it was not a quick process. So I wanted to talk a little bit about how we got where we are now. Schools have a lot of organizations contacting them as Lillian just mentioned, and all of these organizations want to gain access to their students and their parents. And schools are for very good reason protective of their students' information. So it really took us some time to build trust and show our commitment within the school district. With such a large district we did start at the administration level. We contacted the district school nurse coordinator and we met with her simply to explain our program. The school year had already started at that time and they had actually already collected all of the lunch applications. So we didn't expect the district to just hand over the students' information without these permissions. But the school nurse was committed to what we wanted to do, what we were doing, and we obviously wanted to get in touch with all of these families to make sure that they could use our services. So we decided to do a mass mailing. This was something that we worked with the school district, that they were comfortable with and was within our resources to be able to do. So what we did is we stuffed and stamped over 300 envelopes and gave them to the school district. So we paid for the mailing and we simply delivered it to the school district and allowed them to address the envelopes and mail it to the students. So we never saw the students' contact information and we only knew about the students if they contacted us. Within the mailing we included our flyer and also a letter from the Assistant Superintendent of the district explaining why the families were receiving this mailing. So it was just a little bit of extra work on the district's part. Legal Services did a lot of the legwork and we got in touch with a lot of families. So this alone took several months and meetings to get approval from all the necessary parties before the mailing was sent. Flyers needed to be reviewed by everyone, the

letter from the superintendent needed to be reviewed by several different parties just to make sure that everything was okay. So that was Year 1. We also spent Year 1 getting more involved with the district. So we really wanted to show our commitment to the work that we're doing and our commitment to the district. So we spent a year not just waiting for the families to call us, but actually getting introduced to other school personnel through the lead nurse and also providing presentations to parent groups, setting up enrollment events, and whatever way we could show our commitment to the district. Whenever they asked us to attend a program we were there. Whenever they had general questions about health insurance we were able to answer those questions. And again, the school champion was really our champion within the district. The school nurse was our champion within the district. She understood what we were trying to do, helped us navigate the district to make sure that what we wanted was accomplished. Had we initially approached a different school personnel member with this, we may not have received the same response. So we were very lucky that she was very responsive to what we wanted to do and could help us navigate that. So the following summer, we continued to prepare the referral form with the district to include it in the school lunch packet. Again, this process had to go through many necessary channels, but it has been successful thus far and we plan to continue it into the next school year. So I really recommend that even though we're in June, this is now the time to approach schools with this if you're interested in taking this approach because they are preparing for the next school year and it will take some time if it is something you're interested in. So our results, how we've been doing. In the first year, you know I said we sent out about 300 letters. We got a less than 10% response rate, so it wasn't very high. However, like I mentioned that was really a trust building year within the district. We did presentations throughout the district and we met with lots of families and other school personnel throughout the year to really again show our commitment. During Year 2, which was the year that we implemented the referral form, as you can see we had about 38 contacts with families. We noticed that only about a third of the schools returned the referral form. So we learned that education is further needed for the individual buildings to know what this form is. They hadn't seen it before and maybe didn't know what to do with it. We've learned that this year we need to get more information out to them so they know the importance of getting that form returned so families can get in touch with us. Lessons learned throughout this whole process. Even though this is just one strategy that we used with one school, we have learned many things that we take in many of our strategies with many of the school districts. So first and foremost, schools are very protective of their students' information and we need to respect that. They have a lot of laws that they have to comply with, and we worked with them to find strategies that would make them comfortable so that they were upholding their obligation towards their students and the information was getting out in an effective way. Also, large districts have a lot of bureaucracy. This is probably not a surprise to anyone. And every district is different. So be patient. Have someone that is willing to help you navigate those channels, make those connections that you need to. And again, just be patient with the process and work through it as possible. It may not be effective to go right to the superintendent of the district, but if you can find someone within the district responsive to your cause and can help you work to who you need to get approved from, then that is going to be the most beneficial. Again, be flexible, be agreeable. This is from all of the different lessons learned,

that every district is different and has their own policies. The same thing isn't going to work with every district, so talk with the personnel that you're communicating with, see what works best, what they've learned in the past from other programs that they've implemented and be able to move your strategy in a way that is comfortable and convenient for them. Finally, I just wanted to give a quick note on the Homeless Enrollment Coordinators if folks aren't familiar with that. The McKinney-Vento Act is a law that gives homeless students the right to stay enrolled in the school where they were attending when they first became homeless. As a result of that, districts are required to appoint a Homeless Enrollment Coordinator that facilitates services for these families, typically in transportation from their current accommodations to school. So depending on the district's needs, this is either one person who their sole job is to coordinate services for homeless students. Or if the district has less need, then it may just be one responsibility tacked onto someone else's greater job description such as a school counselor or school social worker. We have found working with the Homeless Enrollment Coordinators that direct referrals really work best. When families are brought to their attention and they are assessing their needs, if they find that they need health care they immediately get them in touch with us. So I encourage you to reach out to the Homeless Enrollment Coordinators. If you look in the chat box, Riley has posted a link to a national website that will give you the local, that will give you access to the local enrollment coordinators in your area both on the state level and then also on the district wide level as well. So I recommend reaching out to those homeless enrollment coordinators, it is another population that definitely needs assistance getting enrolled in Medicaid and they'll definitely be responsive to your program. So that is it for me, I'm happy to answer any questions. Please feel free to get in touch if you have any other questions.

Donna Cohen Ross: Thanks so much Lauren. We will have some questions in just a little bit. But before we get to those questions, we have our final speaker who is Teri Johnson. She is the Community Outreach Director for the Health Services of North Texas. Teri, we're really excited to have you this afternoon. I think you're going to change tacks a little bit and talk about some back to school efforts that your organization has been involved in. And again, that will bring us back to a conversation about now and later in terms of working with schools. So Teri, I'm going to turn it over to you.

Teri Johnson: Sure, thank you so much Donna. Today I'm going to talk a little bit about how Health Services of North Texas creates awareness of our enrollment services through events and partnerships. And you'll see here on our first slide I have a picture of our rack card. And one of the things that we've done to increase awareness of our enrollment services is to actually state it. If you look there at the bottom of the rack card, it has the health insurance marketplace logo and Medicaid and CHIP enrollment. We keep those with us all the time and hand them out and just make sure that people know we're here for them and let them know that there is help available to them. Our vision is a healthy community. We are a fairly young federally qualified health center in Denton, Texas, and we provide medical care for that entire family, from that newborn all the way to the grandparents. Some of the key strategies that we use for increasing awareness through an event are to involve your community partners. Look for those partners that will add value to your event and help you increase your reach. We have found that by adding partners that adds

credibility, and we are creating increased levels of trust. So look for those opportunities to bring in partnerships. So these partnerships could be with retailers. They could be with other nonprofits in your community. They could be with your library. And of course your schools. Another thing we've found to be very helpful is we create events that meet a need or a perceived need. Our community is typically not responsive to your traditional health fair. So we work to create events that really capture the attention of our community and provide that wanted or needed service and really draw them into the event. One of the things that we do with our events, and one of the reasons we do events throughout the year, is we want to keep HSNT and the services that we provide top of mind so that our community remembers. And when the need arises, they remember, oh right, Health Services of North Texas provides those enrollment services. I can go there and get help. One of the events that we did last year, and we're repeating this year, is our Good Start Back to School Giveaway. So picture this. A large shopping center with a Kohl's and a Walmart and a Sam's and a Panera. All of these stores in one area, and we are set up smack dab in the middle of them in the parking lot. And this is a place where families go to shop for their back to school supplies, for their clothes. We plan the event strategically on the, Texas has a sales tax free day, and we plan it on that day, not only to help those merchants, bring more traffic to the merchants, but also so that we have increased foot traffic at our event. So you ask, how do you get them to come, why do people want to come to the parking lot when it is 100 degrees outside? Well, we offer something that they need. We offer free school supplies, free and reduced price haircuts, and this is our chance to get in front of parents and talk to them about those back to school immunizations and making sure that kids are ready to start school on that first day, that all their immunizations are in order. And of course talk to them about enrollment. Does your family have health insurance? Are your kids covered? And so now that we have their attention and we've gotten them to the event, because we've offered them something of value, and we find that we can talk to them about the importance of enrolling their kids in Medicaid and CHIP and the parents in the Marketplace. One of the ways that we, when we're creating an event we look for how can we involve community partners to strengthen our event and increase awareness. And when you bring in those community partners, you'll find that there is value not only for your event and for your health center, but for that partner as well. And we have found that in each of our events where we used community partnerships there are new opportunities that arise every time out of the event. So you can see here, the two pictures on the slide are our passport. The first one is our Back to School Passport, and the second one is a passport for a skating event that we did. And so what we do is we set these passports up so that our guests who are attending can visit each one of these community partners. And at the Back to School event, each of these community partners had an offering, they had a free school supply, a coupon, a sample, something to offer families to help them prepare for going back to school. And then on the back of that passport was our opportunity to collect that gathered information. So we asked for contact information and got permission to reach out to them. Their motivation for completing this passport and turning it in with their information on it was the door prizes. So we offered value through the door prizes. So here are a couple pictures from the event. You can see here the two ladies with the kids in the stroller, the Start Here. And then we had here behind this one lady's husband Medicaid and CHIP enrollment and health insurance marketplace enrollment. So

our guests, they went through this line, and each of the health screenings and the questions that we asked. So they had the opportunity to talk to us about all the things necessary to have a really good start for back to school, with of course one of the focuses being enrollment in Medicaid and CHIP and the health insurance marketplace. We had a really good, strong turnout, there were more than 200 families that attended. And we had 5 families enroll onsite. And this event, we did see that it increased interest in the health insurance marketplace, generating an increase of about 10% before open enrollment started in November. This event served as a way to strengthen our message in the community and get the word out about the services that HSNT provides. So just to kind of wrap it up, a little summary. We have found that having the same message multiple times in various ways helps to keep HSNT's services top of mind. So while someone may have a job and have coverage today, something might change two months from now and their circumstances are different and they may now need help. And they'll remember, that's right, Health Services of North Texas has an enrollment assister on staff that can help me. Create those strong community partnerships when you are doing an event. I would not encourage you to do an event solo. Make sure that you have value and an offering outside of just the enrollment services. And don't be afraid to take your event out into the community. Go where the people are and where it is convenient for them. Then our O&E team uses the information collected on those passports to follow up. I know we're still early in summer, so there are lots of summer opportunities. Setting up at those school registrations, go ahead and start planning for that now. The previous speakers, I was so thankful for their many ideas on how to really get in the door of the schools. And then we have found the summer meals program for children to be a great opportunity for us to reach out to families who need enrollment services. Then outreach to summer childcare facilities and camps. And you know, like I said, go out into the community where the people are. Another way to do that is through your July 4th activities.

Donna Cohen Ross: Thank you so much for that great presentation. I think you really honed in on some of the key things that make events worthwhile to do. I think an earlier speaker had talked about events not translating into enrollment, and I think we all know that's true, but some of the things you talked about helped make that connection with getting kids enrolled through events. Doing that marketing, making sure we have the follow up. And I think that is a really key piece. So I thank you for that. We are going to turn now to some questions and answers, and we know that so many of you who have questions have been extremely patient. So we are really grateful for that. I'm going to start off by going back to our first two speakers from Indiana. Doris and Barbara, you mentioned your 100% Campaign early on in your remarks. And while that may be a familiar tagline to some of us, others on the phone wanted a little bit more information about what the 100% Campaign is about. What is the goal of the campaign? Can you say a few more words about that?

Barbara Pitcher: Well, very simply, it is to get 100% of the Hoosier children enrolled in health care coverage. So it's really just as simple as that, that every single child who is eligible needs to be covered.

Doris Higgins: This is Doris. We have found that when talking to other people, when you want to get them excited about your work, providing that sort of rallying cry, that very clear goal, makes it easier to get them on board. So it is just another marketing strategy to get them engaged, give them something to kind of focus on instead of saying, just help us get your kids enrolled. Well, we want 100% of your kids enrolled so they are healthy, they are in their seats ready to learn each and every day.

Donna Cohen Ross: Great, thank you so much. You know, there is a follow up question to that, which I think is really important, and some other speakers may want to respond to this as well, and Lillian I'm thinking about California. But you mentioned a moment ago, the 100% is really focused on 100% of the children who are eligible for Medicaid and CHIP. And that's so important, making sure that all of those children have an opportunity to enroll. But we all know that there are children who need health insurance who may not be eligible for a variety of reasons, but one that comes up often may have to do with lawful presence or immigration status. I want to throw it out to all of our speakers, Teri, Lillian, all of them, when we have families with children who might not be eligible for coverage, what's the best approach in making sure that those children, those families know where they can get help for their children as well? What are some strategies that you've used? I throw that question out to anyone.

Lillian Maldonado French: This is Lillian. I can share that one of the things that we do is to find out programs and know in advance which programs have what requirements. So there are some programs here available in Los Angeles County for children who are undocumented and don't require legal status. I think it is very important to have that information. But another key feature or an important thing to think about is trust and making sure that people feel safe in sharing that information with you, because many times they aren't sure what they qualify for but don't feel comfortable sharing that with you. And here in California, the governor just signed legislation that will provide even more health insurance coverage to more students, and we're very, very excited about that as well.

Donna Cohen Ross: Right. We've all heard about that Lillian. We know that California is unique in that respect, but congratulations on that new opportunity. Teri, I'm just wondering if you had something you might want to share about community health centers being a place where individuals can come if they need health coverage or health care when they might not be eligible.

Teri Johnson: Yes, definitely. And the role of a federally qualified health center is to bridge that gap. So we do provide care regardless of ability to pay. We offer that sliding fee scale. And when what we have at our health center isn't enough, if a child needs a specialist, we are able to tap into our resources and connect that family to the specialist and make sure that they are getting the care they need and not going without.

Donna Cohen Ross: Great, thank you so much. Again, the focus for the outreach and enrollment work, focusing on those children who are eligible but not enrolled is our prime activity, but again to remember that there are other opportunities that we need to be aware of in the community. So I thank our speakers for responding to that question. Lillian, I'm going to come back to you with

a question that I'd like you to start off with. I think there may be some other folks who might want to weigh in on this one. But one of our questions has to do with confidentiality. And we know that this is something really important, I think others have mentioned how important it is to keep personal information confidential. So the question for you is, how does the school district handle that balance between collecting insurance information on registration forms and then distributing information to households who indicated, to parents who indicated that they didn't have insurance. Could you talk a little bit about how and when you get families' permission to share their information? Because I think that's the key piece in making sure that confidentiality is respected. Can you talk about where those very important points are in the process?

Lillian Maldonado French: Sure. It is very, very important. The challenging part is there are different types of confidentiality requirements depending on the agency, and so as a school district we have different requirements than maybe the local county health department may have under HIPPA laws. And so we have to learn a little bit about what those requirements are as well. But one of the things we do is we don't ask personal information, but the only thing we're asking is for us to share their contact information. So already on the form is, we have a form that when the family turns in the registration form we have an additional form that will say, here is the name of our current health partner in the community, do we have permission to forward your phone number and contact information? Then we let the health partner do their job. So we don't really get into the reasons why they may or may not have health insurance or what their personal requirements may be. But that is one way of kind of keeping a wall there between that information. And we think that it's important for school districts to do that because we have that connection with families. And so that's how we go about it.

Donna Cohen Ross: I think that helps a lot, and I'm going to just ask Lauren if she's still with us on the line. I think one of the things you mentioned Lauren when you talked about the school district sending out letters to families that you only found out who those families were after they gave permission to the school district or the school to share that information with you so that you could help them. Did I get that sequence of events right?

Lauren Hamvas: Right. Well, in our first year when the parents hadn't had the opportunity to give permission for the school to share their information with us, we delivered blank envelopes, blank stuffed stamped envelopes to the school district, and the school district addressed them. So we never saw the students' names, addresses or phone numbers in that first year. The parents had to contact us after receiving the flyer, and then we would obviously get their contact information then. And then in the second year, the families had the opportunity to give permission for the schools to share their information with us. We only received their address and phone number, so we didn't know anything about their immigration status or income level until we got in touch with them. So that was something that worked for the school, worked for us, and ultimately worked for the parents too.

Donna Cohen Ross: Great, thank you so much. We got a question early on that I think I'm going to put out there to our friends from Indiana, but of course anyone else is welcome to respond as well, and maybe this might be one for you Lillian as well. You know, early on in Connecting

Kids to Coverage we had a focus on working with school and community sports programs. We tried making good connections with school coaches because we know that they are well respected in the school community. We published a strategy guide that still lives on InsureKidsNow.gov. But one of our participants today is asking the question, is it a good idea to get out there at football games or other types of extracurricular activities where there may be parents and students attending. What experience have you had in Indiana with conducting outreach during those kinds of school or after school activities?

Barbara Pitcher: That's a great question. We've done a lot of experimentation around that. We actually have had several of our partners put up banners at football games and basketball games with the contact information. They have also set up booths. One of the things that we've found in setting up booths is it is really much more for awareness, and not many people are willing to stop by. There is a certain level of stigma involved with being eligible for this coverage, and so that's not a venue where people are willing to out themselves if you want to say. So really, they've found that they've shifted their strategy a little bit more. Certainly they do outreach to coaches, not just during the school year but summer youth leagues, things like that, because that really is a good connection point. But really using it much more as a marketing tool, not as much for enrollment.

Doris Higgins: This is Doris. Building on what Barbara just said, I think it really depends too what kind of organization you are. If you are a health center and you set up a booth at one of these events and you are promoting general health, things like that, it's easier. The partner who had the experience with people feeling like there was stigma attached was the Community Action Agency, where low income people can get assistance with heating bills and so forth. So they were kind of known for those types of assistance, so there was more stigma towards stopping by. We have another partner who did pay a relatively small amount to be included in all the programs for a lot of athletic events throughout the year, and we frankly haven't had a chance to evaluate yet what the effect of that is. So it is one of those things again, experiment, find out what works in your school. But it's more like Barbara was saying, general marketing versus perhaps direct enrollment.

Donna Cohen Ross: Thank you. I think we should remember, and I think a number of you mentioned this earlier, that when families, parents, students are at the school for a sporting event or the school play, that's what they're there for. They're not there to enroll in insurance. So it is a good opportunity to make information available, but I think we all have to moderate our expectations about what will actually happen in terms of enrollment. But it sounds like circling back with coaches and other school staff is still an idea that has some merit. So thank you for that. I have one more question because we still want to do a walkthrough of our material, and I know this is going to be hard but I'm going to ask each of our speakers to give a very short answer. One of our questions has to do with what you think is the most effective way to communicate with parents, and some of the opportunities that the questioner put out there. What is the most effective? Is it phone calls, is it newsletters, personal letters, social media. I want to go through each of our speakers and just give me that one word answer if it's at all possible, and I'm saying that knowing I could never do that. But what do you think is the most effective way to

communicate with parents? I'm going to start at the end and ask Teri. Of those choices or any other choice that you think is most effective, what would you say?

Teri Johnson: We find the most effective way is that face to face conversation.

Donna Cohen Ross: Great, thank you. That wasn't even one of the choices but thank you for sharing that. Lauren, what would you say?

Lauren Hamvas: Yes, I'm going to sort of piggy back on that and say the relationship with the school personnel when they learned about us from a trusted source within the school, that's when we get the best communication with the parents and when they are most responsive to us.

Donna Cohen Ross: Great, thank you. Lillian, what do you think?

Lillian Maldonado French: I'm going to share a strategy that we've been working on with the Children's Defense Fund, and that's telling a story. I think whether communicating with a school district or families or other, when you can bring it down to one person and tell a story and share how beneficial this work is, I think you are really communicating effectively.

Donna Cohen Ross: Thank you. Back to Indiana, Barbara, Doris. What's the best way that you have found to communicate with parents?

Doris Higgins: Do we get two answers? Barbara, you can go first.

Donna Cohen Ross: Well I don't know, go ahead.

Barbara Pitcher: Basically, all of the above, and we've said it several times, you really have to experiment and find out what works in your community.

Doris Higgins: And the only thing, this is Doris, that I'll add on to that, is it's not always a who but a when. We've talked about connecting with parents when they need the coverage. So when that child is hurt, when they go to the school nurse, when they show up at the clinic, when they actually need the coverage. That's a good time to say, okay, get signed up now.

Donna Cohen Ross: Great, thank you so much for adding that piece at the end. I think we have found through Connecting Kids to Coverage that a very fruitful time to talk to families about health insurance is when they are seeking health care for their children. And it doesn't even have to be when their children are sick, it might be when they are thinking about vaccinations, when they are thinking about needing a physical in order for the child to participate in a particular activity. So thank you for sharing that as well. And I'm going to give a big thank you at the end for all of our participants, but just know that this has been just a very productive and fascinating conversation. Do stick with us, I'm turning it over to Riley right now who is going to walk through the resources that we have available and a couple of other points of interest as well. So thank you Riley.

Riley Greene: Thank you. As Donna said, I'm just going to take a quick spin through our Connecting Kids to Coverage resources. These are materials and resources that we have developed that live on InsureKidsNow.gov that are for you and for your work. So we really encourage you to check out what's available and download these materials. So first up, we have customizable print materials. You can get these designed free of charge and add in your specific Medicaid and CHIP program names, your state's federal poverty level and income eligibility, your website and phone number, and up to two logos. We have as we can see on the right hand side a back to school themed piece, and these are great materials to use in those events that we discussed that are better for outreach and not necessarily for enrollment. So if you are at a school football game and there is a giveaway, you might want to include something that has your organization's information on it, that kind of thing. All of these are available in English and Spanish, and a select number are available in other languages. So we also have a number of turnkey resources that are ready to go for your use. We have TV and radio public service announcements, those are 60 seconds in English and Spanish. We encourage people to get creative with how they use PSAs. We've had folks use a short version of the PSA on the school based pre-recorded message system. Of course, we encourage providers like Teri Johnson's Health Service Center to put it on their closed circuit TV. School staff can play them in their offices, and so on and so forth. Along with that, we have live read radio scripts that include the messaging on the benefits covered, the eligibility and where people can go to enroll. We have template print articles, so if you have a community newspaper, school blog, anything else in your community that may be looking for content, we have a template article ready to go to drop in that covers the importance of having coverage and what is covered by Medicaid and CHIP. You can see some examples of our web banners and buttons, with the little girl with glasses on the bottom. We encourage those to go on any relevant website in your Covering Kids coalition. And finally, we have social media posts and graphics as well, you can see an example of our little superhero here. So all webinars including this one will be available online. There is a recording and a copy of the PowerPoint. We encourage you to check out our webinar library there. And then we also have an outreach video library that features organizations like yours from across the country who are doing innovative and effective work within different areas. You can learn a little bit more about your peers and what they are doing on the ground in our outreach video library. And then finally, we just want you to keep in touch. We are here for you to help support your outreach and enrollment efforts as best we can. You can see InsureKidsNow@fleishman.com is the email, and 1-855-313-KIDS is our phone number. If you're not already signed up, do sign up for our newsletter. We announce new campaign materials, webinars, highlight different effective outreach strategies, a lot of great content coming through that newsletter. And finally, follow up on Twitter, that way you can get up to date on any campaign resources as they come out. And finally, I'm going to turn us back over to Donna to talk about campaign all stars.

Donna Cohen Ross: Great, thanks so much Riley. So I hope everybody is still listening because this means you. We are planning for our last webinar, we actually have another webinar coming soon. But the last webinar of the season, we really want to take the time to recognize and honor the great work that so many of you have been doing all year, more than a year, in your communities. And we are looking for some campaign all stars. We want to know about an

outstanding organization in your community. Maybe it's you, maybe it's one of your partner organizations. It could be a grantee, it could be not a grantee. We want to know what great things are happening out there to help enroll eligible children and teens in Medicaid and CHIP. We want to feature some of those all stars on our August webinar. We want to take the time to really focus attention on the good work that they're doing. There's a special place that we're designing on InsureKidsNow.gov to also feature some of the campaign all stars. If you or someone you know or someone you'd like to tell us about is a campaign all star, you can see we'd like to know about that by Friday July 10th. Please share the name of the group or individual, their contact information, a brief description of what makes them an all star. Send that to our email address, InsureKidsNow@fleishman.com, again by Friday July 10th. We want to take the opportunity to get back to some of those all stars and learn a little bit more about what they're doing, and again take that opportunity to recognize them before we wrap up the campaign for the year. So we really hope that you will participate because we know there is so much going on out there. For everything we know about, we know there is lots more happening that maybe doesn't come our way. So this is your opportunity. I want to just take the last couple of seconds to join these kids on the screen right now. I don't think I can say thank you quite as enthusiastically as they, but I'll try. Thank you all for participating this afternoon, and a special thank you to all of our presenters, to Doris Higgins and Barbara Pitcher from Indiana, Lillian Maldonado French from California, Lauren Hamvas from Missouri, and Teri Johnson from Texas. Again, we really appreciate all of your work, and thank you all for participating, for calling in today. We had a record crowd I think and I just want to reiterate what I know Riley has said earlier and has said to some of you individually, the slides will be available in just a couple of weeks on the Insure Kids Now website. If you're not signed up for our eNewsletter, do it right away because that is how you find out about all the good stuff that's happening. Thanks everyone and enjoy the rest of your day.