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# Outreach

Communities Connecting Kids With Health Coverage

## Results of the 2004 General Assembly Session



By Jill Hanken,  
Staff Attorney,  
Virginia Poverty  
Law Center

Taking a record 115 days, Virginia legislators and the Governor finally ended this year's General Assembly session on June 16<sup>th</sup>. Though the primary focus was balancing the Commonwealth's budget, some important changes to Virginia's child health insurance programs were passed.

### Dental Services

The 2004 Appropriations Act (*Item 322 #2c*) "carves out" dental services from Medicaid/FAMIS managed care and provides for reimbursement of services on a fee-for-service basis. Funding was also provided in the budget to handle the new administrative expenses that the carve-out will require (*e.g. provider outreach, a help-line, case management, and other provider enrollment functions*).

Currently, only 20% of children enrolled in Medicaid, FAMIS or FAMIS Plus are receiving the dental services they are eligible to receive. Only 16% of licensed dentists in Virginia participate in the Medicaid program. The carve-out is one strategy to encourage more dentists to participate in Medicaid and FAMIS and to enable more children to receive the needed coverage.

Over the past few months, the VA Department of Medical Assistance Services (DMAS) has analyzed and discussed the best method for administering the new dental program and has decided the greatest chance of success would be to contract out program administration to a third party vendor. DMAS would retain policy making authority and would closely monitor the activities of



the vendor. DMAS is in the process of establishing a dental program unit that will consist of a dental program manager, its dental consultant, and a contract monitor.

This approach was recently endorsed by the Medicaid Dental Advisory Committee and the Virginia Dental Association's Board of Directors. DMAS is now drafting an RFP for the dental program vendor and taking other steps needed to create the new dental program.

### Funding for FAMIS/FAMIS Plus

The final budget included funding for both FAMIS and FAMIS Plus. Strong support was shown for the programs when both houses upheld the Governor's funding increase of \$31.3 million to support caseload growth in the programs through FY 2006 (14.7% growth in FAMIS Plus and 15.4% in FAMIS).

### Changing the Oversight Committee

HB 836 also passed, revising the name, purpose, membership and responsibilities of the FAMIS Outreach Oversight Committee. Now called the Child Health Insurance Program Advisory Committee, its new purpose is to assess policies, operations and outreach for FAMIS and FAMIS Plus and to evaluate various enrollment, utilization, and outcomes of children for these programs. The group, made up of a maximum of 20 members, will make recommendations on FAMIS and FAMIS Plus to the Director of DMAS and the Secretary of Health and Human Resources.

*Continued on back cover*

## Inside:

DMAS News

Cover the  
Uninsured  
Week Wrap-Up

Project Connect  
Continues

Spotlight on the  
FAMIS CPU

Child Health  
Superheroes

Did you know?

Back-to-School  
2004

New Initiatives



# Department of Medical Assistance Services Update

By Olivia Dickerson, *FAMIS Outreach Liaison*, VA Department of Medical Assistance Services

## New Partners



FAMIS and the **Department of Professional and Occupational Regulation (DPOR)** have developed a strong partnership utilizing DPOR's client base. DPOR regulates professional standards for state-licensed specialists such as Contractors, Barbers and Cosmetologists, and Real Estate agents. Beginning in June, approximately 6,000 FAMIS brochures were enclosed with license renewals mailed to professionals around the state. This project, which will be ongoing every month over the next two years, will reach an estimated 200,000 licensed professionals many of whom are small business owners.

FAMIS is also pleased to announce its newest outreach partner, **CVS**. Currently, FAMIS is working with Central Virginia CVS's to provide stocked brochure displays at 130 area pharmacy counters. Select stores will also have FAMIS posters displayed. FAMIS will also be providing pharmacists with an *Easy FAMIS Reference Sheet* so they can speak knowledgeably about the child health insurance programs to their customers. More projects are in the works with CVS.

Stay tuned for more!

## Outreach Staffing Changes

For even more information on FAMIS visit [www.FAMIS.org](http://www.FAMIS.org)!

### New Outreach Coordinators

DMAS would like you to help welcome two new FAMIS Outreach Coordinators that have been hired to serve the Tidewater/Hampton Roads region and the Northern Virginia region.

**Mike Taylor**, who comes to us from the Urban League of Hampton Roads and the Salvation Army, was hired in March to work in the Tidewater/Hampton Roads region. Working out of an office at the Portsmouth Department of Social Services, he has already been busy working with temp agencies, the faith community, and outreach grantees in the area. To reach Mike, contact (757) 405-1800 x8176 or [mike.taylor@dmass.virginia.gov](mailto:mike.taylor@dmass.virginia.gov).

Also recently hired was **Mayra Granados** to serve as FAMIS Outreach Coordinator for the Northern Virginia region. Mayra, who began in her new position June 12<sup>th</sup>, comes to DMAS from CHIP of Greater Richmond's *Project Connect* program.



In addition to serving as Coordinator, Mayra, who is bilingual, will work to strengthen the program's Hispanic outreach efforts. Mayra is stationed at DMAS's Richmond office. Mayra can temporarily be reached via Olivia Dickerson at (804) 786-3359 while her office is being set up.

### Moving On...

It is with a heavy heart that DMAS announces two staff departures. **Pam Howze**, who had served the FAMIS program for two year's as Policy Analyst/Outreach Liaison, recently accepted a position as Staff Director for First Lady Lisa Collis.

In addition, **Amanda Ellinger**, who made great strides as Outreach Coordinator in the Southwestern region, has accepted a position at CHIP of the Roanoke Valley. We congratulate Amanda in her new position as an Intake Coordinator and know she will continue to improve child health in the Southwest.

# Cover The Uninsured Week Wrap Up

May 10 - 16, 2004

## Governor's Press Conference Challenge

To kick off the 2<sup>nd</sup> annual *Cover the Uninsured Week* and to highlight Virginia's progress on enrolling uninsured children into state-sponsored health insurance, Governor Warner held a press conference at Children's Hospital in Richmond on May 10<sup>th</sup>. Pointing to a photo of 86,000 people filling Washington Redskins Stadium, the Governor praised Virginia on enrolling more uninsured children (about 90,000) into FAMIS and FAMIS Plus since he took office in January 2002.



Governor Warner recognized both the public and private sector partners that have established Virginia as the "Comeback Kid" of child health insurance programs. Virginia has gone from one of the bottom states in enrolling children to one of the few success stories. The Governor thanked the public/private partners for their extraordinary work: members of the Virginia General Assembly; business partners; health care providers; funders; the Board and staff of the Department of Medical Assistance Services; the Virginia Departments of Social Services, Education, and Health; and the invaluable community workers on the front lines who reach out to eligible families every day, some who receive grants to do this work and others that just incorporate this service into their routine work with families.

In the end, the Governor challenged state public agencies, businesses, and community organizations to reach 100,000 net enrolled children by the time school starts in September. "That means that over the summer, during a time that we traditionally see a slow down in enrollment, we'll all need to step up our efforts to reach and enroll these uninsured children," said Governor Warner. As of July 1, Virginia had reached 97,051 of net enrolled children, leaving 2,949 children remaining to attain this goal.

## Virginia's Great Response

Organizations in Virginia held over 100 events during *Cover the Uninsured Week*. While some agencies held events prior to that week to get the word out, the majority of efforts happened during May 10<sup>th</sup> to the 16<sup>th</sup>. Projects helped organize community forums and town hall meetings and held outreach events at varied locations (churches, employment commission offices, health care settings, laundry-mats, libraries, schools, and even semi-pro baseball games). One community even rallied area restaurants to donate a portion of their proceeds for the week to support the local free clinic.

The Department of Medical Assistance Services (DMAS), Division of Child Health Insurance Programs employed several outreach strategies during this week as well. They conducted targeted media campaigns (radio and television ads) in the Tidewater area, created special *Cover the Uninsured Week* buttons, and produced a video with information on FAMIS/FAMIS Plus that was played in the waiting rooms of local departments of Health and Social Services. In addition, they distributed a flyer with information on FAMIS and FAMIS Plus to 14,000 part-time, temporary state wage employees. These workers do not have access to state health care benefits and many fit the income guidelines for Virginia's child health insurance programs. DMAS also worked with the Department of Child Support Enforcement to send FAMIS information with all child support checks processed through their offices.



## Project Connect to Continue

By Joanne Greene,  
Project Connect  
Program Manager,  
Virginia Health Care  
Foundation

The Virginia Department of Medical Assistance Services (DMAS) recently committed to continue its investment in the *Project Connect* initiative managed by the Virginia Health Care Foundation during fiscal year 2005 (*July 1, 2004 through June 30, 2005*). These funds are targeted to continue existing projects that are effectively serving areas with high numbers of uninsured children. Some of these projects are expanding geographically to serve neighboring high need localities. In addition, two new projects will be operating in the greater Richmond area.

The ten *Project Connect* grantees cover 51 localities in which over 65% (32,093 out of 49,465) of the remaining eligible uninsured children reside. While the projects can not personally help enroll all of these children, they have demonstrated a solid track record of outreach and enrollment expertise. *Project Connect* serves 19 out of the 26 "high need" localities in the Commonwealth. "High need" means the area has greater than 500 remaining children estimated eligible for FAMIS or FAMIS Plus.

In addition, many of the projects report positive working relationships with their local Department of Social Services and active referral networks with community organizations, healthcare providers, and school systems. The projects will continue to play a critical role in identifying necessary program and policy improvements at the state level. And they will help institutionalize outreach and enrollment activities within organizations in their communities.

### Continuing Projects:

**Alexandria Neighborhood Health Services, Inc.** serving Arlington County and Alexandria.

**CHIP/Healthy Families of Chesapeake** will continue working in the city of Chesapeake.

**CHIP of the Roanoke Valley** continues to serve Botetourt, Craig, Franklin, and Roanoke Counties and the Cities of Roanoke and Salem and they will be expanding to cover the Southwestern portion of Bedford County.

**Consortium for Infant and Child Health** continues to focus on Portsmouth, Suffolk and Virginia Beach.

**Cumberland Plateau Health District** (*in partnership with Clinch Valley Community Action Agency*) currently serves Buchanan, Dickenson, Lee, Wise, Tazewell and Smyth Counties and will be expanding to cover Washington and Scott Counties as well.

**Johnson Health Center** (*in collaboration with Centra Health*) currently covers Amherst, Appomattox, Bedford, Campbell, Henry and Pittsylvania Counties and the cities of Bedford, Danville, Lynchburg and Martinsville. They will be expanding into Buckingham and Charlotte Counties.

**Partnership for Healthier Kids** covers Fairfax City/County, Falls Church and Loudoun County.

**United Way Thomas Jefferson Area** (*in partnership with Blue Ridge AHEC*) currently covers the Rockingham/Harrisonburg area and they will be expanding into Augusta and Page Counties and the Cities of Staunton and Waynesboro.

### New Projects in Richmond:

**Bon Secours Richmond Health System** will be serving Richmond City, Henrico County and Chesterfield/Colonial Heights.

**Richmond Enhancing Access to Community Healthcare (REACH)** will be serving Richmond City, Henrico County, Chesterfield/Colonial Heights, Petersburg and Hopewell.

## Spotlight on the FAMIS CPU

By Olivia Dickerson,  
FAMIS Outreach Liaison,  
VA Department of  
Medical Assistance  
Services

In December, DMAS signed a one-year contract extension with ACS, Inc. - State Healthcare Solutions to provide operation services for the FAMIS Central Processing Unit (CPU) through November 2004. The CPU has made dramatic progress over the past year in daily operations, data collection, and quality control.

### New Hires

ACS recently hired a new Account Manager, Susan Sinclair, to oversee the CPU. Susan comes from Texas and brings with her thirteen years of experience with the Medicaid program. Her experience ranges from managing claims processing operations to developing and overseeing quality and training programs. In addition, she has coordinated management and contract oversight of multiple MCO networks for Medicaid managed care programs as well as created outreach marketing campaigns and member educational materials.

The CPU has also added a Trainer/Quality Analyst to the staff to focus on continued operational improvements and enhanced levels of customer service.

### Accommodating Hispanic Families

One of the CPU's enhanced areas of customer service is increased consideration of the Hispanic community. Recently, the CPU began making the three most widely used client letters available in English and Spanish: the renewal letter and the two versions of the letter that are sent to families that have made a new application over the phone. In addition, preparations are underway to make the pre-filled application generate in Spanish. In addition, 5 of the 9 call-center employees are bilingual.

### New Reporting Capabilities

Another one of the benefits of the new contract is the addition of new reports. DMAS and the CPU contractor have developed and implemented new reporting requirements. With these enhanced reports, DMAS will be able learn more information about FAMIS applicants and retention of enrollees. For example, DMAS and the CPU created a new category of applications called Re-Applications. These are applications submitted from families whose coverage was cancelled within the last 90 days. DMAS is looking forward to using the newly available data for more extensive analysis of membership and status changes.

### CPU FAST FACTS

- Average # calls received monthly - **12,969**
- **9** Full-time call center employees - **5** bilingual
- Average # preprinted application packets mailed monthly - **1,622**
- Average # preprinted renewal packets mailed monthly - **1,491**
- Average # of applications received monthly - **2,766**
- Average # of DSS FAMIS case transfers to the CPU each month – **900**
- Average # of Child Health Insurance applications referred monthly to the co-located DMAS FAMIS Plus unit at the CPU - **984**
- Current FAMIS caseload managed by CPU - **36,658** children
- **8** Full-time employees in Eligibility Unit



\* Monthly averages based on data from January '04 through May '04

## Two Receive Child Health Superhero Awards

Two *Project Connect* outreach workers, **Julia Gatti** with CHIP of the Roanoke Valley and **Eduardo Mantilla-Torres** with Alexandria Neighborhood Health Services, Inc., were awarded Child Health Superhero Awards by Governor Mark R. Warner at the Virginia Health Care Foundation's Heroes in Healthcare event on May 4<sup>th</sup>.

Two of VHCF's most successful *Project Connect* grantees, they have successfully enrolled over 1,000 children each in Virginia's child health insurance programs.

Julia "eats, sleeps and breathes child health insurance enrollment." Her passion and dedication have led her to find creative ways to attract and enroll children. From "teddy bear clinics" to a magnetic sign on her car, she is relentless in her quest to bring health insurance to uninsured children in the Roanoke valley.

Eduardo serves as a bridge for many whom he assists in the Hispanic community of Alexandria. Eighty percent of his clients cannot read, write or speak English and they have come to trust and rely on him. He not only assists with getting uninsured children enrolled in FAMIS or FAMIS Plus, but has also helped their parents with medical and immigration forms as well.

Congratulations to both of these remarkable people!



*The Child Health Superheroes (left to right): Julia Gatti (Outreach Worker at CHIP of the Roanoke Valley), Governor Mark R. Warner, and Eduardo Mantilla-Torres (Outreach Coordinator at Alexandria Neighborhood Health Services, Inc.).*

**Did you know?** Following are some new information on the FAMIS and FAMIS Plus programs.



### Estimates of Uninsured Children Revised

New estimates of uninsured children eligible for Virginia's Child Health Insurance Programs (FAMIS and FAMIS Plus) were released on March 1, 2004. Using more up-to-date poverty rates, the new estimates added an additional 21,131 uninsured, eligible children. At the time they were released, Virginia had enrolled 91% of eligible uninsured children statewide under the old estimates. Using the new estimate, Virginia was at only 86% enrollment. While Virginia has more work to do under the new estimates, they more accurately reflect the economic issues that have impacted the state since the original numbers were calculated. To see where Virginia currently stands on enrollment and a comparison of the old to new estimates go to [www.signupnowva.org/enrollment.asp](http://www.signupnowva.org/enrollment.asp).

### Virginia's Programs Highlighted in National Study

In April 2004, Virginia was recognized for its hard work on keeping child health insurance programs a priority in tough economic times by the National Academy for State Health Policy (NASHP) in the report entitled, *SCHIP Changes in a Difficult Budget Climate: A Three-State Site Visit Report*. Texas and Utah are the other states studied in the report.

To compile the Virginia information, NASHP interviewed: the Virginia Department of Medical Assistance Services, Virginia Poverty Law Center, Virginia Health Care Foundation, Anthem Blue Cross and Blue Shield, Sentara Health Management, Legislators, and Secretary of Health and Human Resources Jane Woods. The report can be viewed at: [www.nashp.org/Files/SCHIP\\_site\\_visit\\_report\\_final.pdf](http://www.nashp.org/Files/SCHIP_site_visit_report_final.pdf).



## Back-to-School 2004

By Olivia Dickerson,  
FAMIS Outreach Liaison,  
VA Department of Medical  
Assistance Services (DMAS)

FAMIS, in collaboration with the Virginia Health Care Foundation and the Virginia Department of Education, is busy preparing for the 3<sup>rd</sup> Annual Back-to-School (BTS) Campaign 2004. This year, DMAS will again initiate the statewide BTS and School Lunch Flyer project. The redesigned flyers are available for the first time in English and Spanish.

### Title I and PASS Schools

Ten *Project Connect*, *Covering Kids & Families*, and *DSS Keep 'Em Covered* Retention projects will participate in the Flyer project, distributing BTS flyers to select Title I and PASS schools in their service areas. In addition, DMAS will distribute the BTS flyers to all Title I and PASS schools not covered by the projects and will broaden its distribution area in select regions to blanket all elementary, middle and high schools.

The select blanketed districts will be: Accomack and Northampton, Franklin City, Chesapeake, Norfolk, Portsmouth, Suffolk, Richmond City, Petersburg, and Bedford City and County.

DMAS will be distributing 412,700 BTS flyers to schools statewide and 381,300 inserts to be included in free and reduced-price lunch program approval notices statewide. In addition, the collaborating grant projects will be distributing 62,861 BTS flyers to schools in their regions.

*Note: SignUpNow is keeping track of what localities are planning for Back-to-School 2004. If your agency is planning a special event or an outreach activity for Back-to-School, please contact SignUpNow at [signupnow@vhcf.org](mailto:signupnow@vhcf.org) or (804) 828-6062.*

## Virginia's New Initiatives

By Kim McGaughey,  
Director of Child Health  
Insurance Initiatives,  
Virginia Health  
Care Foundation (VHCF)

Virginia has recently started two exciting new initiatives.

The first initiative, part of the Virginia *Covering Kids and Families* Coalition, is an **Hispanic Outreach Task Force** comprised of bilingual outreach workers from across the state. With the goal of improving outreach and enrollment of children from Spanish-speaking families in FAMIS and FAMIS Plus, the Task Force is interviewing Spanish-speaking families, looking at barriers to enrollment, exploring the use of language, identifying promising practices in Virginia, and gathering insight from national organizations. A white paper will be developed in the Fall that summarizes their findings and provides short and long term recommendations. If you have insights you would like to share on this issue, please contact Danielle Mutone-Smith at [dmutonesmith@earthlink.net](mailto:dmutonesmith@earthlink.net).

The second initiative is an exciting public/private partnership **to improve the retention of children in FAMIS and FAMIS Plus**. While Virginia has made extraordinary progress in aggressively enrolling children, thousands of children have their coverage cancelled each month, sometimes inappropriately. To better understand this issue:

- A longitudinal database has been developed by DMAS that for the first time will track patterns in FAMIS and FAMIS Plus enrollments, cancellations and renewals;
- The administrative costs of enrolling and disenrolling a child in FAMIS or FAMIS Plus are being estimated; and
- Families are being surveyed as to why they enroll and disenroll their children.

This research is being guided by DMAS, VHCF, and Steve Horan of the Community Health Resource Center. Also being incorporated are the learnings of 14 local departments of social services who are testing innovative strategies for retaining children in FAMIS Plus with grants funded by from DMAS. This work will culminate in early Winter, resulting in a comprehensive picture on retention and effective strategies for making retention processes simpler and easier in Virginia.





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Check [www.signupnowva.org/calendar.asp](http://www.signupnowva.org/calendar.asp) for the SignUpNow Workshop schedule!

Thanks...



**To Our VCKF Partners**

Preparation of this newsletter was assisted by a grant from the Robert Wood Johnson Foundation, Princeton, NJ. Additional support was provided by: Roy R. Charles Charitable Trust, Anthem Blue Cross and Blue Shield, MAMSI, Capital One, and the Carillion Foundation.

**To SignUpNow's Partners**

Virginia Department of Medical Assistance Services, Williamsburg Community Health Foundation, and the Virginia Primary Care Association.

**GA Results**

*Continued from front cover*

**Expanded Coverage Denied**

Two budget amendments were presented during the session offering options for expanding FAMIS insurance coverage to pregnant women with incomes up to 200% of poverty. (*Current Medicaid eligibility for Pregnant Women is set at 133% of poverty*). But given the huge budget shortfall, the final version of the budget did not contain this expansion.

However, the issue has gained attention due to closure of obstetrician (OB) practices and/or hospital services in several rural areas and concerns about the escalating costs of malpractice insurance. As a result, the final budget did direct the Secretary of Health and Human Resources to report on the "availability of obstetrical services in the Commonwealth and identify any areas where there is inadequate access to such services." Via Executive Order in March, Governor Warner appointed a work group to make recommendations on how to stabilize and improve access to OB care in Virginia.

On July 7, an interim report regarding this issue was released containing two preliminary recommendations: 1) to increase Medicaid physician payment rates for OB/Gyn services by 45% through emergency regulations; and 2) to increase the Medicaid income standard for pregnant women up to 200% of poverty.

Additional study will be made on other related issues and final recommendations will be made when the full report is published in the fall. Also announced was a series of public hearings around the Commonwealth in July to receive input on a full range of issues related to this topic.

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