

**Wisconsin Covering Kids Initiative
Semiannual Status Report**

**Project Year Three
First Half-Year**

State: Wisconsin		Year: Three	Quarter: 1 & 2	Project Component: Statewide Project
Activity	Responsible Party	Completion Date	Status	
Goal	Work towards solutions to eligibility and enrollment problems faced by families applying for Medicaid/BadgerCare throughout Wisconsin in collaboration with State officials, county workers, eligible families, providers of health care, community workers, and other stakeholders.			
Objective	Coordinate activity of the Statewide Coalition as representatives work collaboratively to address systemic problems.	Education Director		
Activities	<p>—Hold three coalition meetings per year, each focusing on one of the following three areas:</p> <ul style="list-style-type: none"> (1) strategic planning & progress assessment (2) simplification & coordination (3) outreach, networking, and education <p>—Sustain and expand activities of the five coalition committees (Leadership, Education, Outreach, Simplification, Evaluation).</p>		<p>November 2001 March 2002 June 2002</p> <p>Ongoing</p>	<p>A coalition meeting was held in Milwaukee on November 15 that focused on the future of outstationing of economic support workers. The day started with a public forum that brought attention to the threat this important outreach and enrollment tool is under due to loss of funding. Committee meetings followed where the discussion centered on strategies to reach laid-off workers, to engage labor and the business community in coalition activities, and strengthen networks with county economic support, policymakers, and community based organizations. Planning has also begun for a coalition meeting scheduled as a pre-meeting to the <i>“Communities Connecting for Coverage”</i> (CCC) three-day training and networking conference on March 5-7, 2002</p> <p>Several conversations were held by the leadership committee subsequent to the NPO site visit to assess the committee’s capacity to affect policy change in its current configuration. As a result of these conversations, a decision was made to recruit new members from several sectors—including the legislature, labor, state agencies, and leading advocacy groups—and shift focus from project management to developing policy strategies. Other committees remain the same, but our plan is to</p>

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<p>—Develop policy agenda based on coalition discussion for Leadership Committee to promote through media strategies, educational forums, and informational meetings with state policymakers.</p> <p>—Provide issues-oriented educational content at each coalition meeting to enhance coalition members' understanding and ability to prioritize issues for the coalition's policy agenda.</p>		<p>Ongoing</p> <p>November 2001 March 2002 June 2002</p>	<p>focus the March coalition meeting on assessing the effectiveness of all the committees. We anticipate making changes in meeting structures and committee practices that will promote more sustained dialogue between meetings and more concrete tasks for committee members. These changes are consistent with our plans under the Covering Kids and Families proposal. Last year, the leadership committee developed the Five Point Plan for Health Care Access, unveiled at a legislative forum on March 21, 2001. The articulation of this policy agenda has helped to focus our efforts this year, guiding our newsletter topics, workshop and forum agendas, media advisories, kits development, and also prompting a special meeting on November 14 with state child support agency staff on the issue of lying-in cost recovery. At the March 5-7 CCC event, we will update participants on the Five Point Plan. One of the tasks of the expanded leadership committee being formed in the second part of this year is revising the Five Point Plan. The November 15 coalition meeting brought together representatives from four urban and rural county economic support offices, a state Division of Health Care Financing representative, and a community organization that has been instrumental in setting up new outstation sites. Their presentations illuminated the beneficial impact of outstationing on applicants, community agency hosts, and county staff; the difficulties of sustaining it with high turnover rates and limited funding; and some creative ways counties are finding to hold on to this valuable service. The content of the forum was shared with a wider audience through articles in the December issue of the <i>Kids Coverage Monitor</i>. The upcoming March 5 coalition meeting will coincide with the CCC conference, a statewide event focused on building collaboration among stakeholders in health care access issues and using this network to drive simplification and process improvement efforts forward.</p>

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<p>—Expand coalition representation as needed to support outreach, education, simplification, and policy agenda goals.</p>		Ongoing	<p>The three day event will include educational tracks for different professional sectors (public health, economic support, health care providers, Head Start and education agencies), as well as network-building sessions bringing people together across sectors to focus on issues relevant to specific regions and populations. The event also incorporates a keynote by Ron Pollack of Families USA and a town-hall meeting on health care coverage with a panel comprised of legislators, business and labor leaders, and a policy expert.</p> <p>A major effort to expand the network linked to Covering Kids was undertaken this fall through a survey designed to identify potential members, their services, their needs, and the issues that interest them. While we do not expect our 415 respondents to become regular participants in Statewide Coalition meetings, our goal is to enrich local coalition-building and facilitate communication between those local groups and the Statewide Coalition. This activity is already bearing fruit in increased positive communication and collaboration between Covering Kids, community-based agencies, and county economic support offices. We are using the information collected through the survey as the basis for a networking resource directory designed to connect people together on issues of mutual interest.</p> <p>A more targeted recruitment effort will be made this winter as we work to expand the coalition’s leadership committee. A particular emphasis will be placed on recruiting legislators, labor and business leaders to help us respond to the state budget crisis and economic downturn that has resulted in so many layoffs.</p>
<p>—Maintain ongoing communication with state Medicaid/CHIP agency officials to monitor the state’s progress in implementing enrollment process simplification measures.</p>	Project Director	Ongoing	<p>In progress through regular communications with state representatives and participation in several monitoring committees at both pilot and statewide levels. Project staff meet at least twice monthly with state agency representatives on Covering Kids issues.</p>

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<p>—Provide educational sessions in conjunction with Statewide Coalition meetings to promote statewide networking and expansion of the coalition.</p> <p>—Coordinate with other organizations that provide training on health care coverage and access to effectively and efficiently address training needs.</p> <p>—Encourage community-based agencies to provide enrollment counseling services to families by giving them supportive information, training, and technical consultation services.</p>		<p>November 2001 March 2002 June 2002</p> <p>Ongoing</p> <p>Ongoing</p>	<p>Addressed above under Goal 1,</p> <p>Automated Health Systems is under state contract to provide basic Medicaid/BadgerCare training. We have made a concerted effort to coordinate our schedules and training emphasis in the past, with varying success. To improve this coordination, we asked the state to include project staff in their training committee comprised of state training staff and their contracted trainers, including AHS and EDS. We were invited and attended a meeting in January, so this bodes well for future coordination. The BadgerCare Express workshops advanced this effort significantly through the relationships we built with cosponsors, the practical orientation of the workshops, and the guidance materials we delivered in our kits. All participants received a network survey to encourage them to stay connected to our coalition network, and many signed up to receive our updates and newsletters. Many have continued to call our client services staff for technical assistance or to refer clients with complex cases.</p> <p>In conjunction with the BCE, advanced training was provided for groups in Wausau and Fond du Lac that requested the training as a follow-up to the pilot projects' "Resource & Referral" training.</p> <p>Presentations were also made this year to several groups about the potential of health benefits counseling services, including clinic and hospital management associations, community wraparound service providers, and a consortium of rural hospitals.</p>	
Objective	Provide informational materials for families and professionals to support Covering Kids project goals and promote project activities.	Education Director		

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<p>Activities</p> <ul style="list-style-type: none"> —Produce and distribute weekly newsletter (in print, email & web versions) providing brief updates and alerts concerning Medicaid/BadgerCare program rules and procedures changes, instructive client case examples, outreach ideas, training opportunities, and relevant legislative news and policy reports. —Produce and distribute semi-annual newsletter providing information on Covering Kids Wisconsin project activities with more in-depth articles on issues of concern to Covering Kids coalition members —Provide web-based content for both consumers and professionals on health care coverage options and problem-resolution strategies. —Produce family-oriented materials for direct use by families, and for use by community agencies helping families apply for health coverage. 		<p>Ongoing, weekly</p> <p>Ongoing, every other month</p> <p>Ongoing</p> <p>Ongoing</p>	<p>The BCE gave a big boost to the “weekly update” email newsletter, as circulation rose from 380 to over 570 subscribers between October and January 2002. Highlights of the improvements added during this time are a regular case example illustrating enrollment problems faced by families and how to resolve them, and charts reporting employers who are laying off workers. The manager of the public health listserv was so appreciative of this layoff information, she forwarded the update to everyone on her listserv.</p> <p>The schedule for the <i>Kids Coverage Monitor</i> fell behind by a month, due to the demands of producing the BCE, but its circulation also grew rapidly, from 1265 in July to 1750 in December. The issue distributed during this report period focused on outstationing, school-based outreach, and the new simplified application form.</p> <p>The website is fully redesigned to provide easier navigation for consumers and advocates. Both the kits distributed during the BCE are available on the web, and some kit elements are enhanced by being easily filtered and searched. We will be working to incorporate more content elements into a resource database that will serve both the web and print documents. We have used email regularly to stay in touch with coalition and training participants, but are reconsidering the discussion group since respondents to our network survey have not indicated strong interest in this feature. Website traffic remains high, but still do not have access to usage statistics.</p> <p>Several new information pieces for both families and advocates were completed this half-year. Based on our experience with pilot-testing the new simplified application form in Dane County, we recognized an urgent need for tools to help community agencies that work with applicants using the new form. We constructed a family-oriented kit—called <i>3 Steps to Family Health Coverage</i>— that provides essential information in the</p>

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<p>—Produce professional-oriented materials to equip community agencies for assisting families to apply for coverage and counseling them when problems arise.</p>		Ongoing	<p>simplest language possible. This long and challenging project benefited from the input of coalition members, state Medicaid agency staff, the enrollment contractor, community agencies, and families with whom we piloted the kits.</p> <p>The advocate-oriented kit—entitled the <i>AdvoKit for Health Care Access</i>—accompanies the <i>3 Steps</i> kit and provides step-by-step guidance for advocates on completing the new simplified Medicaid/ BadgerCare application form, along with fact sheets on Medicaid eligibility categories and procedures and contact lists for health coverage programs. We worked closely with state Medicaid officials and our project partners to craft the contents of the kit. Both kits were distributed through the BCE workshops where they were received enthusiastically. We have found the kit materials to be very useful with our own clients. The kits are on the website, and a Spanish language version was recently completed and uploaded to the website as well.</p> <p>We are also preparing new factsheets for the kits to respond to emerging issues. The first of these will address newly laid-off workers and the dilemma of choosing between accepting costly COBRA health insurance coverage or enrolling in BadgerCare.</p>	
0Goal	Maintain effectiveness and timeliness of project interventions, and evaluate implementation and impact of project.			
Objective	Manage staff and workloads to maintain progress on workplan activities, and ensure collection of information necessary for evaluation of project implementation and impact.	Education Director		
Activities	<p>—Maintain communications among project staff and partners through regular meetings.</p> <p>—Assure continued staffing for project</p> <p>—Maintain and improve data collection systems to support project implementation and evaluation.</p>		Ongoing Ongoing Ongoing	<p>Regular monthly meeting schedule is being maintained, with periodic ad hoc meetings for events or products planning.</p> <p>Staffing for the project is stable.</p> <p>Refinements in coding and reporting are continually being added to the mailing list and client databases to facilitate analysis of project activities. A relevant example</p>

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<ul style="list-style-type: none"> —Regularly review the workplan to assess progress and consider revisions to address emerging issues and reflect new understanding of how to effectively meet project goals. —Maintain log to track issues raised by participants in the project (staff, coalition members, workshop participants) and record actions taken to monitor progress in addressing systemic issues. 		Ongoing	for this reporting period is the application of new codes to better understand what occupational and professional sectors we are reaching through our newsletters and events.	
		Ongoing	A follow-up survey was fielded in late June for participants in the Spring 2000 and Fall 2001 training series. Analysis was completed this quarter but the report is still in preparation. Follow-up is also planned for participants in the fall BadgerCare Express training.	
			In progress. Staff members identify and discuss enrollment barriers and systemic issues during weekly case meetings. Issues also identified and collected during project meetings, at trainings and forums.	
Objective	Develop and implement evaluation plan, and analyze data collected to assess project performance and impact.	Project Evaluator		
Activities	<ul style="list-style-type: none"> —Conduct key informant interview regarding BadgerCare expectations and experience to provide background on potential issues and success measures for coalition membership. —Assess impact of educational programs through the following evaluation activities: <ul style="list-style-type: none"> (1) collect customer satisfaction surveys at all project-sponsored educational programs; and (2) conduct follow-up assessment surveys to assess lasting impact of program; and (3) analyze characteristics of program participants. —Assess impact of informational products by surveying subscribers 		Oct 2000	Completed. A report was prepared that will be distributed this winter.
			Ongoing	Customer satisfaction surveys are collected at all workshops, the regional forums, and at many of the forums associated with coalition meetings. Post training assessment was completed for participants in the Spring 2000 and Fall 2001 training series and will be done for BadgerCare Express participants as well. The addition of sector codes described above has facilitated the analysis of who is participating in project events.
			Ongoing	A draft survey has been prepared for the email Weekly Update subscribers that will be fielded this winter. The

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and product users and analyzing characteristics of recipients. —Compile & analyze encounter data for direct client assistance services provided by pilots and statewide project and report to coalition on trends or population characteristics that contribute to setting policy agenda. —Assess impact of direct client services provided at pilot sites by analyzing data from the state’s Medicaid/BadgerCare enrollment system, comparing program clients against the general population of Medicaid/BadgerCare applicants		Ongoing	BadgerCare Express follow-up planned this winter will include an evaluation of the <i>Advokit</i> and <i>3 Steps</i> kits. Data is being collected at all project sites. Data from both pilot sites has been shared with statewide project staff and evaluation consultant.	
		Ongoing	Data from the state enrollment database system (CARES) has still not been made available to project staff despite ongoing efforts.	

State: Wisconsin		Year: Three	Quarter: 1 & 2	Project Component: Milwaukee Pilot
Activity	Responsible Party	Completion Date	Status	
Goal	Work towards solutions to eligibility and enrollment problems faced by families applying for Medicaid/ BadgerCare in Milwaukee County in collaboration with County, State, eligible families, providers of health care and community workers.			
Objective	Coordinate activity of Milwaukee Pilot Work Group and other policy groups as they continue to work on developing a collaborative agenda to address systemic problems.	Pilot Director		
Activities	—Hold monthly meetings of the Milwaukee Pilot Work Group (called the Enrollment Process Improvement Committee)		Ongoing	Monthly meetings held in the report period focused on service problems and improper billing at pharmacies, concerns related to redesigned client notices, policy changes needed to address retention and redetermination problems, communication between

State: Wisconsin		Year: Three	Quarter: 1 & 2	Project Component: Milwaukee Pilot
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<ul style="list-style-type: none"> —Expand workgroup representation as needed —Participate in monthly meetings of BadgerCare Coordinating Committee and HealthWatch —Report workgroup activities and results at each Statewide Coalition meeting. 		<p>Ongoing</p> <p>Ongoing</p> <p>Nov 2001 Mar, Jun 2002</p>	<p>county workers and advocates, problems with the new simplified Medicaid/BadgerCare application procedures, streamlining of pregnancy verification procedures, funding threats to outstationing, and Food Stamps rule changes. New members are added continuously.</p> <p>Staff members meet monthly with subcommittees of the BadgerCare Coordinating Committee that focus on public policy, outreach and process improvement. Discussions this report period focused on outstation site closures due to funding problems, mail-in application process, BadgerCare enrollment growth and budget implications, Back-to-School outreach fair, and retention and redetermination issues. Staff also coordinates HealthWatch, a major collaboration in Milwaukee County for advocates, public health officials, providers and others in dealing with issues of access and quality care for low-income families. Monthly meetings attract 45 on average. Issues from local pilot workgroups were discussed at the statewide coalition meeting in November, and pilot issues and staff were also central to the public forum on outstationing that preceded the meeting on that day.</p>	
Goal	Encourage applications by educating community workers and individuals with easy-to-understand information that can be spread by word-of-mouth to members of low-income communities.			
Objective	Train community workers so that they can assist families in accessing enrollment into health care.	Educator / Trainer		
Activities	<ul style="list-style-type: none"> —Market training programs among organizations and coalition groups that hold educational meetings or are open to educational programs. —Provide training sessions to at least 5 sites per quarter. 		<p>Ongoing</p> <p>Ongoing, quarterly</p>	<p>Marketing strategy has not changed from previous report periods. Training materials are routinely updated to reflect changes in resources, eligibility requirements, and procedures.</p> <p>10 training sessions were held during the first and second quarter with a total of 171 participants. Events were held for hospital social work and patient accounts staff, Head Start staff, and a program working with children with special health care needs, foster care</p>

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<ul style="list-style-type: none"> —Solicit input on outreach ideas & enrollment barriers and report back to Pilot Workgroup & Statewide Coalition. —Collect quantitative data and participant feedback for project evaluation purposes. —Develop Spanish language training and promotional materials. 		<p>Ongoing</p> <p>Ongoing</p> <p>Winter 2001</p>	<p>system representatives, and outstation sites staff, among others. Staff also participated in 2 resource fairs and provided a training on public policy issues affecting health care for 120 people in the Milwaukee Health Department. Project staff were also very involved in promoting and participating in the BadgerCare Express workshop in Milwaukee as well as the statewide coalition’s Forum on Outstationing, held in Milwaukee. Finally, in preparation for the Communities Connecting for Coverage conference in March and subsequent regional networking forums, pilot staff presented at two regional Managed Care Forums on Milwaukee’s pilot coalitions and their effectiveness in improving practices and policies affecting health coverage and access. Issues and case histories reported at trainings and other venues are incorporated into local and statewide coalition discussions.</p> <p>Formal trainings include evaluations that demonstrate good participant response. Parents generally indicate that informal information sharing sessions are also helpful, but there is no formal evaluation of these sessions.</p> <p>Progress was delayed somewhat due to maternity leave of Spanish-speaking staff person, however, several flyers have been translated and the Health Care Resource Guide translation is complete, with printing expected by January 31.</p>	
Goal	Provide easily accessible information upon request about health coverage resources and application procedures and locations.			
Objective	Train community workers so that they can assist families in accessing enrollment into health care.	Information Specialist		
Activities	—Market availability of Medical Assistance Phone Line (Med-Line) using media contacts, flyers, brochures, and public speaking opportunities.		Ongoing	Flyers are distributed at relevant meetings in the community (including Automated Health Systems trainings), and staff continue to alert hospitals and others agencies of the Med-Line service.

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<ul style="list-style-type: none"> —Provide information and assistance to callers, following up on voicemail messages within 1 working day. —Obtain contact information from contacts and follow-up 2-4 weeks later to check whether coverage was accessed. —Report back to Pilot Workgroup & Statewide Coalition on reported enrollment barriers. —Collect quantitative data and participant feedback for project evaluation purposes. 		Ongoing	<p>The unit received 1054 calls between July and December 2001, about one-third of which required advocacy assistance. The outstationed application site staffed by a county worker that was established at the Community Advocates office last quarter has increased the coordination between county workers and advocacy staff. Follow-up calls are being made to ensure that clients have received some form of health insurance or have gained access to services.</p> <p>Issues and case histories identified through casework are incorporated into local and statewide coalition discussions.</p> <p>Data is being collected on calls, issues, and problems to share with policymakers. The data is being transmitted to the Statewide Project Coordinator and evaluator.</p>	
		Ongoing		
		Ongoing		
		Ongoing		
Objective	Continue to develop the Community Education and Information Center to house information resources, both online and printed, on health care coverage and access topics.	Information Specialist		
Activities	<ul style="list-style-type: none"> —Market availability of Information Center using media contacts, flyers, brochures, and public speaking opportunities. —Assist individuals using the Information Center. —Collect quantitative data and user feedback for project evaluation purposes. 		Ongoing	No new materials were produced this report period.
			Ongoing	Done primarily in the field, rather than at the Community Advocates office. However, materials are being collected at a single location in the office and recruitment is underway for an intern to codify the materials.
			Ongoing	Not applicable since there is currently no formal Information Center and the informal information sharing activities are not tracked.

State: Wisconsin		Year: Three	Quarter: 1 & 2	Project Component: North-Central Pilot
Activity	Responsible Party	Completion Date	Status	
Goal	Work towards solutions to eligibility and enrollment problems faced by families applying for Medicaid/BadgerCare in North Central Pilot region in collaboration with County, State, eligible families, providers of health care and community workers.			
Objective	Coordinate activity of local county coalitions as they work to address systemic problems.	Pilot Director, Health Benefits Coordinator		
Activities	<ul style="list-style-type: none"> —Evaluate and adjust coalition membership. —Hold meetings of local county coalitions. —Report workgroup activities and results at each Statewide Coalition meeting. 		<p>Ongoing</p> <p>Ongoing</p> <p>Nov 2001 Mar, Jun 2002</p>	<p>More than a dozen new coalition members added during the report period. Pilot staff are drafting a survey for coalition members to assess its composition, structure, and effectiveness and to elicit ideas for improving the coalitions</p> <p>A new coalition was established in July to facilitate coordination between the pilot’s outstation staff and county economic support supervisors regarding implementation of the new simplified Medicaid/BadgerCare application form and reduced verifications. This “Economic Support and Outstationing Advisory Committee” met on 7/17/01 and 9/5/01 and will continue to meet quarterly. Some of the concerns addressed related to changes in how the application date is set, confusing elements on the form, child support enforcement, and communication between local offices and state agencies.</p> <p>The existing local coalitions in each county also met frequently during the report period to plan for Resource & Referral trainings scheduled in each of the counties in October and November.</p> <p>Plot coalition issues were discussed at the November 15 Statewide Coalition meeting. Pilot staff joined Statewide Project staff in organizing a meeting with the state child support agency to discuss apparent discrepancies in procedures used for collecting “lying-in” costs for single parents on Medicaid.</p>
Goal	Continually educate Marshfield Clinic System Patient Assistance Center staff and community resources on Medicaid, BadgerCare and other various health care coverage programs for uninsured children.			
Objective	Provide multiple training sessions per year per county	Health Benefits		

State: Wisconsin		Year: Three	Quarter: 1 & 2	Project Component: North-Central Pilot
Activity	Responsible Party	Completion Date	Status	
	Coordinator			
<p>Activities —Schedule, market, and implement training sessions in communities located within the targeted counties.</p>		Ongoing	<p>Marketing strategies have remained very similar. In addition to the usual avenues, pilot staff were interviewed on WEAU TV 13 in Eau Claire regarding the resource and referral trainings. That was aired live on 9/21/01. Automated Health Systems was invited by the pilot to provide their Medicaid Outreach Training in Neillsville on 8/16/01. The audience consisted of county social workers, economic support workers, Marshfield Clinic employees, St. Joseph’s Hospital social workers, Clark County Health Department, and Clark County Community Services. Total attendance was 11. Pilot staff conducted a Medicaid/BadgerCare Simplified Application workshop on 9/24/01 at the Marshfield Clinic. The attendees included new employees of Marshfield Clinic, employees of Wood County Public Health Department, and employees of the Marshfield Clinic regional centers. There were 12 in attendance for this training. The training was repeated for 6 individuals from Head Start, the Healthy Birth Program, and Marshfield Clinic staff in Neillsville on 10/10/01 and again in Wausau on 10/30/01 for 10 individuals from tribal health centers, Bridge Community Health Clinic, and others. Resource and Referral trainings were held in Rusk, Clark and Wood counties in October and November. In Marathon County (where a Resource and Referral training was held last spring), pilot staff were joined by ABC for Health trainers for an advanced level training held in conjunction with the BadgerCare Express workshop in Wausau.</p>	
<p>—Collect quantitative data and participant feedback for project evaluation purposes.</p>		Ongoing	<p>Data are being collected. Evaluations are very positive.</p>	
<p>Objective Attend regional workshops sponsored by ABC for Health and statewide coalition</p>	Health Benefits Coordinator			
<p>Activities —Promote regional workshops to local</p>		Ongoing	<p>Pilot staff participated actively in promoting and hosting</p>	

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community resources. —Exchange outreach experiences with attendees to build off each other's experiences and improve collaboration among participants.		Ongoing	the BadgerCare Express workshop in the pilot area, and have continuously promoted upcoming Covering Kids Statewide Project events. They also participate in training programs offered by Automated Health Systems. Pilot staff participation in trainings, coalition meetings and project-related conference calls provide an opportunity for exchange of information and ideas.	
Objective Provide appropriate informational material to community resources that will aid them in assisting individuals with uninsured children.	Health Benefits Coordinator			
Activities —Present and distribute during the local training sessions the Family Kits developed by ABC for Health. —Distribute educational material to community resources as developed by ABC for Health and any additional materials that are adapted to the local areas by the pilot site staff. —Develop and distribute material that is localized to the area community resources as needed.		Fall 2001, and ongoing Ongoing Ongoing	Pilot staff were actively involved in reviewing content of the <i>3 Steps</i> family kit and co-sponsored the BadgerCare Express stop in Wausau, where both the <i>3 Steps</i> and <i>AdvoKit</i> were distributed. The pilot kept a supply of kits to distribute at their local training events. Work with and through the schools continues. In addition, several retailers agreed to make the pilot's "back-to-school" flyers available to the public during their back to school sale campaigns. They were not able to actually put the flyers in a shopping bag; they did keep them at each check out line in a visible, easily accessible location. Pilot staff participated in the Owen-Withee Child Development Day held on 8/22/01 and had a booth at the 10/20/01 Greenwood Fall Family Festival which attracts many Amish and farm families. They were able to distribute a large number of flyers. Information is distributed via newsletters and schools.	
Goal	Expand outreach activities related to case finding of the harder to reach uninsured children in rural areas.			
Objective Incorporate new outreach activities into RECIN's intervention component.	Health Benefits Coordinator			
Activities —Coordinate with public and private agencies using RECIN to incorporate		Ongoing	All counties in the pilot region are participating. Several new providers have been added, and RECIN staff will	

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health insurance coverage outreach activities.			contact them about including Covering Kids information in their intervention letters. No other changes to report.	
Objective Utilize other existing Marshfield Clinic system program populations to identify individuals for outreach activities.	Outreach Assistant			
Activities —Coordinate and enrich outreach activities appropriate for Healthy Birth Program, Marshfield Children’s, and Family Health Center on an ongoing basis.		Ongoing	<p>The Outreach Assistant screened 21 families in the report period as a direct result of outreach mailings. Of those 21, 13 families (33 individuals) applied, resulting in 24 individuals obtaining coverage so far (some applications are still pending).</p> <p>In this report period, 664 Marshfield Clinic OB patients were screened. It was found that 351 were adequately insured, 69 were uninsured, 163 were underinsured, and 81 were already on Medicaid. To date, 75% of the uninsured have been enrolled in Medicaid, 12% are pending. Of the underinsured, 25% have been covered and 7% are pending.</p> <p>Outstation applications taken this quarter numbered 364 (886 individuals). To date 642 (72%) have received coverage, 141 are still pending, and 107 were denied. Results of follow-up on recertifications for applications taken through the outstation indicate that the majority of families are either maintaining their BadgerCare coverage (50%) or have employer sponsored coverage (26%).</p>	
Objective Identify pregnant women earlier in their pregnancy and strive to aid them in securing health coverage (Medicaid) earlier in their pregnancy.	Outreach Assistant			
Activities —Network through the training sessions and the regional workshops to build upon collaborative working relationships with community resources (i.e., WIC, Family Planning) that pregnant women tend to use earlier in their pregnancy. —Market the availability of project staff to existing Marshfield clinic staff and		Ongoing	Pat Beining participated in a 3-day conference held in Wausau entitled “Bridges Out of Poverty.” This was conducted as a “train the trainer” type of program with the hope that it can be replicated in the future.	
		Ongoing	In progress.	

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	community resources of this service for pregnant women.			
Objective	Extend one-on-one outreach activities to inform individuals on Medicaid, BadgerCare, and other health care coverage programs for uninsured children.	Outreach Assistant		
Activities	<ul style="list-style-type: none"> —Market the availability of project staff to existing Marshfield clinic staff and community resources of this service. —Track the number of encounters and other appropriate information. 		Ongoing	Accomplished through a variety of interactions at meetings, trainings, etc. In progress.
Goal	Monitor project’s effectiveness with targeted outreach activities.			
Objective	Implement evaluation components as developed with the project evaluator.	Health Benefits Coordinator		
Activities	<ul style="list-style-type: none"> —Collect data on the number of individuals reached by the various outreach activities. —Collect training satisfaction surveys after each session. —Collect information on the degree of incorporation by attendees of information gained during training session. —Maintain file on shared experiences during trainings and regional workshops on outreach ideas and enrollment barriers. 		Ongoing Ongoing Ongoing Ongoing	In progress. In progress. Plans for follow-up surveying of training participants are being developed. In progress.
Objective	Review and analyze data collected in order to refine outreach activities.	Health Benefits Coordinator		
Activities	<ul style="list-style-type: none"> —Integrate both qualitative and quantitative data collected in the analysis process. —Report on findings to pilot site 		Ongoing Ongoing	In progress. Meeting minutes are shared as they are prepared. Other

State: Wisconsin		Year: Three	Quarter: 1 & 2	Project Component: North-Central Pilot
Activity	Responsible Party	Completion Date	Status	
representatives, ABC for Health, and statewide coalition. —Revise outreach activities as necessary.		Ongoing	findings and reports are distributed on a quarterly basis. In progress.	

State: Wisconsin		Year: Three	Quarter: 1 & 2	Project Component: Children’s Health Alliance of Wisconsin Outreach Project
Activity	Responsible Party	Completion Date	Status	
Goal	Promote and strengthen outreach efforts and coordination among outreach activities across the State of Wisconsin to ensure that all eligible children are enrolled in health coverage plans.			
Objective	Coordinate regional outreach forums for addressing outreach issues, developing new and/or building on strategies identified during Year 1, and establishing plans for collaborative efforts between agencies.	Project Manager – Health Coverage		
Activities	—Plan agenda, materials, location, and schedule for outreach forums in five regions of the state and in Milwaukee, soliciting input from Statewide Coalition members.		Winter 2002	The primary focus this past half year has been on completing the planning process for the spring 2002 forums. The project will again collaborate with the Wisconsin Division of Health Care Financing, Bureau of Managed Care Programs, using their regular Medicaid Managed Care Forums for the Covering Kids event. The purpose and format of the forums has received considerable attention from project staff and partners over the past several months. The forums were also discussed by the outreach workgroup of the Statewide Coalition at its November 2001 meeting. This year, the forums will focus on network building around health care coverage issues. The foundation for the regional forums will be laid by sessions at the <i>Communities Connecting for Coverage</i> conference on March 5-7 that will identify some regional

State: Wisconsin		Year: Three	Quarter: 1 & 2	Project Component: Children’s Health Alliance of Wisconsin Outreach Project
Activity	Responsible Party	Completion Date	Status	
<ul style="list-style-type: none"> —Supplement diverse mailing list developed in Year 1 for forum invitations and market forums through mailings, brochures, media, and other outlets; increase representation of schools, faith communities and business. —Hold outreach forums. —Collect qualitative data and participant feedback for evaluation purposes. —Prepare roster of attendees and report or minutes of outreach forum proceedings, and distribute to attendees and Statewide Coalition members. —Report outreach forum proceedings and results at Summer Statewide Coalition meeting. 		<p>Winter 2002, and ongoing</p> <p>Spring 2002 Spring 2002</p> <p>Spring 2002</p> <p>June 2002</p>	<p>leaders and issues for further discussion at the regional forums. The 2002 meeting schedule is confirmed and an agenda is close to completion. EDS, the state Medicaid claims processor, will once again provide staff support for the forums, including sending out an announcement, taking registrations, and producing materials. The State BMCP will distribute promotional materials for the forum to its mailing list, and Covering Kids will supplement BMCP's regular promotion with a project-developed brochure and mailing list maintained by the Statewide Project. The Covering Kids invitation content and brochure design is being developed.</p>	
Objective	Coordinate annual statewide outreach meeting for celebrating best practices in outreach and coordinating statewide outreach efforts.	Project Manager – Health Coverage		
Activities	<ul style="list-style-type: none"> —Plan agenda, materials, location, and schedule for annual outreach conference, soliciting input from Statewide Coalition members. —Arrange for guest and keynote speakers. —Create invitation list and market 		<p>March 2002</p> <p>March 2002</p> <p>April 2002</p>	<p>No arrangements have yet been made for the statewide convention taking place this summer, although preliminary discussions about it have occurred and we are planning to use it for further solidification of our network-building initiatives in the March conference and Spring forums.</p>

State: Wisconsin		Year: Three	Quarter: 1 & 2	Project Component: Children’s Health Alliance of Wisconsin Outreach Project
Activity	Responsible Party	Completion Date	Status	
meeting through mailings, brochures, media, and other outlets. —Hold annual outreach conference in conjunction with Summer Statewide Coalition meeting. —Collect qualitative data and participant feedback for evaluation purposes. —Prepare roster of attendees and report of conference proceedings, and distribute to attendees and Statewide Coalition members.		June 2002 June 2002 Summer 2002		

Major Accomplishments

Statewide Project.

The project took a major step forward this report period with the completion of the *3 Steps to Family Health Coverage* kit and the *Advokit for Health Care Access* and their distribution through the BadgerCare Express bus tour. This 11-city training and networking tour, the brainstorm of Covering Kids Project Director Bobby Peterson, provided hands-on training on how to:

- use the *Advokit* to provide clear and effective guidance to families completing the new simplified Medicaid/BadgerCare application form,
- orient families to the *3 Steps* kit, and
- how to develop local coalitions involving economic support, health care providers, public health, and other community-based agencies.

The BadgerCare Express proved a very visible way to promote community participation in using the simplified application process, and it generated both media attention and a lively engagement with community members, eligibility workers, and advocates from a wide array of professional sectors. This heightened level of awareness of Covering Kids and the opportunities to get involved should bear fruit as we focus on strengthening our networking through the March *Communities Connecting for Coverage* conference and ensuing regional networking forums.

Marshfield Pilot.

The Resource and Referral trainings have proven a wonderful opportunity for community agencies to become familiar with one another and the wide variety of services provided in each county to assist children. Strong working relationships were formed and a real spirit of cooperation and collaboration resulted. Many people came to us and recommended that it become an annual event to keep communities aware of how they can work together to help children.

Milwaukee Pilot.

Community Advocates played major role in developing and operating the "Back-to-School 2001" Health Fair, along with Paula Roberts of the Milwaukee Health Department. The event, held August 17-18 at Washington Park Senior Center, attracted an estimated 1750 to 2000 individuals; 54 new applications for Medicaid were taken, plus others for GAMP, child care, and Head Start. The event also received good publicity, in fact, two radio stations broadcast from site. This is expected to become annual event. It has already resulted in greater coordination with other similar events, fostering development of a major community effort to assure children get appropriate health care.

Problems Encountered

The continued lack of progress in obtaining state application data from the CARES system is a major problem for the evaluation component of the project. The Milwaukee pilot reports growing problems in reaching County workers, as caseloads begin to increase. The County has moved slowly to assign workers to new outstation sites and outstations in general may be under threat as enrollment outreach funding ends. Caseloads in Milwaukee County average over 400, but there appears to be no way to increase funding levels for administration of Medicaid/BadgerCare, which would ease access problems.

Revisions to the Workplan

The Statewide Project workplan has been revised pursuant to the encouragement we received to do so at the October 2001 meeting with the National Program Office site visit team. The revised activity statements better reflect our actual work and priorities, but do not represent a major shift in direction. We anticipate additional revisions that will incorporate some changes in the pilot workplans that have budget implications and will therefore be submitted with a budget revision request.

Respectfully submitted by

Alice Porter
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ABC for Health, Inc.