

Centers for Medicare and Medicaid Services  
Medicaid and CHIP Continuous Enrollment Unwinding:  
What to Know and How to Prepare, A Partner Education Monthly Series  
Wednesday, May 24, 2023  
12:00pm-1:00pm

*Webinar recording:*

[https://cms.zoomgov.com/rec/play/0n1IGx2aZHWfmd9Zw41ZOlms9VJ0neQCDWJni4e3KyHxqj6ZdB4HBjmTBIpkT6EtMhB9KaxHLHJwe\\_a.sbBIyvSsDbDjwSxR](https://cms.zoomgov.com/rec/play/0n1IGx2aZHWfmd9Zw41ZOlms9VJ0neQCDWJni4e3KyHxqj6ZdB4HBjmTBIpkT6EtMhB9KaxHLHJwe_a.sbBIyvSsDbDjwSxR)

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**Stefanie Costello:** Welcome and good afternoon to everyone on the call today. My name is Stephanie Costello, and I'm the Director of Partner Relations Group in the Office of Communication at CMS. Thank you so much for joining us today for our monthly stakeholder webinar on the Medicaid and Children's Health Insurance Program (CHIP) continuous enrollment unwinding. This is a continuation of HHS and CMS's monthly series of webinars that began in 2022 to keep partners informed and help them prepare for the return to regular operations in Medicaid and CHIP now that the continuous enrollment condition has ended. I want to remind everyone that the end of Medicaid continuous enrollment condition was separated from the end of Covid-19 Public Health Emergency, and the Medicaid continuous enrollment condition ended on March 31st, and states are able to terminate Medicaid enrollment starting on April 1st. The flexibilities tied to the Public Health Emergency for Covid-19 will not be discussed during these webinars. This webinar series is focused on educating partners about Medicaid renewals restarting, and how to help people retain health insurance coverage.

Everyone should be able to see the screen. Today's webinar will focus on messaging and outreach for kids and families. First on the agenda, we will hear an update on CMS's media strategy from our Office of Communications. Next, we will hear from the Center for Medicaid and CHIP Services about messaging and strategies for reaching children and families enrolled in Medicaid and CHIP about renewals restarting. The Children's Defense Fund in Mississippi will then share some of the strategies they've been using to reach children and families with Medicaid and CHIP. We will hear from another one of our partners, Young Invincibles, about the work they're doing to educate young adults about the Medicaid renewal process. And lastly, I'll walk through some recently released resource before I open it up to Q&A.

Before I pass it over to our speakers, I want to share a few housekeeping items. The webinar today is being recorded. The recording and slides will be available on our CMS National Stakeholder Call webpage, and we'll put that [link](#) in the chat. You can access that at any time. Also, while members of the press are welcome to attend the call, please note that all press or media questions should be submitted, using the media inquiry form which may be found at [www.cms.gov/newsroom/media-inquiries](http://www.cms.gov/newsroom/media-inquiries). All participants are muted. Closed captioning is available via the link shared in the chat by the Zoom moderator. As I mentioned, we will have time to answer a few questions today. You can submit your questions anytime using the Q&A function from the menu below. Questions that we do not have time to answer today, we will use to help inform topics covered for future calls. With that, I would now like to turn it over to Barb Johanson from the CMS Office of Communications for an update on the CMS's paid media strategy. Barb?

**Barbara Johanson:** Hi, everyone. Thank you for having me. Today I am going to talk about unwinding phase one and phase two, primarily focusing on phase two. I think we have divided our campaign into two phases. Phase one focuses on reminding folks to update their information so they don't lose coverage. Phase two focuses on if they lost coverage, where they can go to get health insurance, which is [HealthCare.gov](https://www.healthcare.gov). First slide, please. As I mentioned, the goal really for both of our campaigns is to ensure people keep their Medicaid if they still qualify, and if they no longer qualify where to go to get health coverage. For phase one which is targeted people who have currently have Medicaid and CHIP, so what steps they need to take to stay enrolled. Phase two is to inform people who lost Medicaid or CHIP where they can go for additional coverage. Phase two focuses primarily on – or solely on – FFM (federally-facilitated Marketplace) states. The chart you will see below is our timeline for when we're running that campaign.

So, phase one, we recently decided to extend the campaign to November, and that is because different states are rolling out, they're unwinding at different times so the process takes longer in different states. Phase two began in April because some states have already started disenrolling people. You can see there's a break in November and December in the campaign. That is because we will be running our Open Enrollment 11 campaign for [HealthCare.gov](https://www.healthcare.gov). So, people will be getting messages also otherwise about [HealthCare.gov](https://www.healthcare.gov) Open Enrollment. We didn't want to essentially compete with ourselves in the media market. Next slide, please. So here is some high-level messaging that we are doing for both campaigns. So, phase one, the message is primarily focused on people not to risk losing their Medicaid or CHIP coverage. To do so, they should update their contact information with their state or at a minimum check with their state to double check to make sure that the information their state has for them is correct. So, we told people to update their address, e-mail, and phone number, and finally to watch for a renewal letter to come in the mail.

Phase two focused on if you lost your Medicaid or CHIP, you may be eligible to find low-cost quality plans at [HealthCare.gov](https://www.healthcare.gov). I should note that all of our outreach is customized for each state so all the outreach that we are doing has the state name for whatever they call Medicaid or CHIP in that particular state. In addition to telling people that they could find low-cost coverage at [HealthCare.gov](https://www.healthcare.gov), we highlight some of the benefits of coverage that's available there, such as four out of five customers can find a health plan for ten dollars or less per month, with financial help, and that health care plans are comprehensive. So, they include things like doctor visits, prescription drugs, emergency care and more. We also wanted to stress that you can get coverage almost immediately, so you can sign up today for coverage starting the first of the following month. So, there are not like month long waiting periods. They can get covered quite quickly. Next, slide please.

Alright, so here's our paid media tactics, and these are for phase two. So, we did a search engine marketing, which is Google and Bing, so that's paid search. We did display ads, both mobile and desktop, so those are the small little banner ads that pop up next to something you might be looking at. Social media advertising on Facebook and Instagram. Digital videos. So, for digital videos, it's YouTube and programmatic and streaming on Hulu, Disney plus, ABC, and ESPN, and YouTube. Then, we are doing some television but that's only in phase two. We're also doing radio, both digitally and traditional broadcast radio. Then, we are doing outdoor advertising in

select communities. We are doing some really cool outdoor advertising where we are essentially taking over a lot of the advertising space in some more metropolitan communities. So, for example, in Chicago, if you are in their subway system, it's not up now but it will be soon, we are essentially taking over a lot of their space. You'll see on the floors, on the walls, on the like rounded posts, you'll see advertising for [HealthCare.gov](http://HealthCare.gov). So, if you lost your Medicaid or CHIP coverage, you should go to [HealthCare.gov](http://HealthCare.gov) to see if you qualify for financial help and get a high-quality plan. And then we'll have outdoor advertising also in community spaces like in grocery stores, in drugstores, and in spaces like that. We are also doing some print advertising, and we are also doing some earned media, which is radio media tours, satellite media tours. So that's radio and television interviews and some articles that will be placed in newspapers. Next page, please.

Alright. So, this is the fun stuff. I'm going to show you examples of the creative. These are just phase two creative because I believe most folks have seen phase one creative already. Next slide.

Alright. This is our video. So, I'm not sure if it will play. Can we see if it will play? I don't know what happened. It's okay. I can walk through it.

**Video Script:**

Lost Medicaid or CHIP coverage? [HealthCare.gov](http://HealthCare.gov) is here for you.

Where can we find a low-cost health plan?

What about a plan that covers doctor's visits?

Emergency care?

Prescriptions?

With the new law four out of five customers can find a plan for \$10 or less per month with financial help. [HealthCare.gov](http://HealthCare.gov) is here for you, enroll today for coverage starting the first of next month.

What is the website again?

[HealthCare.gov](http://HealthCare.gov).

**Barbara Johanson:** Thank you. As you can see, it's a bright, colorful ad and we have added a bright colorful ad and actually, we just happened to put a pop-up in the right corner is the – we're doing a very similar ad but also in Spanish. So same bright, colorful ad that highlights the benefits of coverage at [HealthCare.gov](http://HealthCare.gov). Next, please.

Alright. So, this is just an example of some of the out-of-home advertising we are doing. On the bottom right is the, what I was describing, what we were doing in Chicago. And then the others, are just some billboard that are place in other locations or in transit systems.

Next, please. I'm going to turn it over to Kate Ginnis. Thank you.

**Kate Ginnis:** Thank you so much. My name is Kate Ginnis. I am a Senior Policy Advisor, relatively new to CMCS, and have been focused on developing policy related to kids for quite a long time and would like to share some information related to some new resources that are specifically focused on kids, families, youth, and young adults. For our folks who aren't aware, there's about 42 million kids covered by Medicaid and CHIP which is about half the kids in the

country. So, we are really focused and want to make sure that there's messaging and resources available to ensure that those children and families who continue to be eligible for Medicaid and CHIP are getting renewed, and we want to put out as much support as we can for those of you I see there's about 1700 folks on this call, for folks who are working with kids and families and make sure that there is some ready-to-use creative as well as some specifics around messaging. I will now start with sharing my screen so that folks can see. I just want to give – are folks seeing the 'does your child have Medicaid or CHIP' screen? Is everyone here able to see: Does your child have Medicaid or CHIP screen?

**Stefanie Costello:** Yes, Kate, we can see.

**Kate Ginnis:** Thanks, Stefanie. I just want to say that I'm grateful to some families and young adults who helped with the developing of the messaging because really you can see the messaging is focused on addressing parents and talking about kids' health as opposed to kids' coverage. So, I'm making that direct connection because families felt that the messaging around their health was critical in terms of catching folk's eyes and attention. This is a postcard. There are two different versions of it. So, this is a general one but this actually can be – and these will be posted on the toolkit – this one actually can be adapted for use by any state and, we did hear loud and clear from families and from kids that folks don't necessarily know what Medicaid and CHIP are, but they do know what TennCare is, or Medi-Cal, and MassHealth. So, really having those program names, and as Barbara was saying, a lot of the resources are available with the state programs built in. These are able to be adapted for use in any state. So, this is the front side of this. Here is sort of some key messaging related to families. One of the things we want to make sure is if you get something from the state, check your mail, submit it. Another message really that we are trying to shout from the rooftops is that parents should complete the form even if they think that they themselves are not eligible because their children may qualify even if they don't. And that is something that we are really going to be pushing out because we want to make sure that, for instance, if a family member has other coverage but a child might be eligible for CHIP that the family is filling out the redetermination packet in order for them to get coverage for their child. Then of course, as will the rest of the messaging, that there are other options if Medicaid or CHIP are no longer an option for family. This is specifically targeted towards parents.

Then, I met with a great group of young adults. This was the thing that they felt spoke to them. I'll say – and Mina, I'm excited that you're here to speak to this and maybe you can comment on this – but I spent an hour with young adults and really, they talked a lot about stigma and around maybe not wanting to respond if someone were to connect with them around renewal and/or applying. When I got into a conversation with them about how many kids do you think have Medicaid or CHIP, I can tell you they were estimating really low. When they heard it's almost half of the kids in the U.S., that really spoke to them and they said that's what you should say. That's how you should market this to young adults.

An important part of the messaging for young adults, these are young adults who may have been maintained on Medicaid or may have been maintained on CHIP and are actually going to need to apply for the first time as adults. So, you'll see that this is sort of a little bit of a different messaging, which is around getting help to apply or asking their parent or guardian to apply. So, it kind of needed to speak to both the young adults who are now themselves a head of the

household as well as to young adults who may be still within their family's household. These are – and I'm very grateful to our Office of Communications colleagues for helping develop these materials and they will be posted by the end of this week as part of the toolkit. I'm going to stop sharing and just share a few additional sort of guiding principles before I hand it over to Oleta, I think I am handing it over to.

One of the things I just want to impress upon that we have almost, you know – we have 1800 folks on the call now – which is this is really an all-hands on deck effort. It's great to see those of your who are here and showing up and hopefully folks will watch this afterwards, because we want the messaging to be clear but we can't be the only ones messaging. We know all the state Medicaid programs are putting an enormous amount of effort into this, but they can't be the only one's messaging. It really is going to take a village. For families, we know that often families have a person. That person may be the pediatrician, it may be a community health worker, it may be someone in a community-based organization or faith-based organization. We want all of those people, whoever is a family's person or young person's person, we want them to have materials, we want them to be supporting families and young adults in getting the message and in actually getting across the finish line and getting that application or the redetermination done. And so, I am thrilled to see the number of people here and hope that when both Oleta and Mina share the work that they are doing, that will really speak to what is happening on the ground to support what we are all driving toward, which is making sure kids and families stay covered. Thank you. Oleta, I'll hand it over to you.

**Oleta Fitzgerald:** Thank you, Kate. Good morning, everyone. Thanks to CMS for involving the Southern Regional Office of the Children's Defense Fund in this call. I would just like to say that having children and families have access to health care has been a core part of the Children's Defense Fund's mission since the start. The work that I will be talking about this morning is work that we are doing as part of our ongoing activities with families and support for families and children in the region. It is not something that we have had designated funding to do. We are working in coalition with a number of organizations across the south, particularly in Mississippi with the Mississippi Health Advocacy Program and the Mississippi Center for Justice to name two of the major organizations here that are involved on this issue. We have some experience. Back from the very beginning of the rollout of the Children's Health Insurance Program in southern states where ideologically the leadership of those states have not been supportive in Medicaid expansion and also when CHIP rolled out were not aggressive in informing families of their eligibility for CHIP, and in fact some of the rules and regulations around those programs have been aimed to thwart participation but more than to encourage participation.

We start from that framework and also the fact that we are working in many of the states that are very rural areas. So, getting information out into those communities is something that we have to pay particular attention to. I want to say that several years ago Mississippi moved its CHIP program into a managed care program offering that included three medical associations, medical programs that when the mailers went out to the CHIP families, Mississippi Medicaid itself reported that they had an 80% return in mail. So, we are talking about populations that are mobile, we are talking about populations that don't really have a lot of technology access. We learned that outreach to these families for APRA dollars, for housing and for the child tax credit was difficult, so we learned that we have to have a different way of reaching these families. So,

our emphasis will focus on and are focused on primarily rural communities in Alabama, Georgia, and Mississippi, which are states where we have been organizing in the Black community for several years now, for over 20 years. So, we have networks in those communities.

We have people that we know in those communities that we can feed information to so that they can get it out through their churches and convenience stores which we follow kind of outreach of a political campaign where ever there are people we know where they live, where people are not getting information, we know where people need light touches, we know where people need heavier touches. Getting through as you all talked about getting through to convenience stores and service stations and grocery stores and dollar general stores, getting to where people who are most likely eligible for Medicaid in these states will be going, and that includes churches and schools and those kinds of places. We also know, as I said the technology is not always available. So, we learn that we have to go to where people are and take technology. We have to take our laptops. We have to say to folks, you know, get information out to as many people as you possibly can to come to this site on this date so that we can assist them and they can use our technology to update their information to our Medicaid office. We are very careful to not use too much information that comes from us other than to introduce the work we are doing or the people we are trying to reach to get their attention. So, but after we do that in the most urgent language that we can put out there about the immediacy of the situation, we use the information from then on that comes from either CMS or that state's division of Medicaid. Because, many times, people will get confused and we don't want to add to that confusion about what they have to do specifically in order to reenroll.

So, I think that we work a lot with the community health centers, the Federally Qualified Health Centers, which is where a lot of people get health care in these rural communities. And especially, again, in areas where we don't have Medicaid expansion. Just getting out into the community, talking, meeting people where they are, making it accessible and easy for them to provide the information that they need to have, we are not looking for people by name because we obviously don't know who they are. But we do know that they're probably not receiving information as they should because they are mobile and because their information now has not been updated for like 3 or 4 years so we know people might not be where they were 3 years ago. I think that's all that I have right now. I think the materials that you all have put out, the ones that you have shown on the screen this morning, are great. I do have a question about whether you have materials that focus on communities of color and that we can put into those areas, as well.

So, I'm happy to answer any questions that might come up, but we just realized is that there's only one way to reach people and that is to go to where they live in the communities where they live. Thank you. I will pass it over to Mina.

**Stefanie Costello:** Great, thank you.

**Mina Schultz:** Thanks, Oleta. Hello, everybody. It's great to be here with you all today. My name is Mina Schulz. I'm the Health Policy and Advocacy Manager at Young Invincibles (YI). If you're not familiar with Young Invincibles, we are a national nonprofit dedicated to uplifting the voices of young people in the political process and also advancing economic opportunity for our generation. As part of our health care advocacy work, we support the outreach and

enrollment community, meaning pretty much everyone on this call to ensure that you all have the tools you need to help people get and stay covered. When it comes to messaging Medicaid renewals to young people, the messages generally align with those you all are using for other age groups. You know, folks need to update their contact information with their state Medicaid agencies and they need to act quickly when they receive their paperwork. As you might guess though, young people have different preferences for how they receive information, and most of those are online, not via direct mail. So, it's extra important that we are clear with young people that in many cases they may not receive an e-mail notice about this, that they should check their actual mail once renewals start in their state. This is why urgency is something that we want to reflect in our messaging to young folks with phrases like 'act now,' 'don't wait,' 'hurry,' so that young people don't toss their renewal paperwork on the coffee table and forget about it. Right now, while renewals are happening, be vigilant about opening mail. It's not junk.

We need to make sure young people know they have options should their coverage be coming to an end. Echoing what Kate said, this may be the first time these folks will need to seek health insurance. They may not have any idea where to start. So, I think many of us who have been in this field for a while now know that health coverage is complicated and for many it can just be easier to become uninsured than to deal with complexities of premiums, deductibles, co-pays. Young people have a lot going on. They're students, they're working, they have families. This is just another chore on their to-do list basically, so let's make it easy for them. At YI we are always guiding people towards the number one source for health coverage information and education in their communities, which is our Navigator and assister friends. You all have been working so hard over the years especially over the last few months to ensure that your communities get and stay covered. So, we want to make sure that young people know about our assister community as a free expert resource where they can turn for the correct information and a helping hand.

I want to add one more note. If you're doing field outreach to young adults, take time to explain what is happening. A lot of them are not going to know that renewals have restarted. They're not going to know. So, for many this is the first time, again, going through a Medicaid renewal on their own without a parent and may have no idea what is involved and why it's so critical. So, while young adults are incredibly adept when it comes to deciding online what is real and what is not, we absolutely must let them know that there might be some, you know, misinformation, disinformation, happening while this is going on. So young people are ripe to be taking advantage of when it comes to health insurance. Health insurance is hard. It can be easy to put your trust in the wrong person. So, we want to make sure we are acting as those trusted messengers in the community to whom they can turn when they have questions about whether or not information they're receiving is legit. In your messaging, just make sure that you're very clear about what young consumers can expect and should be looking for when it comes to information regarding their renewals. You know, is there a trusted logo that they should keep an eye out for, a specific website where they should go for more information or to complete their renewal?

Even knowing what the envelope might look like would be helpful for folks to identify what is legit and what isn't. If you're aware of any scams that are happening in your state, any dark actors, let young people know that and what they can do. Just briefly, again, before I wrap up, CMS we have seen has a ton of amazing resources out there. They have been doing incredible work throughout this process to make life easier for our outreach and enrollment community, but

I just wanted to put one more on your radar. Young Invincibles has built its own Medicaid Unwinding toolkit complete with background information on what is happening, sample social media messaging, and sharable social media graphics. This is kind of a one-stop shop for those who may not be totally up to date on the health policy that is happening around renewals but want to get involved in doing that outreach to young people and just share information with their communities.

So that's it for me. Thank you, again, everyone, for being here today. I know that you're here because this is so important to you in helping your communities. And we at YI look forward to partnering with you as we help folks navigate this process. I think I'm handing it over to Stefanie now.

**Stefanie Costello:** Great, and it's a good segue. I'm going to talk through a couple of new resources that we have. As Kate mentioned, we are going to have these family and children resources which are going to be posted soon. It's more than a postcard so we have a couple different messaging for different groups and those will be posted shortly. But since our last call when we were together, we do have a couple updates. I'm going to share my screen so y'all can know what we have available. Back here on our – I'm sure you all bookmarked our [Medicaid.gov/unwinding](https://www.Medicaid.gov/unwinding) page. In this toolkit section we've posted a few things. They're inside the Medicaid Unwinding toolkit supporting materials. When you click on that, it opens up a zip file which includes social media, fliers, cards and other materials. Inside the social media you will find our new scam messaging and that includes our social media copy which is the text for you to use for social media, and then all our graphic images are located here. When you go into them – excuse me, I have a lot of Unwinding tabs open here – this is what you'll find. That's the information you will find. This is the text for all your scams, and then it has the images that you would use. Those are located in that social media part. If you go back into the main zip file and click on the 'flyers, cards, and other materials,' it's going to open up phase one and phase two. In phase two there's two new resources. One is the scams in English and Spanish. And that is going to be text you can use to say no to scams. As you can see this is fillable, so you can change this to your state Medicaid or CHIP program. And send this out. So, states can use it, partners can use it. It's simple messaging that will work to just alert people about some of these scams that are going on. So, I wanted to make sure you saw this. So, the two places you're going to look is in the phase two zip folder for the model language and then inside the social media is where our social media scams toolkit is with the images and with the copy that you can use in social media.

Now, since the last time we were together, there is a new tear card image right here and you could place a tear pad here. This section says lost Medicaid or CHIP? And then on the back of it, the next part, these are the three things to do next if you've lost the coverage. So again, this would be used for some of the states aren't ready to use this yet or will be in the coming months, but this is a great one for folks losing Medicaid or CHIP and then what they need to do. We have the QR code here. So, this is something you could put, for example, you can tape this on your desk or front office that folks are going to be coming in and they can scan the QR code with their phone and it takes them to [HealthCare.gov](https://www.HealthCare.gov). I wanted to share those new pieces with you today.

I know we have had a lot of good questions come in through the Q&A. As always, we get the question are these slides – or is the presentation today going to be posted and the slides? So, we



do post our recordings, and we will put that in the chat for you. All of our previous calls and webinars have been posted and they are there. Once we get this one, the recording cleaned up and the transcript, we will be posting that for y'all to look at, as well. We have also got questions during the call today about the links to the videos. Hopefully you saw in the chat that Hailey put in the link to both the English and Spanish video that Barbara played today. Those are in the chat. After the webinar we will send those out as well for you to use. With that I want to go through some of the questions we have got, and I encourage to you keep putting in questions. You can put questions in for Kate, for Mina, you can put questions in for are Oleta, for Barb, and we will do our best to get to as many questions. It looks like we have about ten minutes or so to get through them.

With that, I will start with Barb, a couple questions for you. So, thank you for sharing the links. Just have a question: How can we share these? I know in the chat – in the questions, excuse me – there were some great ideas of how to share these videos. So, somebody asked if they would be appropriate to post in the lobby of a federally qualified health center or in a doctor's office. Somebody else asked if they could be shared with local media for paid media. So, can you talk a little bit about appropriate ways for our partners to share these or if it's okay to mail them to their members or put on social media?

**Barbara Johanson:** Sure, the videos are available on the [HealthCare.gov](https://www.healthcare.gov) YouTube page, and as Stefanie mentioned, they'll be shared with everyone on this call. Folks are more than free to share those videos. You can link to them if you like on your page or share with whomever you'd like. I think that's best way to share videos. As far as the other materials, the social media posts, like Stefanie mentioned, there's a toolkit that has some material, not these specifically. These are for paid use only.

**Stefanie Costello:** Great, thanks. So, Barb is right. I pulled up those zip drives, so we have lots of social media there from the phase one message, which really focuses on updating your contact information, and the phase two, which is – for phase one, getting ready for renewals and when renewals are happening, making sure people are getting the message to check their mail but most importantly open their mail. I know we have all been guilty of leaving things in the mailbox maybe for a few days if we are not expecting anything, right? So, we want to make sure that we are encouraging folks to check their mail regularly. If they get something, to fill it out immediately. Mina stressed this, I know, with her young adult message. But I think it's great for everybody, the urgency of filling out any paperwork that you have. So, we have social media for there. You all are always welcome to re-tweet or share a Facebook post from our [HealthCare.gov](https://www.healthcare.gov) page or our [CMS.gov](https://www.cms.gov) page. So, if you don't follow us, your organizations don't follow us, we encourage to you follow us on social media, and you're welcome to share anything that we post out and then any of the copy that we make for y'all to share, you're always encouraged to use that, as well. So, thank you all, for that.

I think one other question we have for you, Barb, right now, is what states are these – the ads going to be run in that you shared with us today?

**Barbara Johanson:** Okay. So today just to be clear, I saw some questions in chat. The ads I shared today were just for phase two. We did run some phase one ads that were focused on what

to do to keep your Medicaid. This is just phase two for if you the lost Medicaid, what do you now need to do. They are running – I'm sorry. Stephanie, can you repeat what your question was? I lost my train of thought.

**Stefanie Costello:** No problem. Yeah, what state are the ads located in?

**Barbara Johanson:** Phase two ads will be in all of the 33 FFM (Federally Facilitated Marketplace) states. It's kind of a slow roll. We are slowly rolling out following as the states are unwinding, but it will be in all 33 FFM states.

**Stefanie Costello:** Great, thank you. Sorry, I couldn't get off mute. If you're in the Federally Facilitated Marketplace state, you can expect to see those ads. Thank you very much, Barb. So, one – let's see, our next question is for Kate. I'm a health insurance Navigator, and I noticed the first-time young adults that leave their parents Medicaid because they're young adults are usually scared to do the Medicaid application or they might be misinformed. If we can get target information and put more information out there to help them understand coverage, can you help us understand the importance of this and what CMS has to offer? Mina, you can feel free to chime in, too, after Kate.

**Kate Ginnis:** What I would say is we have obviously started developing some materials, and I think the most important thing for young people is that they can talk to someone who knows how to talk to young people who is trustworthy and who has the information that they need. Because, again, it's not the easiest process. If you're going through it the first time, in particular. I'm going to actually ask Mina to add to that in terms of some of the specific things that she would recommend since that's their target work that they do.

**Mina Schultz:** Yeah, I know for the trusted messengers for young people are young people. A lot of our programs maybe are limited in the number of young people they have on staff. So, if you do have younger folks working with you or you can partner with other organizations that have young folks, you know, colleges, universities, community-based organizations that serve young people, you know, help them be your face. If you look at Young Invincibles social media you're not going to see my face, you're going to see my younger co-worker's face there. People, you know, I'm with Young Invincibles, I'm a trusted resource but I'm not as trusted as some of my younger colleagues. It sounds better coming from them. They speak the language, they look like them. So, definitely – we talked a lot about trusted messengers. Young people are the best messengers for young people.

**Stefanie Costello:** Great, thank y'all both for answering that. We've got a couple questions about texts and scams. If somebody gets a text about Medicaid renewal, is this a scam?

So, all states are different. They're communicating differently. It might not be a scam, it might be a scam, right? We haven't seen that message. If you look at one of the resources we provided, there's some good rules of thumb about this. So, if you get a call or some you work – you know one of your clients – or one of your members gets a call or an e-mail or a text, generally if they ask for personal information like Social Security number, if they request money like a credit card payment or gift card or cash, or if they threaten you, that's a scam. If you get a text and you're

still not sure and you want to be safe, the best thing to do is have people reach out to their Medicaid or CHIP office and call them directly, and then they can ask about any information or follow-up from the text. So, those are the three warning signs for scams. We encourage you all to just call the Medicaid office if you're unsure. It's always great to double-check. So, the next question is, Kate, can you talk a little bit about our messaging around families who might have their children be on one coverage, be on Medicaid or CHIP, and then helping the parents understand that they might be eligible for a different type of coverage like [HealthCare.gov](https://www.healthcare.gov) or Marketplace coverage?

**Kate Ginnis:** Sure, and I think this is – unfortunately, it does not lend itself to a little snippet of a social media post. So, we have been really working on how to message that. In particular around if your kids, one of the questions asked for families to understand that if your kids can stay on Medicaid or CHIP then you're not paying for them through the Marketplace, which will keep your cost down, as well. So, we are continuing to work on that messaging, and I think we will be integrating more of that messaging over the next weeks on sort of the kids-specific messaging, because it's less, less sort of clear, it's sort of a multiple step if this than this and this. So, I think we will be coming up with additional messaging around that. It is also on the back of those cards that the Office of Communications folks just finished, and that will be posted later this week.

**Stefanie Costello:** Great, thank you, Kate. We do have information and one of the messages we are going to be stressing is for folks to apply for coverage even if they don't think they're eligible, their kids might qualify even if they don't. So, really making sure there's lots of coverage options out there for folks. So, as Kate said we are going to be integrating over the next couple of weeks, we will have our new messaging and materials coming out. Those materials as well as materials in both our phase one and phase two toolkits that I shared. We have a number of customizable materials in there. We understand Medicaid programs are known by different names, and we want to make sure that y'all are using the name that's going to resonate the most with your members and your clients. So, we encourage you to use the fillable forms that we have or the fillable fliers and put your information in there and state Medicaid information. So, I know we got a question about that. But just to let you all know, all of our points of communication if it's getting ready for the renewal, if it's now that you've got a letter what do you do, if it's specific for children and families, we have all of those as fillable options, as well. I wanted to make sure you were aware of that.

Let's see. We have the next question here. Let's see. I'm going through my list. I know we answered quite a bit of these. Mina, can you talk a little bit about young people and the age group that you work with when you refer to young people?

**Mina Schultz:** At, Young Invincibles our base are generally 18 to 34. So, it covers a pretty broad range. Those just leaving high school all the way up to those in the workforce maybe doing school still. A lot of students but a lot of, you know, young parents, a lot of folks in the workforce. So, it's a pretty broad range of those that we work with. But, I should say when we are doing our outreach and enrollment work, we are committed to getting all folks covered when we support the outreach and enrollment community, the navigators and assisters, we make sure their materials are tailored to all age groups.

**Stefanie Costello:** Great, thank you. So, for young people, I do appreciate that definition. Thinking about it in context of Unwinding, I think it's important for the young people, but then to focus on those folks who might have aged out right around this period. So, they were, you know, considered children – they were children when they had Medicaid and now that they're renewing, they're an adult. So those are going to be a certain age range there. But that's why we geared some of these materials to that. All right. So, I have one more question, our final question. Continue to put in the chat. This is going to help us with future calls, as I've said, and we will do our best to use these. If there's other topics you want us to cover on future webinars, please put those in as well. But this last one is for Kate. Is there any analysis showing the Medicaid population expected to be disenrolled measured by diagnosed chronic diseases? It would be great for advocates on specific diseases.

**Kate Ginnis:** That's a good question. I don't think we have that level of specificity – excuse me – but what I would say is often those organizations that are disease-specific are really trusted by families. So, whether it's your local sickle cell organization or if it's a local, you know, cancer association that if you have a child with cancer or if you have a child with cystic fibrosis or cerebral palsy, often families are really connected to those groups, and there are a lot of trusted advocates there. What I would say is whether it's a very small number of enrollees or a larger number, we would love to have all those organizations engaged around supporting families in keeping themselves and their kids covered. So, I don't know that we will have that specificity of data, but I think it would be really helpful for all of those organizations to kind of stand with us and be part of the all hands-on deck effort to keep everybody covered.

**Stefanie Costello:** Great, thank you, Kate. And thank you all so much. So many great questions coming in. I can tell from the questions and answers that they really enjoyed hearing first hand, Oleta, from you about understanding and reach in some of our underserved areas, especially the rural south and then some of our minority clients, as well. So, thank you for sharing some of those tips. That was greatly appreciated by those on the call. And Mina to give some really good tips on how to work with young adults to make sure they're really listening. I know that has come through quite a bit as well. So, thank you, all. And to Barb, Barb and Kate, as well. We hope the information presented today was helpful to your organization as you all continue efforts into the next phase of returning to regular operations of the Medicaid CHIP program. We encourage you all to review the resources. I know we put a lot in the chat today. We will be following up with an e-mail with some of these links specific for you to be able to click on and follow up. We appreciate your partnership and dedication to making sure that people stay connected. We know this is really important work. The ground game, y'all doing this work out in local communities and sharing this as Oleta said, where they are living, where they are working, where they are playing, is just so important. We appreciate your partnership and dedication to making sure that people stay connected to coverage, whether it's remaining on Medicaid or CHIP or transitioning to another coverage, like the Marketplace. As mentioned, the recording and transcript and slides from today's webinar will be posted on our call page. We hope you're able to join us for next month's webinar. You can register for that, and right now it's scheduled for June 28th at noon – it's a Wednesday again at noon. Again, we appreciate your partnership and commitment to help ensure that people are connected to the best health coverage that they're eligible for. With that we want to thank you for attending today's call, and we look for to

continuing to work alongside all of you and continue to engage with all you do. Thank you, thank you, for all of your work on this. And that concludes today's call.