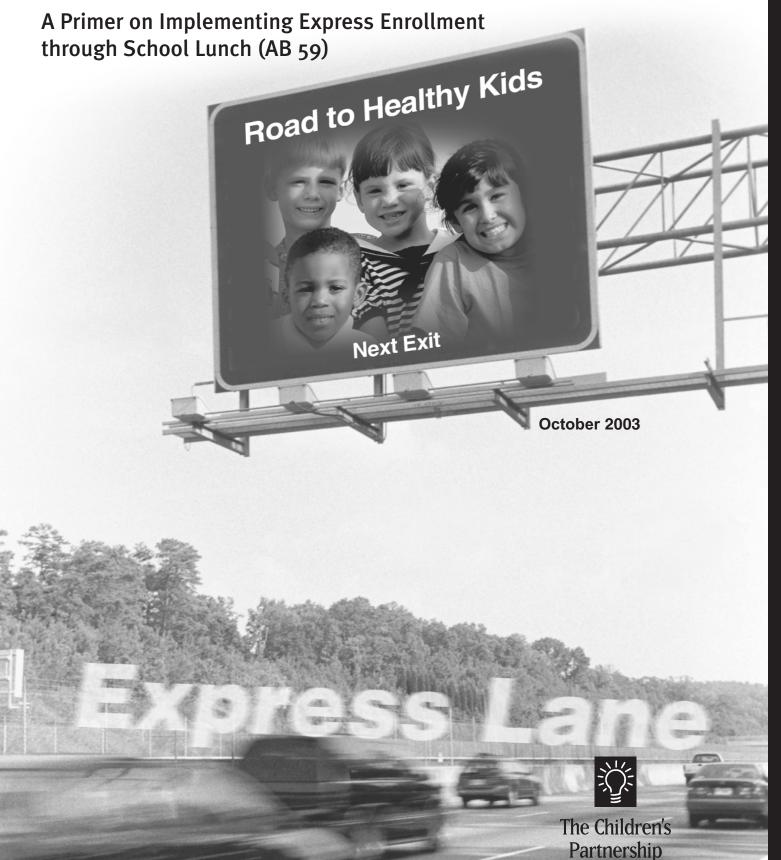
Putting Children on the Express Lane to Health Insurance



Funded by The California Endowment

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A Primer on Implementing Express Enrollment through School Lunch (AB 59)

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Introduction

With the statewide implementation of Express Enrollment (EE) in July 2003 an important new opportunity for California's one million low-income, uninsured children became available. EE is a state program that allows uninsured children to enroll in Medi-Cal if they receive free school meals through the National School Lunch Program. Under the program, children in a participating school district can apply for Medi-Cal at the same time they complete a school lunch application, and receive temporary coverage while the state collects additional information to make a complete Medi-Cal determination. Children with incomes too high for Medi-Cal are also given the opportunity to enroll into Healthy Families.

EE addresses key barriers that keep uninsured eligible children from enrolling in California's public health insurance programs, Medi-Cal and Healthy Families: a lack of knowledge about the programs and complexity of the application process.² EE conquers these deterrents by:

- Targeting uninsured children where they are most likely to be found. Almost 70 percent (around 700,000) of California's low-income, uninsured children are in families that participate in the National School Lunch Program.³ In addition, because Medi-Cal and school lunch have similar eligibility rules, these targeted children are likely eligible for the health insurance program. Medi-Cal for children ages 1 to 5 extends up to 133% of the federal poverty level (FPL), and children ages 6-19 to 100% of the FPL, while free school meals eligibility for school-age children extends up to 130% of the FPL;⁴
- Streamlining the application and enrollment process for families. EE cuts down on the paperwork families have to submit by using the information on the school lunch application to make an initial determination of eligibility. Families never have to complete a full Medi-Cal application, or submit income documentation; and
- Making a systems change so there is a built-in enrollment process at schools. Building this infrastructure ensures that families will not have to search out Medi-Cal, it will come to them, and schools will have a more systemized way to conduct outreach and enrollment.

In its first year of operation, 2003-04, a handful of school districts have chosen to implement EE. Alum Rock Union Elementary (Santa Clara County), Fresno, Los Angeles, Redwood City (San Mateo County) and San Diego school districts, with funding from The California Endowment and The David and Lucile Packard Foundation, are planning to pilot Express Lane in 71 schools.

¹ Brown, Ponce, Rice and Lavarreda. (2002). *The State of Health Insurance in California: Finding from the 2001 California Health Interview Survey.* Los Angeles: UCLA Center for Health Policy Research.

² Stuber, Maloy, Rosenbaum and Jones. (2000). *Beyond Stigma: What Barriers Actually Affect the Decisions of Low-Income Families to Enroll in Medicaid*. Washington, D.C.: George Washington University Center for Health Services Research and Policy.

³ 1997 and 1999 National Survey of America's Families, calculations by The Urban Institute, 2002.

⁴ Fact Sheets on Medi-Cal and Healthy Families are available at www.childrenspartnership.org/expresslane/casl-sampledocuments.html and the school lunch program at http://www.childrenspartnership.org/expresslane/sl-about.html.

(See Addendum A for summaries of these school districts' programs.) The lessons learned from these participating school districts will help inform the efforts of school districts implementing EE in the years ahead.

About this Primer

This primer was written primarily for school districts that are considering or have already committed to launching an Express Enrollment program. However, it also includes important information about the EE process that would be useful to other stakeholders, including county staff, interested in the program. It includes four sections:

- How Express Enrollment Works provides an introduction to EE.
- **Getting Started: Questions to Consider** addresses key questions that school districts interested in implementing EE programs should consider before moving forward.
- A Step-by-Step Guide for Schools provides a description of the components needed for schools to implement EE.
- **The County Role** includes a description of the responsibilities county Medi-Cal offices have with EE.

Information within this primer pertains to the state regulations for Express Enrollment released in July 2003. Please note, however, that there could be additional policy changes made to the program. We encourage you to use the guide for planning purposes as the process described will serve as the core for any EE program. The Children's Partnership will update its Web site regularly with new information on the program. In addition, The Children's Partnership plans to release a more comprehensive and resource-intensive Express Enrollment Toolkit in 2004.

All documents and resources referenced in the primer are available on The Children's Partnership Web site at www.expresslaneca.info under the School Lunch Program. We have included the direct link where possible; however, you can also go directly to this page for links to all materials: Reference Guides, State Guidance, Local Models and Sample Documents and Forms.

About The Children's Partnership

The Children's Partnership (TCP) is a national nonprofit, nonpartisan organization that has been engaged in efforts to help connect low-income, uninsured children with health care coverage since 1993. With the help of key health advisors, TCP coined the term "Express Lane Eligibility" to describe the various strategies through which children could be expedited into health insurance programs by using other public programs. TCP has written seminal research on Express Lane and worked in California to ensure the successful implementation of the program. See www.expresslane.info for additional information.

How Express Enrollment Works

Assemblymember (now Senator) Gilbert Cedillo and sponsored by Los Angeles Unified School District and the County Welfare Directors Association. Governor Davis signed AB 59 into law in October 2001 and the legislation went into effect on July 1, 2003. To implement the legislation, the California Departments of Education (CDE) and Health Services (DHS) developed written guidance that led to the creation of EE. (This guidance is available at www.childrenspartnership.org/expresslane/casl-guidance.html.)

EE streamlines and expedites the way in which uninsured children who receive free school meals under the National School Lunch Program obtain Medi-Cal coverage. Under EE, families providing consent to share their child's school lunch application can enroll their children into Medi-Cal without completing a full Medi-Cal application or providing documentation of income, since the school lunch application and a supplemental one-page form meet these requirements. In addition, a child can get immediate Medi-Cal benefits based on their income alone to ensure they are covered while the application process is being completed.

It is an optional program for school districts although counties are required to implement the program if a school district decides to participate. A school district cannot implement EE without first contacting its county Medi-Cal office and establishing a Memorandum of Understanding between the two entities. Both schools and child development centers within a district that have chosen to implement EE can participate as long as they use the National School Lunch Program application. 5

The following describes the EE process in more detail. A flow chart on the EE process is also provided in Addendum B.

1. Families Apply for Medi-Cal at the Same Time They Complete a School Lunch Application.

- A school district choosing to participate in EE must make minor changes to the school lunch application. This includes adding a section that asks parents for consent to share the application with Medi-Cal.
- If a family provides consent and is eligible for <u>free</u> school meals their application will be shared with appropriate school staff.

⁵ Provisional schools that offer free meals through the school lunch program to all children in the school and do not require families to submit applications every year can only implement Express Enrollment in the year they collect applications.

2. Children can Immediately Receive Temporary Medi-Cal Benefits.

- School staff will review the free school meal applications with consent to determine if the children are income-eligible for Medi-Cal (referred to as "eligible for Express Enrollment" or "EE-eligible") The school will send all families a letter informing them of the outcome and, within five working days, forward all applications to the county Medi-Cal office.
- The county Medi-Cal office will check all applications to ensure the children are not already receiving Medi-Cal or Healthy Families. Within five working days of receiving the applications, the county will temporarily enroll into Medi-Cal children found eligible for EE and not already receiving Medi-Cal or Healthy Families.
- These children will receive a card in the mail that they can use to get free benefits from any doctor or clinic who accepts Medi-Cal.⁶ They will remain enrolled in the temporary Medi-Cal coverage until a full Medi-Cal eligibility determination is completed.

3. Families Complete a One-Page Follow-Up Form to Finalize the Eligibility Process.

- The county Medi-Cal office will send families, for which they received a school lunch application, a one-page form to collect the additional information required to complete a Medi-Cal determination. No income or state residency documents will be required since the school lunch application serves that purpose. However a family will need to provide the child's social security number and proof of immigration status if not a U.S. citizen.⁷
- Children who were not eligible for EE (either because their income was too high or information was missing) will also have their eligibility for Medi-Cal determined. On the follow-up form, the county Medi-Cal office will ask families to provide missing or additional information, such as whether they have deductions that Medi-Cal can use to lower countable income.
- Once the form is returned, children will be determined eligible for regular Medi-Cal or restricted Medi-Cal, which provides emergency and pregnancy-related Medi-Cal benefits to undocumented individuals. Those who do not return the form will be dropped from coverage.
- Children determined to have family incomes too high for Medi-Cal but are otherwise eligible for the program will be sent a Healthy Families application.⁸

⁶ Full Medi-Cal benefits include immunizations, doctor checkups, school physicals, dental exams, prescription drugs, and emergency and hospital care.

⁷ A child must be a U.S. citizen or lawful immigrant to receive full Medi-Cal benefits <u>after</u> the temporary period. If a child is not a U.S. citizen or lawful immigrant, he or she can get restricted Medi-Cal coverage.

⁸ This group of children should be relatively small. Since children eligible for Express Enrollment have already been determined income-eligible for Medi-Cal, the children potentially eligible for Healthy Families are those that are initially found not EE-eligible. Even in those cases once Medi-Cal's income deductions are applied, many of these families may be found to be Medi-Cal-eligible.

The process described should serve as the core of any EE program. However, since this is a new program, and we intend to learn a substantial amount from the first year of operation, there could be possible refinements in future years. In addition, there are some important aspects to the program that need improvement. These include:

- Allowing reduced-price children to participate in the program;
- Clarifying confidentiality rules to create a stronger link to Healthy Families and county health insurance programs. This would allow counties to forward the information collected of children found not eligible for Medi-Cal directly to Healthy Families or to the entity that determines eligibility for a county program; and
- Allowing schools to send sorted applications to the state's central application
 processing center (known as the Single Point of Entry or SPE) in order to decrease
 the school and county workload. Under this scenario, the SPE would be responsible
 for making the EE determinations and notifying families of such, along with
 conducting a computer search to determine if the child already receives Medi-Cal or
 Healthy Families.

As changes are made, The Children's Partnership will update its Web site. The following sections provide more detailed information on what Express Enrollment means at the school and county level.

Getting Started: Questions to Consider

Express Enrollment requires early planning and thorough preparation. In making the decision of whether to participate in Express Enrollment (EE) and setting up the planning structure there are some threshold questions a school district should consider. It is important to remember that the decision to participate lies with the school district, usually through the approval of the Superintendent and/or Board. A school can not participate on its own, although not all schools within a district must implement the program.

Q: Who Needs to Be at the Table?

A school district cannot implement EE on its own. A school district must establish a Memorandum of Understanding with its county Medi-Cal office before implementing the program. Besides these legal requirements, it is crucial for a school district to establish a strong working relationship with its county Medi-Cal office. The very first thing an interested school district should do is contact its county by using the state's list of county Express Lane contacts in Addendum C. Once the relationship is established, regular planning meetings are essential and should include school administrative, food services and health staff and county Medi-Cal administrative and front-line staff, along with community groups involved with health insurance and/or school lunch issues.

Q: What Resources are Required?

To implement Express Enrollment, schools may need additional staffing or resources. Because federal law prohibits districts from using school cafeteria funds for any work that falls outside the scope of the School Lunch Program, a district may need to designate staff outside of food services to run the program and handle application processing. Some districts already have health outreach workers in place that can serve this purpose. Under EE, schools are also permitted to contract out services to outside entities.

There have been no state funds allocated to schools to implement EE. A school requiring additional resources could explore funding opportunities through such places as private foundations and Proposition 10 commissions. However, a longer-term option available for schools is to "draw down" federal funds through the Medicaid Administrative Activities (MAA) program. Many school districts already utilize this funding source.

Under MAA, school districts can receive reimbursement for health and health insurance-related administrative activities, such as administrative support and outreach and enrolment activities, including EE activities. In California, Local Educational Consortia (LECs) have entered into contracts with the California Department of Health Services that enable school districts to receive these Medicaid Administrative Activities (MAA) funds. In order to receive MAA funding, a school district's outreach activities must be included in the LEC's MAA Claiming Plan. The Claiming Plan will need to identify the specific MAA activities and must be approved by the state and federal overseeing agencies. School districts should contact their regional LEC coordinators to begin this process. More information is available at www.dhs.cahwnet.gov/mcs/mcpd/MBB/ACSS.

Q: Which Schools Should Implement Express Enrollment?

Express Enrollment is a voluntary program for school districts. Schools or child development centers that use the school lunch application can participate but must do so through their districts. It is preferred that a district implement EE within all of its schools, although it is not required.

If a district wants to limit EE to certain schools they may want to consider applying specific criteria for choosing the schools, including enthusiasm to participate, rate of free school lunch students, staffing capabilities, and level of automation within the school lunch program. Some districts may decide to focus on child development centers or elementary schools where school lunch enrollment tends to be higher than middle or high schools. However, a district may want to focus on a middle or high school in an attempt to increase school lunch participation. The California Department of Education (CDE) has school demographic information and school lunch data available at www.cde.ca.gov/nsd/freereduced/index.html and www.ed-data.k12.ca.us/.

Provisional schools are not eligible for EE unless implementation occurs the year they collect applications. These schools have implemented a federal option that allows schools with large populations of eligible school lunch program children to offer free meals to all children and not require families to submit applications every year.

Schools within a district that do not implement EE should have other outreach and enrollment activities in place so children attending these schools also have the opportunity to obtain health insurance. One option is to include a Request for Information (RFI) with the school lunch application that parents can complete if they want the Department of Health Services to send them a Medi-Cal/Healthy Families application. Some districts use the form themselves to contact families and assist them with the application process. Any school using the RFI in this manner should ensure that the resources exist to follow-up with families. Information on the RFI is available through Consumers Union *Healthy Kids, Healthy Schools* project at www.healthykidsproject.org/strategies/school-lunch.html.

Q: Will Express Enrollment Have an Impact on the School Lunch Program?

The goal of Express Enrollment is to help low-income children receive health benefits, but not at the expense of children's nutritional needs. For that reason, there have been important protections put in place that protect the school lunch program. Understanding these protections are important in deciding whether to implement EE or not.

Only minimal changes to the school lunch application are required and the method by which families apply for school lunch for their children will not change. In addition, strong confidentiality protections are maintained for families. First, the process of using the school lunch application to make a Medi-Cal determination is *optional*. Information cannot be shared unless families provide their written consent. Second, when consent *is* provided, information can only be shared with the county Medi-Cal office for the purposes of determining Medi-Cal eligibility. The legislation that created EE clarifies that the information *cannot* be shared with any other governmental agency, including the Immigration and Naturalization Service (INS) or the Social Security Administration (SSA). The confidentiality protections also protect a family at the Medi-Cal office. Medi-Cal cannot provide information on outcomes of specific cases back to

the district. (This last piece makes follow-up to families by the schools difficult, see A Step-by-Step Guide for Schools, Step 8 for a discussion.)

As with the implementation of any new program, however, it is important to monitor its effect. This should include tracking whether there is any decrease in participation within the school lunch program. During this first year of implementation, each of the school districts that have implemented EE are tracking the school lunch program closely. In fact, some of the districts believe that increased outreach around EE could help increase school lunch participation.

Once you have made the decision to undertake EE, there are specific implementation steps a school should take. These steps are described in the next section.

A Step-by-Step Guide For Schools

Since Express Enrollment (EE) requires school districts to implement new procedures it is never too early to plan for implementation. The following provides step-by-step guidelines for schools to help in the process. The next section will describe the role of counties.

Step 1- Contact Your County to Establish a Memorandum of Understanding

Express Enrollment requires participating school districts and counties to develop a Memorandum of Understanding (MOU). An interested school district should immediately contact its county Medi-Cal office (Addendum C). The MOU should describe each entity's role, lay out the purpose and scope of the agreement and contain the confidentiality provisions that are required for information sharing. A template MOU from the state, along with several MOUs from each of the 2003-04 pilot sites, are available at

www.childrenspartnership.org/expresslane/casl-sampledocuments.html.

Step 2- Modify the School Lunch Application Package

Modifications must be made to the school lunch application and letter to households to ensure they include the information necessary for Express Enrollment. The California Department of Education (CDE) has issued an English and Spanish prototype child-only school lunch application. The English version is included in Addendum D. The Spanish version of the application and the English and Spanish prototype letter to households can be downloaded at www.childrenspartnership.org/expresslane/casl-sampledocuments.html. CDE-approved child and family applications from implementing school districts are also available. Applications should be submitted to CDE for approval.

Under EE the state requires specific information on the application: child's date of birth and relationship between the child and other people listed on the application. In addition, the application must include an optional Medi-Cal section that asks for the parent or guardian's consent to share information with Medi-Cal if the child is eligible for free school meals. The exact language on the prototype should be used for this section. The section must also include a question on income and household size for categorical eligible students.⁹

In addition to the school lunch application, the letter to households must include language describing the Express Lane process. For districts that do not use the prototype letter to households, they need to ensure the language describing the EE process is included somewhere in the application package.

Last, an informational flyer explaining the EE process and the Medi-Cal program should also be sent to families with the school lunch application. A sample Express Enrollment/Medi-Cal

⁹ Categorical eligible children are automatically income-eligible for free school lunch because they receive Food Stamps, CalWorks, the Food Distribution Program on Indian Reservations (FDPIR), or Kin-GAP and, as such, do not have to provide income information on the school lunch application.

Informational Insert in English and Spanish is available at www.childrenspartnership.org/expresslane/casl-sampledocuments.html.

Step 3- Conduct Outreach to Families

Education and outreach to families is vital to the program's success. Families should receive information about the new program, be encouraged to participate and provided with assistance in completing the application. Remember that most of the applications will be returned during the first few months of the school year, and this is when the outreach should be put into place.

Outreach materials should be written in simple, clear, and easy-to-understand language. They should be culturally sensitive, and presented in the languages best suited to the school's students and their families. If possible, the materials should include information on immigration issues, including "public charge". 10

Sample outreach materials, including a parent outreach poster and brochure in English and Spanish by The Children's Partnership, are available at www.childrenspartnership.org/expresslane/casl-sampledocuments.html.

Schools can disseminate information through existing channels of communication, such as parent newsletters or parent nights at designated schools. Schools should also investigate what role exists for additional school staff (specifically, teachers, school nurses, home health aides, and administrative staff) who are on the "front lines" and very often serve as the initial point of contact for parents and students on multiple issues. To further assist families, schools able to do so may want to explore establishing an information hotline for families to call with questions.

These outreach efforts should also be combined with outreach to those children who cannot participate in EE. Children who do not sign up for school lunch, such as high school students, or are not eligible for free school meals may still have family incomes that make them eligible for Medi-Cal or Healthy Families. Also, some families may not want to apply for Medi-Cal because a child is undocumented. 11 Those families should be referred to other available health insurance programs. For a list of health programs visit www.100percentcampaign.org/resources/publications/child-health-programs-02-12.htm.

Step 4- Train School Staff

Because this will be an entirely new procedure for school staff, school districts will need to develop thorough and concise training materials and develop a plan to conduct staff training. Staff may include designated EE staff, certified application assistors (CAAs), site principals, school nurses, school and district food services staff, and administrative staff. Teachers are particularly important to train since many times children return school applications to them and they are a trusted resource for parents.

¹⁰ "Public charge" is a determination made by immigration authorities to determine whether immigrants seeking to become legal permanent residents are likely to rely on government assistance as their primary source of support. By law, receiving Medi-Cal or school lunch will not affect a family's immigration status or create public charge problems.

¹ See footnote 6.

Sample training materials are available at www.childrenspartnership.org/expresslane/casl-sampledocuments.html.

Step 5- Certify the School Lunch Applications for Express Enrollment

The development and implementation of the Express Enrollment certification process falls under the purview of the schools. As mentioned, there are efforts to decrease schools' responsibilities under this process by having the state's Medi-Cal/Healthy Families processing unit (the Single Point of Entry) assume these activites. Until that time, a school must complete the following:

- When families return school lunch applications to a school, food service staff will make a school lunch eligibility determination according to standard existing procedures.
- Food service staff will then separate those that have been approved for free meals and contain parental or guardian consent and forward a copy to appropriate staff. ¹² In most cases, this staff will be located at the district level (although it is not required) so a process for sending the applications from the schools to the district must be established. Food service staff should maintain the original school lunch application with consent in the same manner they do regular applications, as allowed under the EE legislation (AB 59).
- Note: Currently confidentiality rules limit the ability of food service staff to forward reduced-price applications with parental/guardian consent. However, we encourage food service staff to contact these families to inform them that their applications could not be processed for EE and provide them with information on health coverage options.
- Designated staff at the district or school level will make an eligibility determination for EE into Medi-Cal, based on the child's age, immediate family size, and family income. DHS has developed guidelines for performing EE certification:

 www.childrenspartnership.org/expresslane/EE Kit for school staff.doc.
- Schools must send each family a notice of their child's EE eligibility certification. Templates in English and Spanish are available at www.childrenspartnership.org/expresslane/casl-sampledocuments.html.

Step 6- Transfer the School Lunch Applications to the County

Once a certification for Express Enrollment has been made, the school has five working days to forward the application to the county Medi-Cal office. A school district and county Medi-Cal office should implement a formal transmittal process. Schools that store their school lunch data in electronic form through school or district databases may want to develop an automated process for processing the applications and transferring them to the county.

If an electronic transfer is not possible, the district will want to put into place procedures for how to manually transfer the school lunch information. In most cases, the applications will be transferred from the district to the county, although a district may have chosen for school staff to

¹² As mentioned, because federal law prohibits districts from using school cafeteria funds for any work that falls outside the scope of the school lunch program, a district may need to designate staff outside of food services to handle the application processing.

certify applications for EE. Districts (schools) will want to make copies of the applications or if a school has a non-carbon reproducing application, tear off the appropriate sheet. Or they can maintain the information in a database. The transfer of applications can occur in a number of ways, such as in-person pick-up, overnight mail or by courier.

Step 7- Track/Monitor the Program

To monitor the effects of any Express Enrollment program and ultimately contribute to its success, school districts will want to closely track data elements and outcomes. This includes data on the total number of applications that were determined EE-eligible, not EE-eligible or could not be determined EE-eligible, and the total number of applications with parental consent. It is also important to monitor any effect EE may have on the school lunch program, specifically if more or less school lunch applications are completed and returned to the school with EE in operation.

Consumers Union, as part of their California-based *Healthy Kids, Healthy Schools* project, has developed a custom database application available free to schools that tracks health insurance outreach, enrollment, follow-up, and utilization. The database, called Healthy Tracker, could be used for EE purposes and can be obtained at www.healthykidsproject.org/toolbox/healthytracker/index.html.

Step 8- Conduct Follow Up to Families

Besides making sure families complete and return the school lunch application, a school district can play an important role in ensuring families complete the entire Medi-Cal determination process and utilize services. A key juncture for the program is when families are required to complete a follow up form for their child to maintain their Medi-Cal coverage after the temporary period. Families need encouragement to return the form and assistance in completing it. Because of confidentiality rules, the county Medi-Cal office can not tell a school district the outcome of a case, i.e. whether they have received the follow-up forms back from families. However, a school district does know which children it determined were Express Enrolled eligible and can conduct outreach to those children. At the very least, a school district should include information on how families can contact them for assistance on the notification letter that they are required to send to families (see Step 5).

Once a determination is made, additional outreach can be conducted. This includes talking to families about using their benefits. In addition, schools can provide information to families that were ultimately determined not eligible for Medi-Cal, either because of income or immigration status, on other health program options. (See Step 3 for additional information on outreach about health programs.)

The County Role

Under Express Enrollment (EE), county Medi-Cal offices have a crucial role to play. A school district cannot implement EE unless it forms a strong working relationship with its county Medi-Cal office. The following is a brief overview of what happens at the county Medi-Cal office once a school district has transferred applications. For more information, please read the Department of Health Services All County Welfare Directors Letter 03-35 at https://www.dhs.cahwnet.gov/mcs/mcpd/MEB/ACLs/PDFs/ACWDLs/2003ACLs/30s/c03-35.pdf.

→ Processing the School Lunch Applications

The county Medi-Cal office will designate which staff will receive the school lunch applications. Upon receiving them, the county will conduct a file clearance in the state's Medi-Cal Eligibility Data System (MEDS). Children who are already enrolled in Medi-Cal or Healthy Families will not be eligible for EE, and will be sent a letter informing them of their current enrollment status.¹³ The county will also attempt to group together children in the same family if the school district uses a child-only school lunch application.

Those children who were certified by the school as eligible for EE must be put into MEDS (under Aid Code 7T) within five working days of receiving the applications from the school. MEDS will then generate a Benefits Information Card (BIC) that will be sent to the family. A child can use the card to see any doctor or clinic that accepts fee-for-service Medi-Cal until a final determination is made.

Since most of the applications will be forwarded to the county during the first few months of the school year (September - November), the counties will experience a particularly heavy workload in these months.

→ Collecting Additional Information

Counties will send all families not already receiving Medi-Cal or Healthy Families an Express Enrollment Notice and Supplemental Form (MC 368) and Important Information for Medi-Cal Applicants (MC 368A) to notify the family of the child's EE status and to obtain additional information required to make a final Medi-Cal determination. The forms in English and Spanish are available at www.childrenspartnership.org/expresslane/casl-guidance.html. 14

Families are required to complete and return the MC 368, which requests information such as the child's Social Security number and child's citizenship status. Families do not have to provide income and California residency documentation since the school lunch application meets those requirements.

¹³ Other states that have used the school lunch application as a referral tool have found that many families will ask for coverage even though their children are already enrolled in the public health insurance program.

The MC 368 is currently designed for one child only which means a county may need to send more than one form to the same family if more than one of their children applied for EE through school lunch. The state is considering revising the form.

If a child is determined not eligible for EE or eligibility could not be determined, the county will process the school lunch application as a Medi-Cal application. In these cases the family will still be sent the MC 368 and MC 368A forms but it may need to ask for additional questions, such as income deductions. School lunch does not apply income deductions as Medi-Cal does and thus a child that is determined not eligible for EE might still be eligible for Medi-Cal once deductions are applied. Families will need to submit documentation supporting the deductions.

The MC 368 also asks families if there are other family members wishing to apply for Medi-Cal. If a request for a Medi-Cal eligibility determination for additional family members is made then families will be sent the Additional Family Members Requesting Medi-Cal form (MC321 HFP-AP) instead of a full application. However, family members will need to provide documentation of income.

→ Making the Final Medi-Cal Determination

When the family returns the MC 368 to the county, county staff will make a final determination and notify the family of this determination. Counties will attempt to reach the families if the forms are not returned within their standard 45-day processing timeline, which starts the day the county receives the school lunch application.

Children who are not eligible for regular Medi-Cal because of unsatisfactory immigration status will be placed in restricted Medi-Cal, which provides emergency and pregnancy-related Medi-Cal benefits. Counties are encouraged but not required to send families information on additional health programs if coverage is denied for immigration reasons. Children determined not eligible for regular Medi-Cal because their family income is too high will be sent a Healthy Families application. ¹⁵ ¹⁶ If the MC 368 is not returned, the county will deny all Medi-Cal benefits.

Families will be notified of the determination outcome. If the children are receiving the temporary Medi-Cal coverage and were not eligible for regular Medi-Cal, they will be provided with the date in which their full benefits end.

→ Tracking Express Enrollment: DHS is in the process of modifying its MEDS system to allow counties to track each application and EE outcome. Some counties may also want to maintain a separate database, depending on their system capability. This includes what school the application came from, the date of the EE determination, the date that the application was received by the county, and the number of applications that are ultimately denied due to active Medi-Cal status.

¹⁵ These children will be considered eligible for Medi-Cal with a share of cost. Medi-Cal share of cost offers health care coverage to those who have incomes too high to qualify for Medi-Cal but too low to cover health care costs. Under share of cost a recipient must accumulate a pre-determined amount of health care expenses each month before Medi-Cal begins to offer assistance. Families with both income too high for Medi-Cal and with unsatisfactory immigration status will be placed in restricted Medi-Cal with a share of cost.

¹⁶ See footnote 9.

Conclusion

The implementation of Express Enrollment creates a new and unique opportunity to decrease the number of uninsured children in California, while at the same time creating long-term government efficiencies. However, because it is a new program, a number of systems must be built and relationships formed for its successful implementation. While this will require time and planning, the outcome will have a lasting impact on the health of California's children. We hope this primer helps to make this process easier for stakeholders.

Appendix A: 2003-04 School District Pilots

The following school districts and counties are implementing Express Enrollment during the 2003-04 school year. The California Endowment (TCE) and The David and Lucile Packard Foundation have committed significant funding to the sites. In total, 71 schools with almost 35,000 students were selected to participate in the pilot project. Additional information on each pilot is available at www.childrenspartnership.org/expresslane/casl-models.html.

Alum Rock Union Elementary School District (ARUESD): ARUESD's pilot was implemented district-wide at all 25 of its elementary, middle and preschools. This includes 19 elementary schools and attached preschools, and six middle schools and attached preschools. Approximately 14,400 students are enrolled in ARUESD and 57% are eligible to receive free meals through the school lunch program. ARUESD estimates that 150 students will be enrolled into Medi-Cal as a result of its pilot effort.

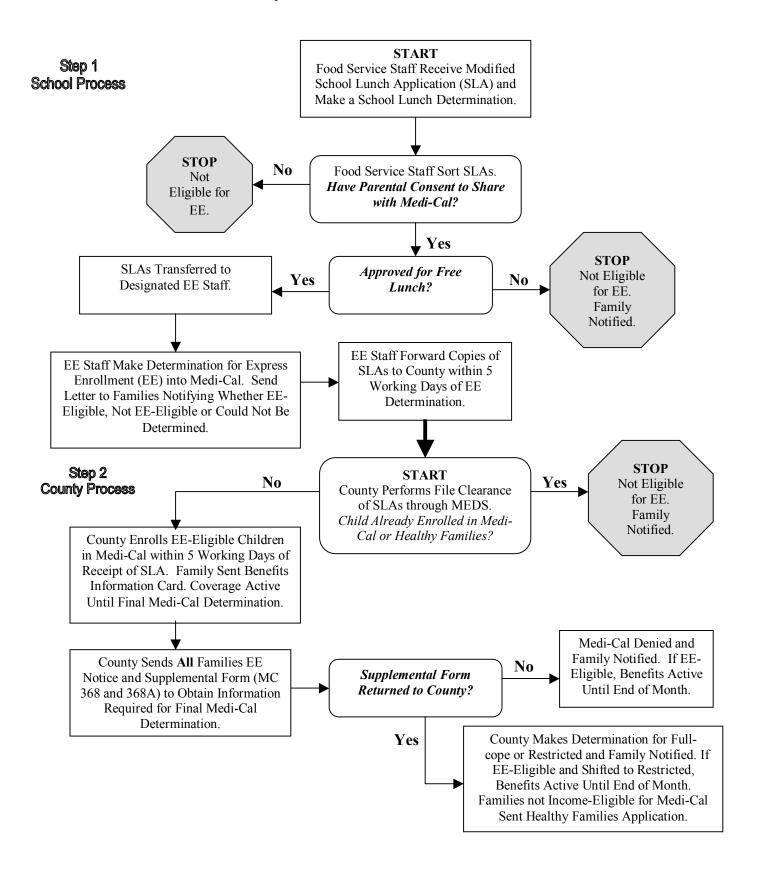
Fresno Unified School District (FUSD): Two elementary schools in Southeast Fresno (Easterby and Jackson) are participating in FUSD's pilot project. Approximately 1,600 students are enrolled in the pilot schools and 67% of them are eligible to receive free meals through the School Lunch Program. During the 2003-04 school year, FUSD expects to enroll approximately 700 students into Medi-Cal as a result of this pilot program.

Los Angeles Unified School District (LAUSD): A total of 19 sites spread throughout East Los Angeles were selected to take part in the pilot cohort. These are Lincoln High School, Multnomah and Sierra Vista Elementary Schools, Hollenbeck Middle School and 15 Early Education Centers. Approximately 8,400 students are enrolled in the schools and more than half are eligible to receive free meals through the school lunch program.

Redwood City School District (RCSD): RCSD's pilot is being implemented district-wide at all 16 of its pre K-8 schools. Six child development centers are also taking part in the pilot. RCSD has a student population of 8,183 and approximately 40% of these students are eligible to receive free meals through the school lunch program. During the 2003-04 school year, RCSD expects to enroll approximately 990 students into Medi-Cal as a result of this pilot program.

San Diego Unified School District (SDUSD): Four state preschools (Washington, Perkins, Jefferson and Kind) and five elementary schools (Johnson, Washington, Perkins, Jefferson and Rowan) were selected for the SDUSD pilot project. Three of the four preschools are co-located within the selected elementary schools, and approximately 2,276 students are enrolled in the elementary schools and preschools. Of these students, approximately 60% are eligible to receive free meals through the school lunch program. Approximately 400 students are expected to be enrolled into Medi-Cal during the 2003-04 school year.

Addendum B: Express Enrollment Flow Chart



Addendum C: Express Enrollment County Contacts

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Addendum D: Prototype Application For Free And Reduced Price Meals For The 2003-04 School Year

Please complete and return this application to the school. If you need help completing this form, call _____. Completing items marked with**, number 6, and 7 is optional and not required to apply for free or reduced price meals. However, if you complete the optional items, your child may be eligible to receive health coverage under the Medi-Cal program. 1. Enter the student's name and provide all required information. Child's Monthly Last Name First Name M.I. Date of Birth** School/Grade MO/DD/YR Income \$ Foster child: [1. If a foster child, list the child's personal monthly income: \$ to No. 5. (A social security number is not required with the adult household member's signature.) 3. If your child receives Food Stamps, CalWorks, FDPIR, or Kin-GAP benefits, enter the CASE . Go to No. 5. (A social security number is not required NUMBER: with the adult household member's signature.) ALL OTHER HOUSEHOLD MEMBERS: List all other household members, including yourself and any children, whether or not they have income. Indicate the amount and the source of all monthly income each household member received last month. If any amount last month was more or less than usual, enter the usual monthly income. Enter any income received last month by/for a child (other than applicant child) from full-time or regular part-time employment, SSI, or Adoption Assistance payments. **Household Members** Relationship to **Gross Monthly Income From All Sources** Child in No. 1** **Full Name** For example, **Gross earnings** Welfare, Pension, Any other from work child retirement. monthly parent, stepparent, before support, social income sister. deductions alimony security guardian, include all jobs payments friend, etc. 5. READ, COMPLETE, AND SIGN THIS SECTION I certify that all of the above information is true and correct and that all income is reported. I understand that this information is given for the receipt of Federal funds, that school officials may verify the information on the application, and that the deliberate misrepresentation of the information may subject me to prosecution under applicable State and Federal laws. Signature of adult household member completing this **Telephone Number:** Date: form: Social Security Number (or Printed name of adult household member signing this write "none" if you have no application: Social Security Number): Address:

Citv:

Zip Code:

State:

<u>California Education Code Section 49557 (a):</u> Applications for free and reduced price meals may be submitted at any time during the school day. Children participating in the National School Lunch Program will not be overtly identified by the use of special tokens, special tickets, special serving lines, separate entrances, separate dining areas, or any other means.

Privacy Act Statement: National School Lunch Act (Section 9) requires that, unless your child's Food Stamp, CalWORKS, KinGAP, or FDPIR case number is provided, you must include the social security number of the adult household member signing the application or indicate that the household member signing the application does not have a social security number. Provision of a social security number is not mandatory, but if a social security number is not given or an indication is not made that the signer does not have such a number, the application cannot be approved. The social security number may be used to identify the household member in carrying out efforts to verify the correctness of the information stated on the application. These verification efforts may be carried out through program reviews, audits, and investigations and may include contacting employers to determine income, benefits, contacting the State's Employment Development Department offices to determine the amount of benefits received and checking the documentation produced by household members to prove the amount of income received. These efforts may result in a loss or reduction of benefits, administrative claims or legal actions if incorrect information is reported.

6. RACIAL/ETHNIC IDENTITY: (Optional)
PLEASE CHECK ($ec{\prime}$) ONE OR MORE OF THE RACIAL CATEGORIES OF THE CHILD.
White Black or African American
Asian Native Hawaiian or Other Pacific Islander American Indian or Alaska Native
Is this participant Hispanic or Latino? Yes□ No□
7. MEDI-CAL BENEFITS: (Optional) If your child is eligible for free meals and you complete this section, we will share this meal application with the Medi-Cal program. Your local Medi-Cal office will contact you for more information to determine if your child is eligible for benefits. If your child already receives Medi-Cal benefits or you do not want Medi-Cal for your child, do not complete this section. You do not have to complete this section to apply for or receive free or reduced-price meals. This meal application will not be shared with the Medi-Cal program unless we have your signed consent. If you have any questions call
IMPORTANT: Questions on this application that are marked by ** must be answered to determine if your child can receive Medi-Cal benefits.
If you <u>did not</u> complete Section No.4, tell us how many immediate family members, including the child, are living in the household?, and what is the combined monthly income of the child and the birth/adoptive parent(s) living in the household? \$
IF MY CHILD IS ELIGIBLE FOR FREE MEALS, I agree to share the information on this meal application with Medi-Cal representatives for the purpose of applying for Medi-Cal benefits for my child. I understand that the information on the National School Lunch Program application is confidential and will not be shared with any other government agencies, except for the purpose of the administration of the Medi-Cal program. I certify that I am the parent/guardian of the child listed on this application. I declare under penalty of perjury under the laws of the State of California that the declarations and information on this application for Medi-Cal purposes are true and correct to the best of my knowledge and belief.
Signature of Parent/Guardian: Date:
Print the name of Parent/Guardian signing this section:
For Official Use Only:
Food Stamp/FDPIR/CalWorks categorically eligible free: [] Yes Household size: Total monthly income:
Free Reduced Paid Temporary: Free Reduced Price Until
Determining official: Date:
Final 4-8 Applial Optional.doc Developed and Approved Application by California Department of Education.

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