

Reaching Uninsured Children in Provisional Schools Through Express Enrollment Strategies

Express Enrollment (EE) is an optional program that allows school districts to streamline and expedite the Medi-Cal enrollment process for uninsured children who receive free school meals through the National School Lunch Program (NSLP). A school district must utilize the school lunch application in order to implement EE. However, in an effort to reduce paperwork for parents and school districts and to increase the number of children receiving free meals, some schools are not required to complete a school lunch application on a yearly basis. Instead federal provisions allow schools with a high percentage of children in low-income families to certify meal eligibility once over a multi-year period, depending on the school. Schools that have chosen to follow these rules are referred to as provisional status schools.

Provisional schools have a high concentration of low-income children who are likely eligible for Medi-Cal and, as such, are natural targets for EE implementation. Implementation of EE in these schools is limited by EE's reliance on the school lunch application as a means for connecting eligible children to Medi-Cal. This brief provides a roadmap of health outreach strategies school districts with provisional schools that are interested in implementing EE can employ within these high-need schools. It begins with an overview of how Express Enrollment works and the status of provisional schools in California.

How Express Enrollment Works

All schools districts in the state operating school lunch programs have the option to implement Express Enrollment across the district or any specific schools. Participating school districts must make a few changes to their school lunch application.

Under the program, families in a participating school can apply for Medi-Cal by authorizing the use of their child's school lunch application for a Medi-Cal eligibility determination. School districts review the applications of children eligible for free school meals and provide a certification of eligibility for Medi-Cal on the basis of the information contained in the application. Once the applications of children eligible for coverage are transferred to the county, the children are provided with temporary Medi-Cal coverage. Children retain this coverage until further information is gathered through a one-page form and a full Medi-Cal eligibility determination can be completed. Income and residency is not collected as the information stated on the school lunch application serves that purpose. A child not eligible for Medi-Cal because of immigration status or income is forwarded to Healthy Families or a local/county program (most commonly called Healthy Kids), as appropriate.

The program began July 2003. By the 2005-06 school year, 10 school districts in nine counties implemented EE in a total of 115 schools.¹ More information on the program can be found at <http://www.expresslaneinfo.org/schoollunchtoolbox>.

Provisional School Lunch Schools

The National School Lunch Program provides free or reduced-price meals to students. Schools must apply to participate in the program. As of 2006, over 90% of California's schools participated in the NSLP. Families in participating schools must notify students of the program and utilize a state-approved application, following federal guidelines, for making an eligibility determination. Children with household incomes at or below 130% of the federal poverty level are eligible for meals at no cost and those with household incomes between 130% and 185% of the federal poverty level can receive meals at a reduced price (but no more than 40 cents). Children from families with incomes over 185 percent of poverty can still receive meals but they must pay full price, as determined by the school. School districts operating programs receive cash reimbursements from the federal government for free, reduced price and

paid meals. The school district must provide daily counts of the meals by type in order to receive the reimbursement.

Under federal regulations, a school district can limit their administrative responsibilities under the program by applying for provisional status within schools. There are three types of provision status:

Provision 1

- Schools can certify children eligible for free meals once every two consecutive school years.
- 80% of the children in the school must be enrolled in free or reduced price meals.
- Households, other than those eligible for free meals, must still be provided with a meal application to apply for benefits.
- Schools continue to record daily counts of free and reduced-price meals serviced as the basis for calculating reimbursement claims.

Provision 2

- Schools operate on a four-year cycle and only collect applications in the first year, or base year.
- Schools must offer meals to all participating children at no charge during the four-year period.
- The reimbursement rates for all years are based on the percentage of free, reduced-priced, and paid meals counts by month made in the base year.
- At the end of the four-year period, the State may approve four-year extensions if the income level of the school's population has remained stable.

Provision 3

- Schools also operate on a four-year cycle and collect applications in a base year (not necessarily the first year).
- Schools must serve meals to all participating children at no charge during the four-year period.
- The reimbursement rates for all years are based on the level of federal support paid during the last year, or base year, in which eligibility determinations and meal counts by type were made.
- Reimbursement over the four years is adjusted to reflect changes in enrollment and inflation.
- At the end of the four-year period, the State may approve four-year extensions if the income level of the school's population has remained stable.

California Food Policy Advocates estimates that in 2004-05 (the latest data available) 969 schools in California had provisional status, representing roughly 11% of all schools participating in the NSLP. Of those schools, 92% had Provision 2 status with a limited number having Provision 1 (3%) or Provision 3 (5%) status. The majority of these provisional schools (62%) were concentrated in Southern California.

Long-Term Growth of Provisional Schools

Provision 2 and 3 status, in particular, offers many advantages to school districts such as simplifying application processing and paperwork, streamlining meal counts for reimbursement purposes, decreasing administrative costs, and promoting good nutrition by increasing participation in school meals. There are also administrative savings for a school district operating provisional schools. For these reasons, in 2004-05 the number of provisional schools in California increased about 33% from the prior school year.

A primary consideration for whether a school applies for provisional status is whether a school can meet the financial costs required to operate and sustain a program. Provision 2 and 3 schools are required to provide meals at no charge to all participating students, even those eligible for reduced-price meals, at a reimbursement rate determined in a base year. The schools must pay the difference between federal reimbursement and the cost of providing all meals at no charge. The money to pay for this difference must be from sources other than federal funds.

Essentially, to make it cost-productive for a school to undertake provision status, it must have a high percentage (at least 60% to 75%) of children eligible for school lunch. School districts that participate usually choose specific schools within the district with high percentages of low-income children in which to implement since implementation across the district is typically not cost-effective. Although, administrative savings of operating provisional schools can help offset the cost differential future growth will depend on whether implementation is economically advantageous.

Health Outreach Options in Provisional Schools

Schools are a primary target for finding uninsured children and the school lunch program through EE is an important option available for providing outreach and enrollment to these children. The Urban Institute estimates that 56% of California's uninsured children are in families that participate in school lunch.² Although provisional schools do not collect school lunch applications on a yearly basis, there are options available so that they can participate in EE, in addition to implementing other health outreach strategies. Provisional schools represent some of most high-need schools in the state and should be critical partners in efforts to increase health insurance coverage among California's uninsured children.

To assist in these efforts, the following provides a list of possible health outreach strategies that can be employed by provisional schools:

- 1. Implement EE During the Base Year**

As part of an outreach and enrollment strategy, school districts could implement EE in provisional status schools in the base year during which standard school lunch applications are collected. EE does not need to be implemented yearly to be effective. It can function optimally in some districts by rotating between schools within a district, which is conducive to how provisional schools operate.

- 2. Piggyback on Provisional Outreach Efforts to Increase Health Insurance Education**

Schools applying for provisional status usually conduct extensive outreach during the base year and the year prior in order to increase the number of children in school lunch and thus maximize reimbursement rates. School districts can piggyback on these outreach efforts to educate families about health insurance options, and, if implementing EE in the base year, to provide program information on how to participate. On the flip side, since school districts implementing EE have seen an increase in school lunch participation, a school district could use EE in the prior year to increase enrollment for provisional status purposes.

- 3. Implement Other Health Strategies in the Non-Base Years**

In non-base years a school should not feel limited in providing health outreach to its students. One option is to hand out Medi-Cal/Healthy Families and local county program applications or Request for Information (RFI) forms to students through back-to-school packets, school lunch notices or with other materials sent to families. The RFI is a one-page form that asks a parent's consent for a health outreach worker to contact them to assist them with an application. Another option is to identify uninsured students through information collected by students at the beginning of the school year and providing follow-up assistance to these students. These types of strategies work optimally when schools have the resources to conduct follow-up, contacting families and assisting them with the enrollment process. Schools may also choose to partner with community-based organizations or local coalitions that can assist families in enrolling their children in a health insurance program. Direct assistance to students completing applications has been shown to have a high rate of success. (See below for information on where to find out about other health outreach strategies.)

4. **Assess the Needs of Your Students**

To best ascertain what outreach efforts would work in a provision school, it is important to understand the targeted population. Some school districts have found that since many of the children in a provision school are at the lower income level, they might already have Medi-Cal though their participation in other public programs such as Food Stamps or TANF (Temporary Assistance for Needy Families). If a school has a high concentration of Medi-Cal enrollees, then the school will want to focus more on strategies to connect uninsured children to other programs, like Healthy Kids, that might be more effective than EE. Other strategies include on-site assistance, outreach through a school clinic and health fairs, etc. Sending a health insurance survey to parents with other school materials might help to assess the number of uninsured children at the school and develop a targeted outreach strategy.

For More Information

- ▶▶ The Children's Partnership Express Enrollment Web Site
<http://www.expresslaneinfo.org>
This site contains extensive information on Express Enrollment, including a school lunch toolbox to help school districts implement EE. Or please call 310-260-1220 for more information.
- ▶▶ Consumers Union Healthy Kids, Healthy Schools Project
<http://www.healthykidsproject.org/>
Consumers Union has developed an extensive catalog of information, manuals and tools on school-based health outreach strategies. You can also find a sample health insurance survey and RFI.
- ▶▶ USDA Food and Nutrition Services
http://www.fns.usda.gov/cnd/Governance/prov-1-2-3/provision1_2_3.htm
The USDA is the federal department that manages the school lunch program. See their site for information on provisional schools.
- ▶▶ California Department of Education (CDE)
<http://www.cde.ca.gov/ls/nu/sn/nslp.asp>
CDE oversees the school lunch program in the state. Their Web site contains data, and general information on the school lunch program.
- ▶▶ California Food Policy Advocates (CFPA)
<http://www.cfpa.net>
CFPA is a California-based advocacy organization that works on nutrition services programs, like school lunch. They have a wealth of information on school lunch and provide assistance to school districts wishing to become provisional schools.

¹ Alum Rock Elementary, Santa Clara County; Del Norte Unified; Fresno Unified; Los Angeles Unified; Laytonville and Point Arena, Mendocino County; Lucia Mar, San Luis Obispo County; Redwood City Unified, San Mateo County; San Diego City Schools; and Siskiyou Unified.

² Urban Institute, 2002 National Survey of American Families, 2005.