

**Maximizing Enrollment for Kids**  
Making Medicaid and SCHIP Work

Maximizing Enrollment Self Assessment Toolkit Stakeholder Questionnaire:  
Frontline Eligibility Staff

**Introduction:** Your state has begun to assess its Medicaid and CHIP enrollment and retention policies and procedures using the Maximizing Enrollment self-assessment toolkit. The toolkit includes multiple components, one of which is this questionnaire. By providing answers to these questions you are helping your state’s Medicaid and CHIP program administrators learn about your unique experiences with the current systems for enrolling and retaining children, and about changes you think could improve enrollment and retention of eligible children.

**Section I. Application Processes for Medicaid/CHIP Enrollment**

1. Please describe, briefly, your role in the application process.
2. When parents come to your office, do they generally come for health insurance, or another benefit (e.g., TANF, Food Stamps)?
  - 2.1. If they come for another benefit, do you always offer them the chance to apply for health insurance too?
  - 2.2. Are most parents interested in health insurance?
    - 2.2.1. If not, why not?
3. When parents have tried to fill out the application in advance, or when you are filling it out with them, are there particular questions that are often hard for them to answer?
  - 3.1. Which ones?
4. Do parents usually come to your office knowing what documentation they need to show?
  - 4.1. Do they bring the right information?
  - 4.2. Which types of documentation do parents seem to have the most difficulty providing?
5. When parents don’t have the information they need, what usually happens?
  - 5.1. Do they usually return with it, or are many applications never completed?
  - 5.2. Do you allow self-attestation if some documentation is missing?

**Maximizing Enrollment for Kids**  
Making Medicaid and SCHIP Work

- 5.3. Can you search for information online for them?
- 5.4. What kind of assistance can parents get specifically related to identity or citizenship documentation for their children when they don't have it?
6. How long do parents typically spend enrolling their child (from the time they arrive here, until they leave, taking into account multiple trips, if needed)?
7. If a submitted application is later found to be missing required information, what steps do you take to obtain the information from the family once they have left your office?
  - 7.1. Do you send a letter, make a call?
    - 7.1.1. About how many contacts would you typically make before giving up?
  - 7.2. Are you generally successful in retrieving the missing information?
    - 7.2.1. Why or why not?
8. Do you track the number of completed and incomplete applications or incomplete applications that are denied?

***Application Languages***

9. If a parent needs an application in another language, can they get it at your location?
  - 9.1. In which languages do you have applications available at this location?
10. Are there other languages in which some parents need an application that you are unable to provide for them?
  - 10.1. If so, which ones?
11. If a parent needs application assistance, in what languages can the staff provide assistance at this location?
  - 11.1. Is assistance available during all open hours, or just some of the time?

**Maximizing Enrollment for Kids**  
Making Medicaid and SCHIP Work

- 11.2. What do you do if there is no one available to provide application assistance to a parent in their native language?
12. Are there other languages in which some parents need application assistance that you are unable to provide for them?
  - 12.1. Is so, which ones?

***Perspective of Parents in Applying for Children's Coverage***

13. Do you think parents feel comfortable coming to this location to apply for coverage for their children?
  - 13.1. Why or why not?
  - 13.2. Do you think some parents are fearful about asking for insurance for their children?
    - 13.2.1. If so, why?
14. In general, do you think parents feel comfortable asking for help from eligibility workers?
  - 14.1. Are there changes your program could make that would make it easier or more comfortable for parents to seek assistance from eligibility workers?

***Renewal Process***

15. Please briefly describe your role in the renewal process.
  - 15.1. For the parents who come to your office to renew, how is a renewal initiated?
  - 15.2. Do you contact parents whose children's coverage must be recertified, or is that done from a central location?
16. If parents have received a letter about renewal, do they generally understand the renewal instructions, or are there some parts of the renewal process they find confusing?
  - 16.1. What confuses them?

**Maximizing Enrollment for Kids**  
Making Medicaid and SCHIP Work

17. Do parents have to document income at renewal?
  - 17.1. Will you accept self-declaration?
  - 17.2. Do you have a way to look up the parent's income?
18. If the parent does not respond to a renewal letter, do you attempt to contact them by phone?
  - 18.1. Is so, does that usually work?
  - 18.2. Do you track rates of families you are able to reach?
  - 18.3. Do you track rates of renewal?
19. Do you work with any community groups to help you contact parents?
20. Are "off-cycle" renewals allowed, where enrollees may renew through another contact with the state or at a provider or community-based organization prior to their scheduled redetermination date?
  - 20.1. If so, please describe how this works.
21. Can you think of ways to make the renewal process work better for parents?

**Section II. Medicaid/SCHIP Coordination**

22. In what ways do you coordinate Medicaid and CHIP applications within the same family?
  - 22.1. Do you do any of the following?
    - 22.1.1. Synchronize renewal of all children in a family, even if they entered the programs on different dates?
    - 22.1.2. Review eligibility for both programs?
    - 22.1.3. Other? Please describe.
23. If a child appears to be eligible for a different program at renewal, what steps do you take to facilitate the transfer?

**Maximizing Enrollment for Kids**  
Making Medicaid and SCHIP Work

- 23.1. If an applicant for one program appears to be eligible for the other, can the application be transferred and fully processed without contacting the family, or is additional information needed?
24. Are you able to coordinate renewal dates with TANF and/or food stamps for eligible families?
25. What suggestions do you have for making it easier to coordinate coverage in a family that has members on both Medicaid and CHIP?

***Information Systems Integration and Coordination***

26. Is information shared between Medicaid and CHIP eligibility systems?
  - 26.1. If so, what information is shared electronically; what is shared manually?
27. Are staff and information systems “integrated” or well-coordinated between Medicaid and CHIP?
  - 27.1. Where does the integration or coordination work well?
  - 27.2. Where does integration or coordination need to be improved?
    - 27.2.1. Are Medicaid staff “co-located” on CHIP eligibility vendor sites?
    - 27.2.2. Are eligibility policies and procedures consistent between Medicaid and CHIP (where possible)?
28. Can you briefly describe some key ways that your program has used information technology to facilitate data sharing, improve the speed of processing applications, reduce errors, or otherwise overcome coordination barriers to enrollment and renewal?
29. Do you feel that you consistently get the kind of information you need to do your job effectively?
  - 29.1. What kinds of information or data would help you, your staff, or colleagues reduce administrative barriers to enrollment and renewal more effectively?
30. Are there any additional problems you are concerned about regarding the interface between the eligibility system and your state’s Medicaid Management Information System (MMIS)?

**Maximizing Enrollment for Kids**  
Making Medicaid and SCHIP Work

30.1. If so, please describe.

***Staff Training, Workload and Performance Review***

31. How long have you been an eligibility worker?

32. How effective was the training you received when you became an eligibility worker?

32.1. In what ways do you think the training could be improved?

33. Do you feel you get the training and guidance you need to keep up to date with program changes regarding enrollment and recertification?

33.1. Are there policies or procedures that you find particularly difficult to follow?

33.2. Where or who do you turn to if you have a problem or question about a case (e.g., online assistance, codebook, supervisor, colleague)?

34. Has your training included information or seminars about the importance of health insurance to low-income people, the challenges that low-income families face?

34.1. If so, did you find this helpful?

35. How would you describe your caseload? Would you say it is about right, too heavy, or could be larger?

36. Do you have a target caseload you are expected to maintain?

36.1. Is so, do you think it is reasonable?

37. Are you and other eligibility workers evaluated based on particular standards or expectations?

37.1. Caseload targets, number of eligible children you enroll, number of eligible children you retain at recertification?

38. Do you receive any incentives for enrolling or retaining eligible children?

38.1. Is so, please describe.

**Maximizing Enrollment for Kids**  
Making Medicaid and SCHIP Work

39. Do you receive any other kinds of recognition when you do your job well?
40. Are you or your colleagues encouraged to share ideas about how to improve the enrollment or renewal process?
- 40.1. If you had an idea, is there someone you could talk to who would listen and follow up on it?

***State Agency Culture***

41. What would you say is the overall “message” or philosophy from program leadership about enrollment and retention?
- 41.1. What words would you use to describe the “atmosphere” of your office?
42. Have you noticed any particular changes made in your office in recent years to make parents feel more comfortable about enrolling or renewing their children’s coverage, that is to make the enrollment and renewal processes easier and friendlier for parents?
- 42.1. For example have any of the following changes occurred?
- 42.1.1. Changing the language agencies use, such as describing individuals applying and enrolling to positive terms like “customers” that stress a culture of service?
  - 42.1.2. Conducting “internal marketing” to agency staff to promote the goal of enrolling eligible families, rather than emphasizing compliance with rules and processing cases?
  - 42.1.3. Adding incentives or changing expectations for eligibility workers to reflect a stronger emphasis on enrollment or retention?
  - 42.1.4. Other consumer (parent) satisfaction surveys, focus groups, outreach programs, brochures or other written communications?
43. Are there any other recent improvements your program has made to either expand children’s eligibility, or simplify enrollment or renewal that you think have been especially helpful to parents, or made your job easier to do?
44. What kinds of changes do you think would most help you do your job more easily as far as helping parents enroll and keep their eligible children on public coverage?