



Lessons from the Unwinding:

Perspectives from Families and Enrollment Assistants About the Medi-Cal Renewal Process

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Who We Are

The Children's Partnership is a California advocacy organization advancing child health equity through research, policy and community engagement.



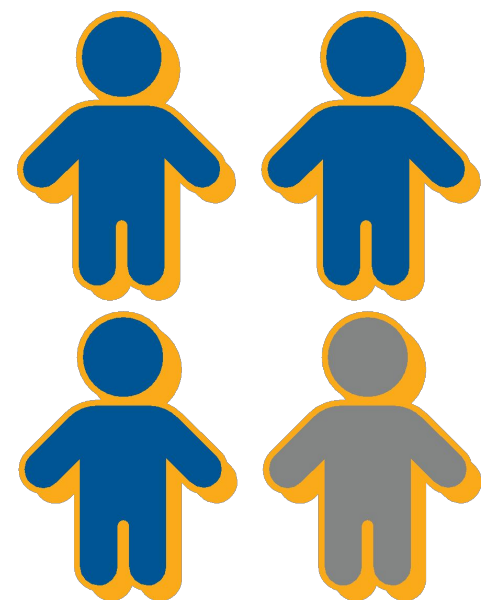
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- Confusion and misinformation about eligibility
- Volume of materials create confusion
- Long call-wait times, particularly for non-English speaking parents
- Glitches/failures in the renewal process
- Linguistic, cultural and racial barriers make the process particularly difficult for non-English speaking parents

Introduction

Health equity requires Medi-Cal working for families who are most marginalized



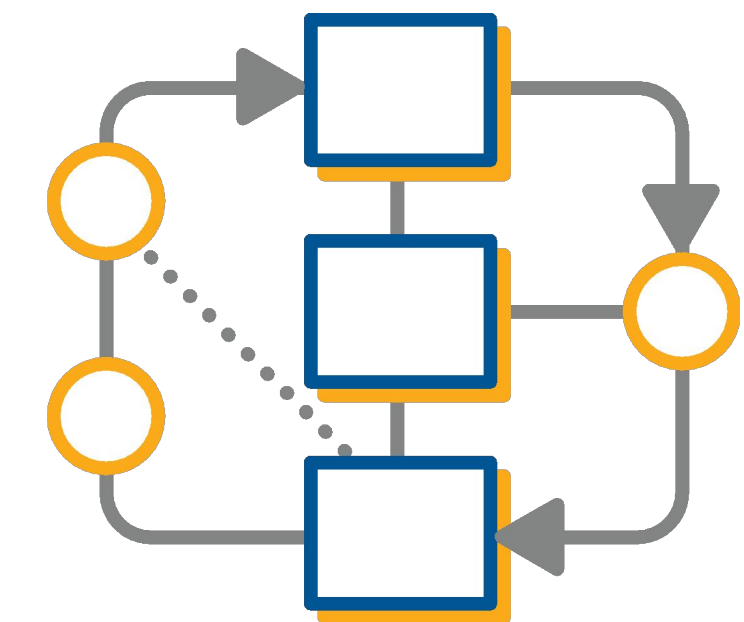
Medi-Cal is a primary source of health coverage for over half of all children in the state. **Almost 75% of children with Medi-Cal are children of color**



During the pandemic, **the uninsured rate for California children dropped 11%** (from 3.6% to 3.2%). Continuous coverage protected children from becoming uninsured and reduced the uninsurance rate



Over 306,000 children were dropped from Medi-Cal in the first nine months after renewal requirements were restored. Additionally, those with Limited English Proficiency (LEP) are disproportionately losing their coverage



Almost all disenrollments (84%) are due to “procedural” reasons, such as paperwork hurdles or the inability to contact the program about their renewal even when they remain eligible

Project Purpose

The Children's Partnership commissioned Lake Research Partners* to conduct focus groups with parents and guardians of Medi-Cal children of color:

Phase 1

To understand the impacts of gaps in children's Medi-Cal coverage

Phase 2

To understand families' experiences with the Medi-Cal renewal process (during the "unwinding" period)

*Full report from Lake Research Partners found here:

<https://childrenspartnership.org/research/continuouscoverageprotectskids/>

Project Purpose

TCP's main goals:

- Uplift the experiences of parents with children in Medi-Cal
- Make the Medi-Cal program **WORK** for families
- Improve health equity by ensuring stable coverage

Methodology



**10 focus groups totaling:
68 parents/guardians
14 navigators (enrollers/assisters)**



**24 Central CA
27 Southern CA**



Race/ethnicity*:

**24 Latine
8 Black
8 Native American
9 Mixteco Indigenous
10 Asian**



Language:

**17 English speaking
10 Chinese speaking
25 Spanish speaking**

*In addition, 9 parents of color with children with special health care needs.

What's **worked** for parents when renewing their children's coverage

What's **worked** for parents

- **Automatic renewals**
- **Information/help** obtained from community organizations, neighbors, and family members
- **Using updated enrollment information** from other programs (CalFresh) to auto-renew in Medi-Cal
- **Assistance from social workers** to enroll, renew, answer questions, and remind them of important deadlines
- Availability of status updates online and **ability to upload documents online**, particularly mentioned by English-speaking parents
- **Continuous coverage protections** provided during the public health emergency



What's **worked** for parents: In their words

"I don't just get Medi-Cal, I also get food stamps. **So, whenever they renew the Medi-Cal, they do that automatically because I get food stamps.** When I fill in the form for the food stamps, that already contains all of my information. So, I'm guessing that's why they renew my Medi-Cal automatically."

**SPANISH-DOMINANT LATINA
PARENT/GUARDIAN, LOS ANGELES**

"**It automatically renewed, so I didn't have to do anything or go down there...**They have done that twice for me in 12 years – automatically renewed it...I appreciated it."

**NATIVE AMERICAN/INDIGENOUS FEMALE
PARENT/GUARDIAN**

"**I go to the benefits account...**and you upload documents there. Like [a change in work] or if you need to resubmit a check stub or something, you just take a picture on your phone and upload it. So **it's much easier than going in-person...**"

**ENGLISH-SPEAKING LATINA
PARENT/GUARDIAN, FRESNO**

"**During the pandemic, I tried to renew,** and they told me, 'You don't have to renew, it is automatically renewed.'"

**FEMALE PARENT/GUARDIAN OF CHILD
WITH SPECIAL HEALTH CARE NEEDS**

Areas for **improvement**

Areas for improvement

The renewal process is **confusing**, particularly for people with limited English proficiency

- 1 Confusion and misinformation about **eligibility**
- 2 **Volume of materials** create confusion
- 3 **Long call wait times**, particularly for non-English speaking parents
- 4 **Glitches/failures** in the renewal process
- 5 **Linguistic, cultural, and racial barriers**, particularly for non-English speaking parents



1 Confusion and misinformation about eligibility

■ Common misconceptions about income when renewing Medi-Cal

- Many parents didn't realize **children's income eligibility levels were far higher** than adult income eligibility in the same household
- Families did not realize they could **still qualify for Medi-Cal** even if offered or had employer-sponsored insurance coverage

■ Misinformation about coverage eligibility for immigrants

- Parents are not always sure exactly what coverage is allowed for adults and children (e.g., **emergency care only v. full-scope benefits**)

■ Parents' concerns about eligibility

- Parents frequently worry about how even **slight changes in income will affect their renewal prospects** or those of their children
- Some Spanish-speaking parents hesitate to access these benefits out of **fear it will affect their ability to apply for citizenship or residency**



Confusion and misinformation about eligibility: In their words

“Sometimes they stop covering you just because your income is one or two dollars higher than they require. But the amount we earn can’t cover private doctors’ visits. So, sometimes, because of that, parents decide not to take their kids to get their physical exams or their routine checkups. That is also a very big obstacle.”

**SPANISH-DOMINANT LATINA
PARENT/GUARDIAN, FRESNO**

“If you do overtime or you pick up some extra hours for that month, and it happens to be a recertification month, **you are screwed.**”

**NATIVE AMERICAN/INDIGENOUS FEMALE
PARENT/GUARDIAN**

[Referring to adults] **“I told [a friend] that she could now qualify for Emergency Medi-Cal. I told her my social worker had told me about that.** [My social worker] said Medi-Cal offices don’t like the workers to tell the people that, but that a social worker likes telling people to help out and inform his community...But [my friend] said that her social worker had told her that she couldn’t [apply because of her immigration status], and that if she wanted to be legalized in the future, she would have problems doing it.”

**SPANISH-DOMINANT LATINA
PARENT/GUARDIAN, FRESNO**

“I have heard that even if the kids weren’t born here, they can receive coverage up to the age of 16, and well, people over 50 and children who were born here.”

MIXTEC FEMALE PARENT/GUARDIAN, OXNARD

2 Volume of materials creates confusion

- Parents think they receive **too many dense mailings** from Medi-Cal. The overwhelming amount masks the pieces they are required to act on
- Some parents, particularly Spanish-dominant Latine and most Mixteco parents/guardians, find renewal **paperwork overly long and confusing**



2 Volume of materials creates confusion: In their words

"They send me the forms in the mail. **Sometimes I don't understand them, and I go to them [county office], and they help me fill them out.** But that takes hours of wait!"

**SPANISH-DOMINANT LATINA
PARENT/GUARDIAN, FRESNO**

"**I barely understand any of it** ...Even if we can speak well in Spanish, every legal document is very complicated..."

**MIXTECO FEMALE PARENT/GUARDIAN,
Oxnard**

"**This year, the application was different and confusing. They had questions that were very strange. I had already disenrolled one of my children that doesn't live at home anymore, and his name was still appearing there...**I found it harder to apply this year than other years...I tried filling [in the forms], but decided to...get help."

**SPANISH-DOMINANT LATINA
PARENT/GUARDIAN, FRESNO**

"I needed to ask for help. I reached out to a navigator. **The girl that helped me out had to call another worker at Medi-Cal's office to ask them. My renewal was kind of confusing.** Then I had to go to the office myself and ask them, because I did not want my children to lose their coverage."

**MIXTECO FEMALE PARENT/GUARDIAN,
OXNARD**

3 Long call wait times, particularly for non-English speaking parents

- Exceedingly **long wait times and dropped calls** are the most often cited deterrents to or frustrations with contacting Medi-Cal offices by phone or in person
 - In a follow up survey with 20 parents from our focus groups, more than half (12) of parents reported waiting on hold or in line for over 60 minutes when trying to reach a worker by phone or at a Medi-Cal office when they have questions
- Additionally, the **lack of multilingual call center staff** and interpreters makes the renewal process particularly difficult for non-English-speaking parents, who wait even longer hours for assistance



3 Long call wait times: In their words

"It's all day...when you are trying to get somebody in the call center."

BLACK FEMALE PARENT/GUARDIAN, FRESNO

"They open at 7:30am. I was on the phone from 7:31 to 9:40 before I got through. It's a long wait..."

BLACK FEMALE PARENT/GUARDIAN, FRESNO

"At their office it's worse. **You stand in line for hours,** and the line of people reaches the street."

SPANISH-DOMINANT LATINA PARENT/GUARDIAN, LOS ANGELES

"I moved to OC and have been living there for four years, but **I have never called them because they don't have a Chinese line. They have to get a translator, and it's difficult using their translator service.**"

MANDARIN-SPEAKING PARENT/GUARDIAN, LOS ANGELES

4 Glitches/failures in the renewal process

- Half of Spanish-speaking Latine participants in Fresno and some Native American participants have **had to resubmit renewal forms and supporting documentation** that went 'missing' in the process
- Some counties **confirm receipt of submitted documents**, while other counties do not
- **County-to-county transfers** (when a family moves) lead to gaps in coverage
- Renewal notices and packets **not received** by families at all

4

Glitches/failures in the renewal process: In their words

“One time, I took my documents to their office and handed them to the person at the window, and they still didn’t submit them.”

**SPANISH-DOMINANT LATINA
PARENT/GUARDIAN, FRESNO**

“Sometimes [going in] doesn’t even help. There was a time I did talk to a worker, and I did get whatever I needed to get fixed that day, but then the next day, I still had a problem. They were saying that the worker didn’t do it right.”

**NATIVE AMERICAN/INDIGENOUS FEMALE
PARENT/GUARDIAN**

5 Linguistic, cultural, and racial barriers, particularly for non-English speaking parents

Lack of assistance in different languages in-person and online

- Renewal forms and information are either **unavailable** in the family's preferred language or **difficult to understand**
 - Parents with limited English proficiency have greater difficulties filling out forms, especially when documents contain **technical phrases and concepts that are not easily translatable** and require additional explanation
 - **Dialects are often not accommodated** (e.g., Ilocano and Tausug, not just Tagalog)
- **Call wait times are greater** for assistance in languages other than English
- **Poor quality translation** and lack of well-trained interpreters make the renewal process more difficult, particularly for indigenous parents with limited English and Spanish skills

Discrimination

- Feelings of discrimination due to socioeconomic status
- **Disrespect from Medi-Cal employees** due to receiving social welfare benefits



5 Linguistic, cultural and racial barriers: In their words

“Sometimes the Spanish they use isn’t the one we’re used to... I mean, the words, not the Spanish, but the words they use are very strange. Many times, I don’t know what they mean by them.”

**SPANISH-DOMINANT LATINA
PARENT/GUARDIAN, FRESNO**

“I didn’t feel like I am discriminated against because I am Latina. It is because I am on Medi-Cal...I felt like the person I talked to on the phone had a condescending attitude...[He] was like, ‘Well, you are on Medi-Cal, so you’re asking for help. So answer these in however-I-am-telling-you kind of way...”

**ENGLISH-SPEAKING LATINA
PARENT/GUARDIAN, FRESNO**

“The translation [of written materials] is pretty poor, not professional. The terms they use are not the ones we typically use. Sometimes we have to guess what they are saying.”

**MANDARIN-SPEAKING PARENT/GUARDIAN,
LOS ANGELES**

“I try to communicate in English, but I’m not very good. I often have problems because of that. Sometimes they don’t want to speak Spanish, even if they do. And many of the times, the person looks Mexican and probably speaks better Spanish than I do, but they just say they don’t speak Spanish. So, I try and speak English. **If I myself have problems speaking very little English, imagine how hard it is for a person who speaks a different dialect... It’s much harder for them.”**

**MIXTECO FEMALE PARENT/GUARDIAN,
OXNARD**



Parent recommendations
to
strengthen the Medi-Cal
renewal process

Parent recommendations

- 1. Increase continuous coverage protection**
 - a. Parents felt less anxious during the pandemic when coverage was protected-no annual renewals
 - b. Less frequent renewals
 - c. Seamless transition of coverage between counties when changing addresses
- 2. Increase Medi-Cal county office capacity**
 - a. More staff
 - b. More bilingual staff
- 3. Improve communications with families**
 - a. Dedicated caseworkers
 - b. Provide updates on the status of renewals
 - c. Improve website navigation and address language barriers that prevent them from using the website



Parent recommendations (cont'd)

4. **Improve and promote clear renewal materials**

- a. Highlight pieces of mail that require attention such as a large stamp indicating “renewal notice, return immediately”
- b. Cover pages on big packages with a checklist and a community-friendly glossary of terms
- c. Promote and implement existing opt-in text options and email notifications for information and updates

5. **More accessible and friendly materials**

- a. More community friendly materials with easy-to-understand information about the renewal process
- b. DHCS co-branding on community friendly materials
- c. QR codes in materials to access additional information





**Navigator
recommendations to
strengthen the Medi-Cal
renewal process**

Navigator recommendations

For navigators

- Expand **access to Medi-Cal database** to navigators so they can see the status of coverage and renewal applications
- Allow navigators to **work directly with caseworkers** at Medi-Cal or county health offices
- **More resources** for navigators, such as training for school-based assisters and 'cheat' sheets
- **Train and support schools** and advocacy networks to assist families with their renewals

Navigator recommendations

For families

- Do not require annual renewals for children, or make the process easier for parents and navigators to track their applications
- Streamline the renewal process
- Enlist more Medi-Cal staff to help families
- Better communication from Medi-Cal to families
- Relying on mailed notices does not work with the hardest-to-reach populations
 - Texting, emailing and calling families with important paperwork or updates
 - PSAs in languages other than English
- Make Medi-Cal's online enrollment/renewal (BenefitsCal.com) user-friendly for individuals with low literacy and limited English Proficiency

Where parents & navigators align

Recommendations in common among families and navigators

- Less frequent renewals
- Streamlined renewal process
- More user-friendly online access (translations at BenefitsCal.com)
- Improved Medi-Cal communications to families
- Increased access to community assistance
- More Medi-Cal staff to provide assistance

The work ahead:
Recommendations into
policy

Recommendations into policy

Parents' and Navigators' recommendations translated into policy:

1. **Implement continuous coverage for children ages 0-5**
2. **Implement 12 months of continuous coverage for adults**
3. **Continue the streamlining strategies in place during unwinding**
(e.g., automatic renewals in certain circumstances)
4. **Set standards and report on call center wait times for timely access to assistance**
5. **Pause procedural disenrollments until system failures are fixed**
6. **Improve notices, updates, and alerts consistent with bullets**

Moving forward

Step 1

Access and Quality: Continuous Coverage

- Children lose coverage due to procedural hurdles, not eligibility
- Coverage gaps undermine access to early detection and intervention
- Lost coverage is exacerbating already-devastating racial health inequities in California



Step 2

CalAIM and other Medi-Cal quality and access improvements

- Investments in coverage expansions are undermined if families can't keep it



Outcome

Child Health Equity

- As a primary source of coverage for children of color, Medi-Cal plays a pivotal role in advancing child health equity
- With stable coverage and access to early preventive care and mental health services, children of color will have the early detection and intervention they need for a healthy start in life

THANK YOU!



Contact Us

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