

# Working from the Inside

The Children and Family Benefits  
Unit

Chicago Public Schools

October 2011

# Why have an Enrollment Unit?

- 2001- CEO couldn't understand how children could learn if they couldn't see the black board because they didn't have glasses because they didn't have health insurance.
- 2005 to present- The Children and Family Benefits Unit exists to improve educational opportunities by ensuring students have access to health care and to enhance revenue.

# Size of Under-enrollment at CPS

- 399,742 students are enrolled in CPS
- 323,478 are enrolled in Free and Reduced Lunch
- 300,412 receive Medicaid or CHIP

50,513 students are eligible for Medicaid or CHIP but not enrolled



# Who Works at CFBU?

- 14 FTE School Based Liaisons- 9 of whom are bi-lingual, bi-cultural
- 1 FTE Bilingual, bicultural Hotline Coordinator
- 1 FTE Manager
- Interns and temporary staff
- Director who oversees unit as well as other projects
- Part time Data Consultant

# CFBU Liaisons are School Based



# Why would anyone know about the Children and Family Benefits Unit?





# Annual Mass Marketing

1.5 million leaflets  
30,000 targeted letters  
1.5 million automated  
calls  
40 introductory  
meetings with  
principals  
3,940 parents attended  
meetings where CFBU  
presentation



# Data Driven Outreach

**Targets-** Children enrolled in Free and Reduced Meals but not Medicaid/CHIP

**Data Source-**CFBU's data consultant creates "target reports" from CPS' student information system

## Level of Target Reports

- local school(s)
- geographic
- district level
- customized for collaborations
- Ethnicity





# Which CPS departments need our help?

## Building Internal Collaborations

- **Office of Special Education and Services-** CFBU assists with increasing Medicaid reimbursement for health related services for special education students.
- **Coordinated School Health-** CFBU enhances sustainable funding for CPS' Vision, Dental and School Based Clinics by increasing Medicaid billing by doing targeted enrollment to students who come to the clinics
- **Office of Culture and Language-** CFBU trains all regional and school based bilingual leaders as well as bi-lingual parents at the school level on issues of concern such their rights to public benefits and their concerns with Public Charge
- **CPS' Faith Based Initiative-** CFBU assists CPS' FTE pastor and staff by training affiliated church staff to enable them to refer congregants; staff enrollment and informational tables at church health fairs and other events as well as presenting to parents at church meetings during the evening and weekends

# Collaborations with state agencies

## Raise issues from the “trenches”

CFBU staff are on key advisory committees at the Department of Health Services and the Illinois Department of Human Services

## Let’s work together

Collaborate on addressing systemic barriers as well as case management on the individual case level. Train local and regional IDHS staff on CFBU to promote collaboration.

## It’s time to advocate!

CFBU works with state advocacy organizations around policy and administrative issues



# So What Did We Do last year?

12,323 Spanish and English calls came into our 3-KIDS Hotline

15,026 children had applications created in Spanish and English

10,595 children had applications submitted to HFS or IDHS

89% approval rating for Medicaid and CHIP Only applications

1/3 of our applications are for Joint Medicaid and SNAP for which we receive no disposition data

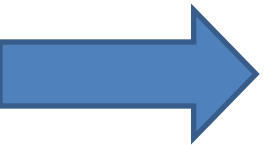


# The Biggest Challenge is Surviving

- Show results and more results
  - performance based management outcomes demonstrating your value;
  - persuasive narratives on your relevance;
  - quantifiable outcomes demonstrating assistance for mandated school programs
- Ultimately its all about the kids
  - Be strategic and polite but keep on asking whether students can learn when they regularly miss school due to untreated illnesses resulting from lack of health insurance.
- Obtain outside funding to pay for some of your budget
  - Office of Management and Budget knows turning back federal or state funds is not good. Remind them that cuts to your state/federal program are exactly that
  - Tell them how you foundation funding will be jeopardized if you don't meet goals and objectives due to staff reductions. Senior staff and OMB don't want to alienate the foundation community.

# Show Positive Budget Impact

Recent examples utilized by CFBU



## Enhanced Medicaid Reimbursement

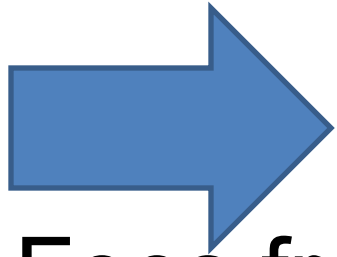
Targeted Phone Banking CFBU conducted targeted phone banking to parents of special education students whose quarterly billing was over \$500. From that one phone bank, CFBU assisted CPS in recouping over \$100,000.

Question in IEP CFBU collaborated with the Office of Special Education and Services to insert a question “on interest in getting health insurance “ in their Electronic IEP. Families interested are automatically inputted into an electronic report routed to CFBU for targeted outreach.



# Show Positive Budget Impact

Recent example utilized by CFBU



## Reduce CPS' Risk for Legal

## Fees from Law Suits

- CPS' Office of Risk Management references CFBU in all letters to families filing a claim for their injured child that CPS is not liable for
- According to Risk, this policy has reduced the number of families who sue the Board because CFBU will assist them with getting on Medicaid/CHIP to obtain retro-active payment of their child's hospital and doctor bills.



# Show Positive Budget Impact

**55%** of CFBU's Budget is potentially reimbursed by the USDA/FNS for SNAP Outreach and Application assistance



Positions added results in **MORE** state funds



Position cut results in **LESS** state funding

# Are all Children Entitled to the Same Educational Opportunities?

As the CEO of CPS who started the first school based enrollment unit asked:

- 1) How can children learn if they can't see the blackboard?
- 2) How can they see the blackboard if they need glasses and don't have them?
- 3) How do they get the eye exam to determine what glasses they need if their family doesn't have health insurance to pay the eye doctor?
- 4) If the family barely has enough money to pay the rent and keep food on the table, how do they pay for the glasses?



# For more Information

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