

DEPARTMENT OF HEALTH AND HUMAN SERVICES
OFFICE OF DIRECTOR

ACTION REFERRAL

TO <i>Jacobs</i>	DATE <i>9-8-08</i>
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DIRECTOR'S USE ONLY	ACTION REQUESTED
1. LOG NUMBER <i>200138</i>	<input type="checkbox"/> Prepare reply for the Director's signature DATE DUE _____
2. DATE SIGNED BY DIRECTOR <i>Cleared 9/17/08, answers attached. ✓</i>	<input checked="" type="checkbox"/> Prepare reply for appropriate signature DATE DUE <i>9-17-08</i> <input type="checkbox"/> FOIA DATE DUE _____ <input type="checkbox"/> Necessary Action

APPROVALS (Only when prepared for director's signature)	APPROVE	* DISAPPROVE (Note reason for disapproval and return to preparer.)	COMMENT
1.			
2.			
3.			
4.			

RECEIVED

SEP 08 2008

Department of Health & Human Services
OFFICE OF THE DIRECTOR



College of Health
and Human Services
Department of Public Health
and Rehabilitative Services

Mail Stop #119
Toledo, Ohio 43606-3390
419.530.2743 Phone
419.530.4759 Fax
www.utoledo.edu

Dear Ms. Jacobs,

Recently you were mailed a questionnaire on SCHIP coverage and public schools. The purpose of this study is to examine the perceptions of all 50 state directors for SCHIP on working with public schools to help increase enrollment in SCHIP. **If you have returned the questionnaire, thank you very much (please disregard this letter). If not, we would greatly appreciate it if you would assist us.**

The questionnaire should take approximately 10 minutes to complete. Please return it in the self-addressed stamped envelope included.

We would like to remind you that all responses are confidential. We understand that your time is limited but appreciate your participation. Your participation is very important to the success of our study.

If you have any questions or concerns, please feel free to contact my graduate assistant, Megan Rickard by telephone at 419-530-5367 or email @ megan.rickard@utoledo.edu. Thank you for your time and professional courtesy with this study.

Sincerely,

Joy A. Price, MD, PhD
Clinical Associate Professor
University of Toledo
Mail Stop #119
2801 W. Bancroft
Toledo, OH 43606

James H. Price, PhD, MPH
Professor of Public Health
University of Toledo

SCHIP Coverage and Public School Districts

DIRECTIONS: Please complete each of the following items according to the instructions. Your responses will be confidential. Only group data will be made public.

1. Which of the following statements best describes how your agency works with school districts as a way to increase SCHIP enrollment? *(Please check one)*
- ☐ We have never thought about working with school districts as a way to increase SCHIP enrollment.
 - ☐ We have been talking about working with school districts as a way to increase SCHIP enrollment.
 - ☐ We are currently planning to work with school districts within the next year as a way to increase SCHIP enrollment.
 - ☐ We started working with school districts as a way to increase SCHIP enrollment about a year ago.
 - ☐ We started working with school districts as a way to increase SCHIP enrollment more than a year ago.
 - ☐ We used to work with school districts as a way to increase SCHIP enrollment but we no longer do so.

2. Does your agency work with school districts to increase SCHIP enrollment?
- ☐ Yes ☐ No ☐ Not Sure

If yes, what are the activities that you are involved with? *(Please check all that apply)*

- ☐ We have staff who go to schools to enroll students.
 - ☐ We have staff who train school staff to enroll students.
 - ☐ We conduct educational programs about SCHIP to teachers, staff and/or school administrators.
 - ☐ We offer incentives to school districts that help enroll students in SCHIP.
 - ☐ We work with our state department of education to help increase student enrollment in SCHIP.
 - ☐ We mail SCHIP applications/materials to school districts.
 - ☐ We provide school districts with promotional/informational materials about SCHIP eligibility for parents.
 - ☐ We conduct educational programs about SCHIP to the parents of students.
 - ☐ Other *(please specify)*
-
-

7. Do you perceive any barriers for your agency working with school districts to increase SCHIP enrollment?

☐ Yes

☐ No

☐ Not Sure

If yes, what do you perceive as barriers for your agency?

(Please check all that apply)

- ☐ There are too many school districts in our state to adequately work with all of them.
- ☐ Our SCHIP currently has an excellent system for enrolling students and does not need to work with school districts.
- ☐ We do not have mechanisms to work with school districts to enroll students in SCHIP.
- ☐ School districts do not want to play a role in helping students enroll in SCHIP.
- ☐ We are specifically prohibited from working with schools to increase SCHIP enrollment.
- ☐ We do not have the personnel to work with school districts in our state.
- ☐ We do not have the budget to work with school districts in our state.
- ☐ To wait until children are in school is too late for providing insurance coverage.
- ☐ Other *(please specify)*
-
-

8. Are there any advantages for your SCHIP agency in working with schools to increase SCHIP enrollment?

☐ Yes

☐ No

☐ Not Sure

If Yes, what do you perceive as advantages for your SCHIP agency?

(Please check all that apply)

- ☐ Assist SCHIP agency in meeting its mandate to cover all SCHIP eligible youth.
- ☐ Increases points of access to SCHIP eligible youth.
- ☐ Increases the ability of state agencies to identify SCHIP eligible youth.
- ☐ More cost-effective means of identifying SCHIP eligible youth.
- ☐ More cost-effective means of covering SCHIP eligible youth.
- ☐ Saves the state agency SCHIP dollars.
- ☐ Reduces the workload of SCHIP agency staff.
- ☐ Other *(please specify)*
-
-

9. About how many school districts do you work with to help enroll children in SCHIP? _____

10. We work with some preschools (e.g. Head start, private preschools, preschools linked with public schools) in the state as a way to increase SCHIP enrollment.

☐ Yes

☐ No

☐ Not Sure

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 - ☒ We mail SCHIP applications/materials to school districts.
 - ☐ We provide school districts with promotional/informational materials about SCHIP eligibility for parents.
 - ☐ We conduct educational programs about SCHIP to the parents of students.
 - ☐ Other *(please specify)*

11. All children should be required to have health insurance.

- ☐ Strongly Agree
☐ Agree
☐ Slightly Agree
☐ Unsure
☐ Slightly Disagree
☐ Disagree
☐ Strongly Disagree

Do not know

Demographic and Background Characteristics of Respondents

1. What is your sex?

- ☐ Female
☐ Male

2. What is your race/ethnicity?

- ☐ African American
☐ Asian
☐ Hispanic
☐ White
☐ Other (please specify) _____

3. What is your highest level of education?

- ☐ Bachelor's degree
☐ Master degree
☐ Specialist degree
☐ Doctoral degree (EdD, PhD, MD, JD, etc.)

4. How many years (full-time) have you served as the Director of SCHIP? 2 yrs.

5. Approximately how many SCHIP eligible students (covered and not currently covered) are in your state? *As of budget!*
We have 32,314 children ages 0-18 in our SCHIP program. We have 3033 children 0-18 in our separate SCHIP program.

6. Approximately what percentage of SCHIP eligible students in your state are covered? 100 %

7. How is your state CHIP program structured? (Please check one)

- ☐ Medicaid expansion (SCHIP funds allow eligible children into Medicaid)
☐ A separate SCHIP program
☒ Combination SCHIP/Medicaid program

Please see
Thank you for your assistance!

*Kevin had many
SCHIP kids we share at last report.*

Theresa

From: Kevin Rogers
To: Lena Girgis
Date: 9/17/2008 10:08 AM
Subject: Re: SCHIP numbers

These are the breakdowns I have:

1 - 5: 5945
6 - 12: 21787
13 - 18: 15427

Do these numbers include HCK? UD

*21787
15427

37214*

>>> Lena Girgis 9/17/2008 9:56 AM >>>
Thank you! I'm sorry, I know you all are busy.

>>> Kevin Rogers 9/17/2008 9:55 AM >>>
Oops. Let me see what I have.

>>> Lena Girgis 9/17/2008 9:44 AM >>>
I'm sorry, but Alicia's survey is due tomorrow. Is there anything I can help do to get these numbers, or someone else I should ask? Thanks.

Don't shoot me...Alicia is answering a survey, and she just re read the question. Do you have these broken down by age? We need students, and she asked for the closest thing you can get to student age...5 or 6 maybe? Thank you.

>>> Kevin Rogers 9/12/2008 1:35 PM >>>
OK, the most recent number I have from the CMS 64 reports is for 7/1/08, for quarter ending 6/30/08. This is a preliminary number for this quarter, which will be re-run on 10/1 to capture retros. The preliminary number for quarter ending 6/30/08 for SCHIP Expansion is 42,327. I am not sure who is providing the HCK number, but I suppose we can provide both the number that would be for 7/1 and also give them the 9/08 number and say the next expansion number will not be available until the report runs in October.

>>> Michael Jones 9/12/2008 11:25 AM >>>
Steve is out of the office today, Laurel do you have the most recent version that Steve has produced for HCK?

>>> Michael Jones 9/12/2008 11:15 AM >>>
Steve,

Can you provide the most recent version of our HCK figures? Steve is our "keeper" of HCK figures since he does the reconciliation with Maximus.

I will see what I can find out about what is the best source of the regular SCHIP figures.

>>> Lena Girgis 9/12/2008 11:03 AM >>>

Jeff needs the most recent data on the number of regular SCHIP kids as well as the number of kids enrolled in HCK. He told Inglis that he would try to get him an answer today. Please let me know if there is anything I can do to help. Thanks.

Lena A. Girgis
Medicaid Eligibility & Beneficiary Services
SCDHHS
1801 Main Street
Columbia, SC 29201
(803) 898-2502
(803) 255-8235 FAX

PAYMENT CATEGORY	+MAJOR GROUP	0 - 18	19 - 64	65+	UNKNOWN	TOTAL
10 MAO (NURSING HOME)	ED	3	1,662	9,942	0	11,607
11 MAO (EXTENDED/TRANSITIONAL)	F	19,281	13,087	2	0	32,370
12 OCWI (INFANTS)	PW&I	36,269	0	0	20	36,289
13 MAO (FOSTERCARE/ADOPTION)	F	1,161	265	0	0	1,426
14 MAO (GENERAL HOSPITAL)	ED	11	21	14	0	46
15 MAO (WAIWERS-HOME&COMMUNITY)	ED	198	3,843	4,002	0	8,043
16 PASS ALONG ELIGIBLES	ED	0	34	1	0	35
17 EARLY WIDOWS/WIDOWERS	ED	0	2	0	0	2
18 DISABLED WIDOWS/WIDOWERS	ED	0	1	0	0	1
19 DISABLED ADULT CHILDREN	ED	0	51	0	0	51
20 PASS ALONG CHILDREN	ED	16	4	0	0	20
31 TITLE IV-E FOSTER CARE	F	2,862	204	0	0	3,066
32 AGED, BLIND, DISABLED (ABD)	ED	46	26,343	23,797	0	50,186
33 ABD NURSING HOME	ED	3	296	739	0	1,038
40 WORKING DISABLED	ED	0	76	0	0	76
51 TITLE IV-E ADOPTION ASSISTANCE	F	3,972	332	0	0	4,304
54 SSI NURSING HOME	ED	26	782	609	0	1,417
57 KATIE BECKETT/TEPRA	ED	3,036	21	0	11	3,068
58 FAMILY INDEPENDENCE SANCTIONED	F	0	0	0	0	0
59 LOW INCOME FAMILIES	F	82,761	50,276	16	5	133,058
60 REGULAR FOSTER CARE	F	3,512	143	0	0	3,655
70 REFUGE ENTRANT	F	19	28	1	0	48
71 BREAST AND CERVICAL CANCER	ED	0	827	14	0	841
80 SSI	ED	22,202	61,423	22,117	5	105,747
81 SSI WITH ESSENTIAL SPOUSE	ED	0	1	0	0	1
85 OPTIONAL SUPPLEMENT	ED	0	672	933	0	1,605
86 OPTIONAL SUPPLEMENT & SSI	ED	0	1,644	846	0	2,490
87 OCWI PREGNANT WOMEN/INFANTS	PW&I	1,906	20,969	0	1	22,876
88 OCWI PARTNERS FOR HEALTHY CHN	CH	227,730	1,578	0	15	229,323
89 SCHIP - EXPANSION	CH	0	0	0	0	0
91 RIBICOFF CHILDREN	F	0	0	0	0	0
Total Regular Medicaid		405,014	184,585	63,033	57	652,689
48 SIMB2 (OI)		0	0	0	0	0
50 QUAL. DISABLED/WORKING INDIV.		0	0	0	0	0
52 SIMB		0	0	0	0	0
55 FAMILY PLANNING WAIVER		2,354	47,254	0	0	49,608
90 QUALIFIED MEDICARE BENEFICIARY		0	0	0	0	0
92 SPAP - GAPS (formerly Silvercard)		0	0	32,456	0	32,456
99 SCHIP - Healthy Connections Kids		2,029	3	0	0	2,032
E EMERGENCY SERVICES		21	235	0	0	256
I INMATE SERVICES		0	81	58	0	139
C EMERGENCY/INMATE SERVICES		0	2	0	0	2
D DJT INMATE SERVICES		3	0	0	0	3
J DJT INMATE EMER IP SERVICES		0	0	0	0	0
P MISC. INMATE SERVICES		0	2	0	0	2
A MISC. INMATE EMER IP SERVICE		0	0	0	0	0
Total limited Services		4,407	47,577	32,514	0	84,498
Grand Total		407,392	232,159	63,091	57	702,699
MAJOR COVERAGE GROUPS (Regular Medicaid Only)						
Low Income Families (F)		113,568	64,335	19	5	177,927
Elderly/Disabled (ED)		25,541	97,703	63,014	16	186,274
Pregnant Women and Infants (PW&I)		38,175	20,969	0	21	59,165
Children (CH)		227,730	1,578	0	15	229,323
Emergency and/or Inmate (E, I or C)		21	318	58	0	397
DJT Inmate Services (D,J,P,A)		3	2	0	0	5

+ - Elderly/Disabled = ED; Family = F; Children = CH; Pregnant Women and Infants = PW&I