



# Outreach and Enrollment Medi-Cal Eligibility

New Opportunities for  
Enrolling Eligible Californians

Medi-Cal Eligibility Division

October 2013

Webinar



# Outreach and Enrollment Medi-Cal Eligibility

## Agenda

- Welcome and Logistics
- Introduction of presenters
- Presentation: New Opportunities for Enrolling Eligible Californians
- Walk through of the survey: Initial information and application for outreach and enrollment funds
- Questions and Answers



# The Backdrop

Assembly Bill 82

Chapter 23

Approved by Governor June 27, 2013. Filed with  
Secretary of State June 27, 2013.



# Assembly Bill 82

## Sections 70 and 71

Require the Department of Health Care Services (DHCS) to accept grants from the California Endowment for:

- Medi-Cal Enrollment Assistance (\$14 million), and
- Medi-Cal Outreach and Enrollment Grants to selected counties, counties acting jointly, and the County Medical Services Program Governing Board (\$12.5 million), and

And: Obtain \$26.5 million in matching federal funds for these purposes.



# Assembly Bill 82

## Section 70

Specific to DHCS and California Health Benefit Exchange for:

- The entities and persons that are eligible for Medi-Cal in-person enrollment assistance payments of fifty-eight dollars (\$58) per approved Medi-Cal application
- Those certified by Covered CA to be certified enrollment counselors



# Assembly Bill 82

## Section 70

### **Certified Enrollment Counselors:**

- The Certified Enrollment Counselor role is designed to provide one-on-one, in-person assistance to educate consumers on health care options and guide the enrollment process.
- Provide information in a culturally and linguistically appropriate manner.
- Provide services in-language including interpretation at no cost to the consumer.
- Follow-up with consumers annually for renewal of coverage in order to promote retention in Medi-Cal.



# Assembly Bill 82

## Section 70

### **The Role of DHCS in relation to the Certified Enrollment Counselors:**

- Receive the funds from the Endowment and the federal government
- Finalize an inter-agency agreement with Covered California to provide funds for the payments of approved Medi-Cal applications
- Ensure monthly and cumulative payment updates and number of persons enrolled through in-person assistance payments are provided on the internet.



# Inclusion of Certified Application Assistors

## Certification

- Certified Application Assistors for the Healthy Families Program – 2013 and prior
- Certified Enrollment Counselors for the new adult group under the Affordable Care Act – 2014 and beyond
- Certified Application Assistors to obtain certification as Enrollment Counselors through Covered California





# Inclusion of Certified Application Assistants

---

## Certifications attributes comparison

**Add the document drafted by Jill. Have it open to use and walk through.**



# Assembly Bill 82

## Section 71

### **The Funds**

- DHCS shall accept funding from private foundations in the amount of at least \$12.5 million to provide allocations for the management and funding of Medi-Cal outreach and enrollment plans specific to the provisions contained in this section.
- DHCS shall seek necessary federal approval for purposes of obtaining federal funding for activities conducted under this section.
- DHCS may make allocations to fund Medi-Cal outreach and enrollment activities as described in Section 71.



# Assembly Bill 82

## Section 71

### **Allocation of the Funds:**

The allocations shall be apportioned geographically:

- According to the estimated number of persons who are eligible but not enrolled in Medi-Cal and who will be newly Medi-Cal eligible as of January 1, 2014.

# Assembly Bill 82

## Section 71

### **Usage of the funds:**

- The funds allocated under this section shall be used only for the Medi-Cal outreach and enrollment activities, and
- May supplement, but shall not supplant, existing local, state, and foundation funding of county outreach and enrollment activities.



# Assembly Bill 82

## Section 71

---

### **Payment of Funds:**

The department shall begin the payment for the outreach and enrollment allocations program no later than February 1, 2014.

The department shall require progress reports, in a manner as determined by the DHCS, prior to receiving allocations.



# Assembly Bill 82

## Section 71

### **Contracts with County Agencies:**

DHCS will collaborate with each selected county to negotiate a contract which will outline the scope of work, budget, payment provisions, general terms and conditions, in regards to outreach and enrollment efforts.

The sum of twelve million five hundred dollars (\$12,500,000) from the Healthcare Outreach and Medi-Cal Enrollment Account, to be available for encumbrance or expenditure until June 30, 2016.



# Optimizing Funding by Leveraging Efforts

## Collaboration between Covered California and DHCS

- Utilizing similar criteria/requirements, etc. to ensure consistency among the two state programs,
- Sharing of best practices or guidance, such as the In-Person Assistance Program, and
- Bringing in existing application assistors through Covered California's certified enrollment counselors (CEC) training

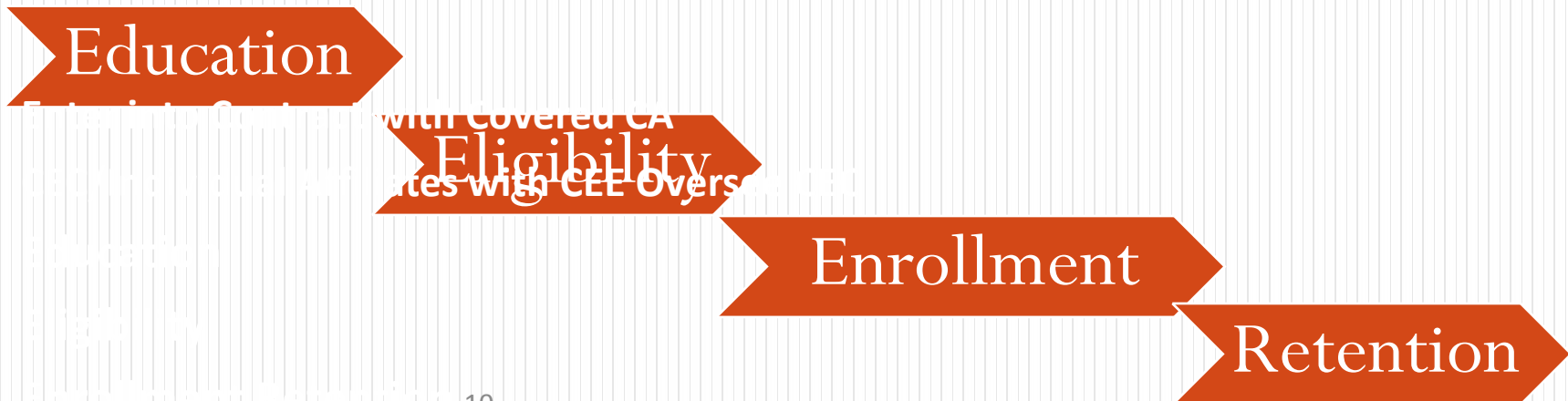


# Optimizing Funding by Leveraging Efforts

## Collaboration between Covered California and DHCS

[CEE and CEC Webinar by Covered California](#)

The CECs conduct the following activities on behalf of Covered California:







# Stakeholder Engagement

## **The Health Care Reform Eligibility, Enrollment, and Retention Planning Act**

- The opportunity to provide meaningful input into the planning and development of the aspects of eligibility, enrollment, and retention identified in AB 1296.
- The planning and development process in relation to AB 1296 and aspects of the federal Patient Protection and Affordable Care Act (PPACA) (Public Law 111-148), as amended by the federal Health Care and Education Reconciliation Act of 2010 (Public Law 111-152), and regulations or guidance issued pursuant to these acts, related to eligibility for, and enrollment and retention in, state health subsidy programs.



# Stakeholder Engagement

## **The Health Care Reform Eligibility, Enrollment, and Retention Planning Act**

- Based on the provisions stated in AB 1296 of 2011, DHCS will provide stakeholders the opportunity to share meaningful input
- The planning and development process for such input will include conference calls, webinars, sharing of pertinent documents or guidance related to eligibility for, and enrollment and retention in, state health subsidy programs
- Welcoming any technical assistance stakeholders could provide

# Measuring Success

## Key elements

- Outreach, enrollment, retention, and utilization
- Change management
- Simplifications
- Data



# Moving Forward

---

Securing matching federal funds

Establishing funding mechanism

Establishing grantees selection criteria for outreach and enrollment

Establishing reporting and transparency requirements

Reaching out to invite grantees

Selecting grantees

Allocating funds



# Medi-Cal O&E Survey

- Goal:** Identify where Medi-Cal outreach and enrollment funding is needed and where the funding would best be utilized
- Purpose:**
- 1) Provide DHCS with a means of measuring the level of interest and need for Medi-Cal outreach and enrollment funding for efforts aimed at targeted population groups as specified in AB 82
  - 2) Provide counties with an opportunity to apply for allocations that will fund Medi-Cal outreach and enrollment efforts
- Deadlines:**
- |   |                   |
|---|-------------------|
| Submit completed survey:  | October 31, 2013  |
| Submit completed survey attachments:<br>(by those applying for funds) | November 15, 2013 |



# Medi-Cal O&E Survey Parameters

## Length

- Approximately 30 minutes

## Location

- Applicants can leave and come back to survey, but the survey must be completed on the same computer!

## Participation

- Only ONE survey response will be accepted per county. Appoint one member of your group to complete a survey on behalf of the entire group. Survey responses should be representative of the entire group, not just the appointed leader of the group.

# Medi-Cal O&E Survey Walkthrough



[SURVEY PREVIEW MODE] Outreach and Enrollment Survey - Windows Internet Explorer

https://www.surveymonkey.com/s.aspx?PREVIEW\_MODE=DO\_NOT\_USE\_THIS\_LINK\_FOR\_COLLECTION&sm=7X53gPs2Abk8SYbTZBx%2fd8uj9rQD2XJHmbwo4oogL4%3d SurveyMonkey, Inc [US]

File Edit View Favorites Tools Help

Convert Select

### Outreach and Enrollment

#### WARNING

You may begin, leave, and come back to this survey. However, you **MUST** use the same computer during the entire survey process. **DO NOT** begin this survey from a computer that will be different from the computer you complete the survey on.

Only **ONE** survey response will be accepted per county. If you are a member of a group of county agencies or counties that is seeking a Medi-Cal outreach and enrollment allocation during this grant funding period, appoint one member of your group to complete a survey on behalf of the entire group. Survey responses should be representative of the entire group, not just the appointed leader of the group.

100%

# Medi-Cal O&E Survey Walkthrough (cont. 1)



[SURVEY PREVIEW MODE] Outreach and Enrollment Survey - Windows Internet Explorer  
https://www.surveymonkey.com/s.aspx?PREVIEW\_MODE=DO\_NOT\_USE\_THIS\_LINK\_FOR\_COLLECTION&sm=7X53gPs2Abk85YbTZBx%2fd8uj9rQD2XJHmbwo4oogL4%3d SurveyMonkey, Inc [US]

File Edit View Favorites Tools Help  
x Convert Select

## Outreach and Enrollment

### Background

Authorized by AB 82 the California Endowment (TCE) has pledged grant funds to DHCS for purposes of allocating grants for Medi-Cal outreach and enrollment efforts with special emphasis being on those efforts focused on the following population groups:

- 1) Persons with mental health disorder needs
- 2) Persons with substance use disorder needs
- 3) Persons who are homeless
- 4) Young men of color
- 5) Persons who are in county jail, in state prison, on state parole, on county probation, or under post-release community supervision
- 6) Families of mixed-immigration status
- 7) Persons with limited English proficiency

DHCS will seek federal matching funds for the Medi-Cal outreach and enrollment efforts associated with this project. Grant funding under these projects will be to provide allocations to select counties, cities, counties acting jointly, or CBOs that engage in Medi-Cal outreach and enrollment efforts. Priority will be given to counties that seek grant funding for outreach and enrollment efforts whose emphasis is on the aforementioned targeted population groups. If a county does not seek an outreach and enrollment allocation during this grant funding period, DHCS may consider providing grant funds to CBOs.

For those selected as recipients of funding under this project, progress reports and program outcomes will be required.

Prev Next

100%



# Medi-Cal O&E Survey Walkthrough (cont. 2) Biographical Page



All questions with a \* MUST be answered

## Survey Identifier

- Example: John Smith is completing a survey on behalf of Sacramento and San Francisco County and 3 CBOs. Together, the 5 entities intend on focusing their O&E efforts on six of the seven populations specified in AB 82. The survey identifier code John would input would be “34/38–JO–5–6.”

## Supplement but not supplant

- Allocations may supplement but shall not supplant existing local, state, and foundation funding for Medi-Cal O&E efforts

# Medi-Cal O&E Survey Walkthrough (cont. 3)



[SURVEY PREVIEW MODE] Outreach and Enrollment Survey - Windows Internet Explorer  
https://www.surveymonkey.com/s.aspx?PREVIEW\_MODE=DO\_NOT\_USE\_THIS\_LINK\_FOR\_COLLECTION&sm=7X53gPs2Abk85YbTZBx%2fd8uj9rQD2XJHmbwo4oogL4%3d  
SurveyMonkey, Inc [US]

File Edit View Favorites Tools Help  
Convert Select

## Outreach and Enrollment

5. A recent congressional report found that “partnerships with community-based organizations (CBOs) were the most frequently cited effective outreach strategy by States during both 2006 and 2010.” While it is not a requirement, DHCS recommends that counties partner with CBOs to achieve their targeted Medi-Cal outreach and enrollment goals during this grant period.

Do you currently have an established cooperative relationship with a CBO for the purposes of Medi-Cal outreach and enrollment? (IF YES, ANSWER QUESTION 6)

Yes  
 No

6. Which CBO(s) do you currently work with for purposes of Medi-Cal outreach and enrollment? (SKIP IF YOU ANSWERED "NO" IN QUESTION 5)

7. Would you be willing to partner with a CBO for purposes of conducting Medi-Cal outreach and enrollment efforts under this grant funding opportunity? (SKIP IF YOU ANSWERED "YES" IN QUESTION 5)

Yes  
 No

\*8. Is your agency currently engaged in Medi-Cal outreach and enrollment efforts?

Yes  
 No

Prev Next

100%

# Medi-Cal O&E Survey Walkthrough (cont. 4)



[SURVEY PREVIEW MODE] Outreach and Enrollment Survey - Windows Internet Explorer

https://www.surveymonkey.com/s.aspx?PREVIEW\_MODE=DO\_NOT\_USE\_THIS\_LINK\_FOR\_COLLECTION&sm=7X53gPs2Abk8SYbTZBx%2fd8uj9rQD2XJHmbwo4oogL4%3d SurveyMonkey, Inc [US]

File Edit View Favorites Tools Help

Convert Select

### Outreach and Enrollment

**\*9. Which (if any) of the following groups does your Medi-Cal outreach and enrollment program assist?**

- Persons with mental health disorder needs
- Persons with substance use disorder needs
- Persons who are homeless
- Young men of color
- Persons who are in county jail, state, prison, on state parole, on county probation, or under post release community supervision
- Families of mixed-immigration status
- Persons with limited English proficiency
- Other population group NOT listed above

Prev Next

100%

# Medi-Cal O&E Survey Walkthrough (cont. 5)



[SURVEY PREVIEW MODE] Outreach and Enrollment Survey - Windows Internet Explorer  
https://www.surveymonkey.com/s.aspx?PREVIEW\_MODE=DO\_NOT\_USE\_THIS\_LINK\_FOR\_COLLECTION&sm=7X53gPs2AbK8SYbTZBx%2Fd8ujl9rQD2XJHmbwo4oogL4%3c

File Edit View Favorites Tools Help

Convert Select

## Outreach and Enrollment

### Established Outreach and Enrollment Programs Seeking Funding

You indicated that your agency has engaged in Medi-Cal outreach and enrollment efforts for one or more of the following targeted population groups:

- 1) Persons with mental health disorder needs
- 2) Persons with substance use disorder needs
- 3) Persons who are homeless
- 4) Young men of color
- 5) Persons who are in county jail, state, prison, on state parole, on county probation, or under post release community supervision
- 6) Families of mixed-immigration status
- 7) Persons with limited English proficiency

Answer the following questions as they pertain to your Medi-Cal outreach and enrollment efforts targeted at the above population groups.

#### 10. When did your targeted outreach and enrollment efforts begin?

MM DD YYYY

Start Date

 /  / 

#### 11. What is your current Medi-Cal outreach and enrollment budget (specifically for the targeted population groups)?

- Under \$10,000
- \$10,000-\$49,999
- \$50,000-\$99,999
- \$100,000-\$199,999
- \$200,000-\$499,999
- Over \$500,000

# Medi-Cal O&E Survey Walkthrough (cont. 6)



[SURVEY PREVIEW MODE] Outreach and Enrollment Survey - Windows Internet Explorer

https://www.surveymonkey.com/s.aspx?PREVIEW\_MODE=DO\_NOT\_USE\_THIS\_LINK\_FOR\_COLLECTION&sm=7X53gPs2AbK8SYbTZBx%2fd8uj9rQD2XJHmbwo4oogL4%3d

File Edit View Favorites Tools Help

Convert Select

**12. Of your targeted outreach and enrollment efforts, how many people has your agency helped enroll into Medi-Cal during your fiscal year? The data can be for either fiscal year (FY) July 2011 through June 2012 or July 2012 through June 2013.**

- 1-499
- 500-2,999
- 3,000-8,999
- 9,000-19,999
- 20,000-39,999
- 40,000+

**13. Of the targeted population your agency helped enroll into Medi-Cal in question 12, what percentage of those people enrolled into Medi-Cal retained their Medi-Cal enrollment and for how long?**

	0-2 months	3-5 months	6-8 months	9-11 months	12 months or more
0%-19%	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
20%-39%	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
40%-59%	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
60%-79%	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
80%-100%	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

If you do not have this data or if it is unknown to your agency, please specify what barriers are preventing your agency from tracking this data.

100%

# Medi-Cal O&E Survey Walkthrough (cont. 7)



[SURVEY PREVIEW MODE] Outreach and Enrollment Survey - Windows Internet Explorer  
[https://www.surveymonkey.com/s.aspx?PREVIEW\\_MODE=DO\\_NOT\\_USE\\_THIS\\_LINK\\_FOR\\_COLLECTION&sm=7X53gPs2AbK8SYbTZBx%2fd8uj9rQD2XJHmbwo4oogL4%3d](https://www.surveymonkey.com/s.aspx?PREVIEW_MODE=DO_NOT_USE_THIS_LINK_FOR_COLLECTION&sm=7X53gPs2AbK8SYbTZBx%2fd8uj9rQD2XJHmbwo4oogL4%3d) SurveyMonkey, Inc [US]

File Edit View Favorites Tools Help  
x Convert Select

**14. If awarded Medi-Cal outreach and enrollment funding, which of the targeted groups will your agency focus its Medi-Cal outreach and enrollment efforts on, that currently are not a target population in your county? (LEAVE BLANK IF YOUR AGENCY WILL NOT EXPAND ITS MEDI-CAL OUTREACH AND ENROLLMENT EFFORTS BEYOND THE TARGETED POPULATION GROUPS IT IS ALREADY TARGETING)**

- Persons with mental health disorder needs
- Persons with substance use disorder needs
- Persons who are homeless
- Young men of color
- Persons who are in county jail, state, prison, on state parole, on county probation, or under post release community supervision
- Families of mixed-immigration status
- Persons with limited English proficiency

**15. Of the seven targeted population groups, mentioned throughout this survey, that your agency has not already helped enroll and retain Medi-Cal, what is the estimated number of people your agency will help enroll into and retain Medi-Cal under this grant funding effort?**

- Under 10,000
- 10,000-29,999
- 30,000-49,999
- 50,000-99,999
- 100,000-199,999
- Over 200,000

**16. Based on the number of individuals you indicated in question 15, is there a minimum amount of grant funding your agency needs in order to carry out the outreach and enrollment project efforts specified in AB 82 section 71?**

- Yes
- No

# Medi-Cal O&E Survey Walkthrough (cont. 8)



[SURVEY PREVIEW MODE] Outreach and Enrollment Survey - Windows Internet Explorer  
https://www.surveymonkey.com/s.aspx?PREVIEW\_MODE=DO\_NOT\_USE\_THIS\_LINK\_FOR\_COLLECTION&sm=7X53gPs2AbK8SYbTZBx%2fd8uj9rQD2XHmbwo4oogL4%3d

File Edit View Favorites Tools Help  
Convert Select

17. Of the following amounts, please identify the amount of grant funding your agency will request for the grant period:

- Under \$150,000
- \$150,000-\$299,999
- \$300,000-\$499,999
- \$500,000-\$699,999
- \$700,000-\$949,999
- Over \$950,000

18. If awarded outreach and enrollment funding, which county or counties will your agency focus its efforts? If your efforts will be focused only in your county, please identify your county. If your efforts will be focuses in multiple counties, please identify each county.

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> Alameda       | <input type="checkbox"/> Orange         | <input type="checkbox"/> San Luis Obispo |
| <input type="checkbox"/> CMSP Counties | <input type="checkbox"/> Placer         | <input type="checkbox"/> San Mateo       |
| <input type="checkbox"/> Contra Costa  | <input type="checkbox"/> Riverside      | <input type="checkbox"/> Santa Barbara   |
| <input type="checkbox"/> Fresno        | <input type="checkbox"/> Sacramento     | <input type="checkbox"/> Santa Clara     |
| <input type="checkbox"/> Kern          | <input type="checkbox"/> San Bernardino | <input type="checkbox"/> Santa Cruz      |
| <input type="checkbox"/> Los Angeles   | <input type="checkbox"/> San Diego      | <input type="checkbox"/> Stanislaus      |
| <input type="checkbox"/> Merced        | <input type="checkbox"/> San Francisco  | <input type="checkbox"/> Tulare          |
| <input type="checkbox"/> Monterey      | <input type="checkbox"/> San Joaquin    | <input type="checkbox"/> Ventura         |

Specific CMSP county or counties

19. This grant funding opportunity is scheduled to end on June 30, 2016 unless otherwise extended by state law. Therefore, outreach and enrollment efforts supported by this grant funding project should focus on maximizing enrollment and retention efforts within this window of opportunity.

When will your agency's targeted outreach and enrollment efforts tied to this DHCS grant funding end?

MM DD YYYY  
End date  /  /

# Medi-Cal O&E Survey Walkthrough (cont. 9)



[SURVEY PREVIEW MODE] Outreach and Enrollment Survey - Windows Internet Explorer

https://www.surveymonkey.com/s.aspx?PREVIEW\_MODE=DO\_NOT\_USE\_THIS\_LINK\_FOR\_COLLECTION&sm=7X53gPs2AbK8SYbTZBx%2fd8uj9rQD2XHmbwo4oogL4%3d

SurveyMonkey, Inc [US]

File Edit View Favorites Tools Help

Convert Select

**20. If your agency is chosen as a recipient for Medi-Cal outreach and enrollment funding, your agency will be required to submit performance reports. These reports will demonstrate the grantee's capacity to conduct an objective assessment of project activities and to collect and report relevant data. The reports will provide for ongoing assessment of meaningful performance and outcome measures that will facilitate continuous improvement in project activities to achieve the stated goals. Additionally, a final report that assesses the overall effectiveness of the project and suggests how the specific strategies and activities could be amended to better achieve stated goals will be required.**

**How often would your agency be able to submit performance reports? (This question is not asking how often your agency would LIKE or PREFER to submit performance reports.)**

Once a Month

Once a Quarter

Once Every Other Quarter

Once a Year

**21. What data elements (i.e. approved applications, months on Medi-Cal, average time/day for approval of Medi-Cal application, etc.) would you recommend (if any) be collected to evaluate the effectiveness and success of outreach and enrollment efforts for the seven targeted population groups mentioned through this survey? (THERE IS NO TEXT LIMIT PER BOX IF YOU ARE IN NEED OF MORE SPACE)**

1)

2)

3)

4)

5)

**\*22. Will your agency partner with any CBO(s) or other county departments/agencies in your targeted outreach and enrollment efforts associated with this grant?**

No, my agency will NOT partner with any CBO(s) or other county department/agency for purposes of conducting outreach and enrollment efforts associated with this grant.

Yes, please specify below.

Please list any CBO(s) or other county departments/agencies that will partner with you in your targeted outreach and enrollment efforts associated with this grant. Please also specify the county in which the other CBO(s) or other departments/agencies are located.



# Medi-Cal O&E Survey Walkthrough (cont. 10)



[SURVEY PREVIEW MODE] Outreach and Enrollment Survey - Windows Internet Explorer

https://www.surveymonkey.com/s.aspx?PREVIEW\_MODE=DO\_NOT\_USE\_THIS\_LINK\_FOR\_COLLECTION&sm=7X53gPs2AbK85VbTZBx%2fd8uj9rQD2XJHmbwo4oogL4%3d

SurveyMonkey, Inc [US]

File Edit View Favorites Tools Help

Convert Select

## Outreach and Enrollment

**23. To be most effective, outreach efforts should link the targeted population groups to direct enrollment and renewal assistance. Utilizing strategic partnerships with CBOs and state government, while incorporating technology into outreach and enrollment activities, can make the application and renewal process more efficient and consumer-friendly, helping individuals to successfully obtain and maintain Medi-Cal.**

In the space provided below, provide a brief abstract summarizing the objectives of your outreach and enrollment efforts. This summary should discuss the project objectives, targeted population group, resources available to conduct the outreach and enrollment efforts, and the amount and duration of financial support requested.

To help keep this process streamlined, please e-mail the following document(s) (Microsoft Office or PDF format only) to [Medi-Cal2014@dhcs.ca.gov](mailto:Medi-Cal2014@dhcs.ca.gov):

- Outreach and Enrollment Goals and Objectives
- Work Plan
- Project Staff
- Organizational Chart
- Implementation Potential

The deadline to submit these documents is Tuesday October 29, 2013 at 5 pm (PST). In the subject of the e-mail, insert "[O&E Attachments]" followed by your survey identifier. For example, John Smith is completing a survey on behalf of Sacramento and San Francisco County and 3 CBOs. Together, the 5 entities intend on focusing their O&E efforts on six of the seven populations specified in AB 82. The survey identifier code John would input would be "34/38-JO-5-6."

John would send his attachments (in the proper format) to [Medi-Cal2014@dhcs.ca.gov](mailto:Medi-Cal2014@dhcs.ca.gov) with "[O&E Attachments] 34/38-JO-5-6" in the subject line.

# Medi-Cal O&E Survey Walkthrough (cont. 11) Remember this screen!?



[SURVEY PREVIEW MODE] Outreach and Enrollment Survey - Windows Internet Explorer

https://www.surveymonkey.com/s.aspx?PREVIEW\_MODE=DO\_NOT\_USE\_THIS\_LINK\_FOR\_COLLECTION&sm=7X53gPs2Abk85YbTZ8x%2fd8uj9rQD2XJHmbw04oogL4%3d SurveyMonkey, Inc [US]

File Edit View Favorites Tools Help

Convert Select

### Outreach and Enrollment

**\*9. Which (if any) of the following groups does your Medi-Cal outreach and enrollment program assist?**

- Persons with mental health disorder needs
- Persons with substance use disorder needs
- Persons who are homeless
- Young men of color
- Persons who are in county jail, state, prison, on state parole, on county probation, or under post release community supervision
- Families of mixed-immigration status
- Persons with limited English proficiency
- Other population group NOT listed above

Prev Next

100%

# Medi-Cal O&E Survey Walkthrough (cont. 12)



[SURVEY PREVIEW MODE] Outreach and Enrollment Survey - Windows Internet Explorer  
https://www.surveymonkey.com/s.aspx?PREVIEW\_MODE=DO\_NOT\_USE\_THIS\_LINK\_FOR\_COLLECTION&sm=7X53gPs2Abk8SYbTZBx%2fd8uj9rQD2XJHmbwo4oogL4%3d

File Edit View Favorites Tools Help

Convert Select

## Outreach and Enrollment

### New Outreach and Enrollment Program Seeking Funding

DHCS has been authorized to issue grants for purposes allocating funds for Medi-Cal outreach and enrollment efforts with special emphasis being on those focused on the following population groups:

- 1) Persons with mental health disorder needs
- 2) Persons with substance use disorder needs
- 3) Persons who are homeless
- 4) Young men of color
- 5) Persons who are in county jail, in state prison, on state parole, on county probation, or under post-release community supervision
- 6) Families of mixed-immigration status
- 7) Persons with limited English proficiency

Answer the following questions as they pertain to your proposed Medi-Cal outreach and enrollment efforts.

**\*10. Which group(s) will your agency focus its Medi-Cal outreach and enrollment efforts on?**

- Persons with mental health disorder needs.
- Persons with substance use disorder needs.
- Persons who are homeless.
- Young men of color.
- Persons who are in county jail, in state prison, on state parole, on county probation, or under post-release community supervision.
- Families of mixed-immigration status.
- Persons with limited English proficiency
- Other group(s) NOT listed above:

List the population group(s) your agency will focus its O&E efforts on:

# Medi-Cal O&E Survey Walkthrough (cont. 13)



[SURVEY PREVIEW MODE] Outreach and Enrollment Survey - Windows Internet Explorer  
[https://www.surveymonkey.com/s.aspx?PREVIEW\\_MODE=DO\\_NOT\\_USE\\_THIS\\_LINK\\_FOR\\_COLLECTION&sm=7X53gPs2Abk8SYbTZBx%2fd8uj9rQD2XJHmbwo4oogL4%3d](https://www.surveymonkey.com/s.aspx?PREVIEW_MODE=DO_NOT_USE_THIS_LINK_FOR_COLLECTION&sm=7X53gPs2Abk8SYbTZBx%2fd8uj9rQD2XJHmbwo4oogL4%3d) SurveyMonkey

File Edit View Favorites Tools Help  
x Convert Select

**11. Of the targeted population groups you indicated in question 10, what is the estimated number of people your agency expects to help enroll into and retain Medi-Cal?**

- Under 10,000
- 10,000-29,999
- 30,000-49,999
- 50,000-99,999
- 100,000-199,999
- Over 200,000

**12. Based on the number of individuals you indicated in question 11, what is the minimum amount of grant funding your agency needs in order to carry out the outreach and enrollment project efforts specified in AB 82 section 71?**

- Yes
- No

**13. What is the estimated budget for the Medi-Cal outreach and enrollment efforts (specifically for the targeted population groups) your agency proposes to undertake?**

- Under \$150,000
- \$150,000-\$299,999
- \$300,000-\$499,999
- \$500,000-\$699,999
- \$700,000-\$949,999
- Over \$950,000

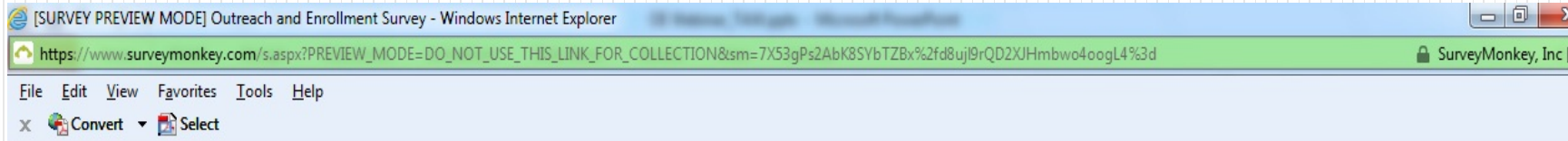
**14. When will your targeted Medi-Cal outreach and enrollment efforts begin?**

MM DD YYYY

Start Date

/  /

# Medi-Cal O&E Survey Walkthrough (cont. 14)



**15. This grant funding opportunity is scheduled to end on June 30, 2016 unless otherwise extended by state law. Therefore, outreach and enrollment efforts supported by this program should focus on maximizing enrollment and retention efforts within this window of opportunity.**

**When will your agency's targeted outreach and enrollment efforts tied to this DHCS grant funding end?**

MM DD YYYY

End date

 /  / 

**16. If awarded outreach and enrollment funding, which county or counties will your agency focus its efforts? If your efforts will be focused only in your county, please identify your county. If your efforts will be focuses in multiple counties, please identify each county.**

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> Alameda       | <input type="checkbox"/> Orange         | <input type="checkbox"/> San Luis Obispo |
| <input type="checkbox"/> CMSP Counties | <input type="checkbox"/> Placer         | <input type="checkbox"/> San Mateo       |
| <input type="checkbox"/> Contra Costa  | <input type="checkbox"/> Riverside      | <input type="checkbox"/> Santa Barbara   |
| <input type="checkbox"/> Fresno        | <input type="checkbox"/> Sacramento     | <input type="checkbox"/> Santa Clara     |
| <input type="checkbox"/> Kern          | <input type="checkbox"/> San Bernardino | <input type="checkbox"/> Santa Cruz      |
| <input type="checkbox"/> Los Angeles   | <input type="checkbox"/> San Diego      | <input type="checkbox"/> Stanislaus      |
| <input type="checkbox"/> Merced        | <input type="checkbox"/> San Francisco  | <input type="checkbox"/> Tulare          |
| <input type="checkbox"/> Monterey      | <input type="checkbox"/> San Joaquin    | <input type="checkbox"/> Ventura         |

Specific CMPS county or counties

# Medi-Cal O&E Survey Walkthrough (cont. 15)



[SURVEY PREVIEW MODE] Outreach and Enrollment Survey - Windows Internet Explorer  
https://www.surveymonkey.com/s.aspx?PREVIEW\_MODE=DO\_NOT\_USE\_THIS\_LINK\_FOR\_COLLECTION&sm=7X53gPs2Abk8SYbTZBx%2fd8uj9rQD2XJHmbwo4oogL4%3d  
SurveyMonkey, Inc [US]

File Edit View Favorites Tools Help  
x Convert Select

**17. If your agency is chosen as a recipient for Medi-Cal outreach and enrollment funding, your agency will be required to submit performance reports. These reports will demonstrate the grantee's capacity to conduct an objective assessment of project activities and to collect and report relevant data. The reports will provide for ongoing assessment of meaningful performance and outcome measures that will facilitate continuous improvement in project activities to achieve the stated goals. Additionally, a final report that assesses the overall effectiveness of the project and suggests how the specific strategies and activities could be amended to better achieve stated goals will be required.**

**How often would your agency be able to submit performance reports? (This question is not asking how often your agency would LIKE or PREFER to submit performance reports.)**

Once a Month  
 Once a Quarter  
 Once Every Other Quarter  
 Once a Year

**18. What data elements (i.e. approved applications, months on Medi-Cal, average time/day for approval of Medi-Cal application, etc.) would you recommend (if any) be collected to evaluate the effectiveness of outreach and enrollment efforts for the seven targeted population groups mentioned through this survey? (THERE IS NO TEXT LIMIT PER BOX IF YOU ARE IN NEED OF MORE SPACE)**

1)   
2)   
3)   
4)   
5)

**\*19. Will your agency partner with any CBO(s) or other county departments/agencies in your targeted outreach and enrollment efforts associated with this grant?**

No, my agency will NOT partner with any CBO(s) or other county department/agency for purposes of conducting outreach and enrollment efforts associated with this grant.  
 Yes, please specify below.

Please list any CBO(s) or other county departments/agencies that will partner with you in your targeted outreach and enrollment efforts associated with this grant. Please also specify the county in which the other CBO(s) or other departments/agencies are located.

# Medi-Cal O&E Survey Walkthrough (cont. 16)



[SURVEY PREVIEW MODE] Outreach and Enrollment Survey - Windows Internet Explorer

https://www.surveymonkey.com/s.aspx?PREVIEW\_MODE=DO\_NOT\_USE\_THIS\_LINK\_FOR\_COLLECTION&sm=7X53gPs2AbK8SYbTZBx%2fd8uj9rQD2XJHmbwo4oogL4%3d

SurveyMonkey, Inc [US]

File Edit View Favorites Tools Help

Convert Select

## Outreach and Enrollment

### Details

20. To be most effective, outreach efforts should link the targeted population groups to direct enrollment and renewal assistance. Utilizing strategic partnerships with CBOs and state government, while incorporating technology into outreach and enrollment activities, can make the application and renewal process more efficient and consumer-friendly, helping individuals to successfully obtain and maintain Medi-Cal.

In the space provided below, provide a brief abstract summarizing the objectives of your outreach and enrollment efforts. This summary should discuss the project objectives, targeted population group, resources available to conduct the outreach and enrollment efforts, and the amount and duration of financial support requested.

To help keep this process streamlined, please e-mail the following document(s) (Microsoft Office or PDF format only) to [Medi-Cal2014@dhcs.ca.gov](mailto:Medi-Cal2014@dhcs.ca.gov):

- Outreach and Enrollment Goals and Objectives
- Work Plan
- Project Staff
- Organizational Chart
- Implementation Potential

The deadline to submit these documents is Tuesday October 29, 2013 at 5 pm (PST). In the subject of the e-mail, insert "[O&E Attachments]" followed by your survey identifier. For example, John Smith is completing a survey on behalf of Sacramento and San Francisco County and 3 CBOs. Together, the 5 entities intend on focusing their O&E efforts on six of the seven populations specified in AB 82. The survey identifier code John would input would be "34/38-JO-5-6."

John would send his attachments (in the proper format) to [Medi-Cal2014@dhcs.ca.gov](mailto:Medi-Cal2014@dhcs.ca.gov) with "[O&E Attachments] 34/38-JO-5-6" in the subject line.

100%

# Medi-Cal O&E Survey Walkthrough (cont. 17)



[SURVEY PREVIEW MODE] Outreach and Enrollment Survey - Windows Internet Explorer

https://www.surveymonkey.com/s.aspx?PREVIEW\_MODE=DO\_NOT\_USE\_THIS\_LINK\_FOR\_COLLECTION&sm=7X53gPs2AbK85VbTZBx%2fd8uj9rQD2XJHmbwo4oogL4%3d SurveyMonkey, Inc [US]

File Edit View Favorites Tools Help

Convert Select

### Outreach and Enrollment

#### End of Survey

Thank you for your responses and interest. This concludes this survey.

Prev Done

100%





# Medi-Cal O&E Survey

---

# Questions?



# Contact Information

---

For county agencies survey, Thomas (Antonio) Weary at:  
[thomas.weary@dhcs.ca.gov](mailto:thomas.weary@dhcs.ca.gov)

For Certified Enrollment Assisters, Valerie Orosco at:  
[valerie.orosco@dhcs.ca.gov](mailto:valerie.orosco@dhcs.ca.gov)

For all other inquiries, questions, or submissions:  
[Oeworkgroup@dhcs.ca.gov](mailto:Oeworkgroup@dhcs.ca.gov)