



MILWAUKEE COUNTY AMERICAN RESCUE PLAN ACT ALLOCATION

Community Support Program Proposal

Medicaid Re-Enrollment Support

COMMUNITY SUPPORT CATEGORY

Please select the community support category that applies to this proposal:

- ☐ **Household Assistance.** Proposals may include expenditures related to food programs; rent, mortgage, and utility aid; cash transfers; internet access programs; eviction prevention; unemployment benefits or cash assistance to unemployed workers; housing support: affordable housing; and housing support: services for unhoused people.
- ☐ **Mental & Behavioral Health.** Proposals may include expenditures related to mental health services; substance abuse services; and other public health services.
- ☒ **Other Social Determinants of Health.** Proposals may include expenditures related to job training assistance; small business economic assistance; aid to nonprofit organizations; aid to other impacted industries; healthy childhood environments: home visiting and services to foster youth or families involved in child welfare system; social determinants of health: community health workers or benefit navigators and community violence interventions; clean water; drinking water; and broadband.

PROJECT DESIGN

Provide an overview of how the community support project being proposed addresses an urgent community need brought on by the COVID-19 pandemic. Demonstrate how the project provides a feasible solution to the demonstrated need and is being coordinated with partners. Include any collaboration that will occur during the project. Explain how the proposal falls within Milwaukee County's scope of services. (500-word max response)

The COVID-19 pandemic has significantly affected the health of Milwaukee County residents across a number of health indicators. To counteract this anticipated issue, the Federal government in 2020 created a program that has allowed Medicaid enrollees to be continuously enrolled without the need to re-enroll annually. The continuous re-enrollment is ending this summer with the end of the COVID-19 Federal Public Health Emergency (PHE) in spring 2023.

More than 400,000 Milwaukee County residents are enrolled in Medicaid, comprising over 44% of the population as of February 2023. All of these residents are at risk of losing health insurance coverage if they do not or are unable to re-enroll in Medicaid. Up to a quarter of those residents (90,000+) may no longer be eligible for Medicaid and will require sourcing alternative insurance. The State will begin to require renewal of residents starting in June 2023, with residents required to renew during one of the specified months between June 2024 and May 2025.

The reason this one-time event is particularly precarious is that: (a) many of these residents have not needed to re-enroll in 3 years and may not be aware that it's required nor how to do so, (b) the number of

residents that will require renewal and support in doing so is significantly higher than typical processes, (c) there will likely be a lot of confusion about when and how to re-enroll. The result may be that vulnerable residents may discover they no longer have insurance at the moment they have a medical need, or a resident may not seek out health care services because of the confusion of this Medicaid unwinding.

This issue is likely to affect Milwaukee County's residents who identify as Black or Hispanic the most, given what data tells us about who is currently enrolled in Medicaid. The top zip codes of current enrollees include: 53218, 53209, 53216, 53206, as well as 53215, 53204, 53221.

Today, DHHS is able to help with enrollment through a variety of funded staff and contracts; however, the department does not expect the resources will be enough to support volumes from this one-time event. Based on conversations with a variety of partners, DHHS has put together a proposal that aims to increase awareness and to increase staff capacity to help with enrollment. The Department has been in partnership discussions the County's Office of Emergency Management, municipal health departments, the Milwaukee Health Care Partnership and Milwaukee Enrollment Network (MKEN), Covering Wisconsin, and the State's Milwaukee Enrollment Services (MiLES).

Supporting this project aligns with the County's vision of achieving racial equity and health; it also reinforces the No Wrong Door philosophy by placing re-enrollment resources at locations where residents seek help.

TRACKABLE PERFORMANCE INDICATORS

Provide an overview of the project's goals, objectives, outcomes, and/or outputs that will be achieved by December 31, 2024. Please ensure that proposed project outcomes align with the Milwaukee County vision to achieve racial equity and eliminate health disparities. (250-word max response)

Goals:

The goal of the project is to support Milwaukee County residents at risk of losing health insurance coverage in re-enrolling in Medicaid or finding alternative coverage during the Medicaid unwinding period (June 2023 – May 2024).

Objectives:

- Increase awareness of this change for Medicaid enrollees
- Increase awareness of this change for human services and other resident-serving staff
- Increase capacity of human services workers to support residents in re-enrollment and finding alternative coverage
- Improve ability for DHHS services to support residents in re-enrollment at its physical and virtual locations

Indicators:

- Number of residents supported with re-enrollment, including zip code and Race/Ethnicity data
- Number of individuals trained on helping with re-enrollment
- Estimated audience reached by awareness campaign

INVEST IN EQUITY & INTENTIONAL INCLUSION

Provide an overview of how the proposed project supports historically underserved, marginalized

and/or adversely affected groups. Projects will be scored by their alignment with Milwaukee County's strategic objectives to (1) achieve racial and health equity, (2) dismantle barriers and (3) invest "upstream" to address root causes of health. Demonstrate how this proposal supports any or all of these objectives. If applicable, include how this proposal was informed by community input and builds capacity of community organizations. (500-word max response).

This Medicaid unwinding event is likely to affect Milwaukee County's residents who identify as Black or Hispanic the most, given what data tells us about who is currently enrolled in Medicaid. The top zip codes of current enrollees include: 53218, 53209, 53216, 53206, as well as 53215, 53204, 53221.

Investing in these programs allows the County to address root causes of residents not seeking preventative or needed health care. The tactics suggested are designed to remove barriers for residents to sign up for Medicaid or alternative insurance. And, one of the tactics is directly aimed at improving capacity of organizations through sponsoring training.

EVIDENCE-BASED STRATEGY

Please select the statement that aligns with the community support project. This project was developed with:

- ☐ **Strong Evidence:** can support casual conclusions for the specific program with the highest level of confidence. This consists of one or more well-designed and well-implemented experimental studies conducted on the proposed program with positive findings on one or more intended outcomes.
- ☒ **Moderate Evidence:** reasonably developed evidence base that can support casual conclusions. The evidence-base consists of one or more quasi-experimental studies with positive findings on one or more intended outcomes OR two or more nonexperimental studies with positive findings on one or more intended outcomes. Examples of research that meet the standards include well-designed and well-implemented quasiexperimental studies that compare outcomes between the group receiving the intervention and a matched comparison group (i.e., a similar population that does not receive the intervention).
- ☐ **Preliminary Evidence:** can support conclusions about the program's contribution to observed outcomes. The evidence-base consists of at least one nonexperimental study. A study that demonstrates improvement in program beneficiaries over time on one or more intended outcomes OR an implementation (process evaluation) study used to learn and improve program operations would constitute preliminary evidence. Examples of research that meet the standards include: (1) outcome studies that track program beneficiaries through a service pipeline and measure beneficiaries' responses at the end of the program; and (2) pre- and post-test research that determines whether beneficiaries have improved on an intended outcome.

Provide an explanation to support the statement that most aligns with the project. Include the experimental studies conducted on the proposed project. *Evidence-based strategies can be found through the following: [Results First Clearinghouse Database](#) | [The Pew Charitable Trusts \(pewtrusts.org\)](#) and [Homepage | CLEAR \(dol.gov\)](#). (250-word max)

Tactics suggested by this proposal are informed by and align with public health best practices, which rest on a foundation of evidence-based practices. A public health principle is to make the healthy choice the easy choice; and, the intent of the project is to make it easy for residents to make the healthy choice of

continuing their health care coverage. The project intends to do so by increasing awareness of the issue, by selecting outreach tactics that are designed with the target population in mind, and by directly supporting re-enrollment for residents who may need help.

The proposal builds on years of experience in public health messaging via the HealthyMKE platform (supported by Inpower) that was developed during the COVID-19 pandemic. It also builds on DHHS's experience working with vulnerable populations on benefits enrollment.

ARPA REPORTING REQUIREMENTS

Provide a detailed overview of the applicant's experience managing federal funds. Detail any experience ensuring accurate data collection and adherence to federal reporting requirements. If this is an internal application, detail any experience managing contracts and ensuring reporting deadlines are met. If this is an external applicant, detail any experience receiving funding from Milwaukee County and ensuring reporting deadlines are met.

In this proposal, DHHS intends to work with staff and providers who have experience in managing and reporting on federal funds. DHHS staff who will lead the project today manage a variety of ARPA projects and in the past had managed CARES funded-projects. Inpower, the communications firm, has in the past utilized CARES funding and funding from a variety of State programs. Other agencies that are yet to be determined will be selected in part on their ability and experience to manage federal funds.

ARPA FUNDS REQUESTED

Provide the total request amount to be spent between 2022 – 2026. Explain how funds will be incurred and encumbered by December 31, 2024. Include if the project has matching funds or resources. (250-work max)

The total funding amount requested is \$500,000. Given that the Medicaid unwinding period runs between June 2023 and May 2024, spending is projected to take place in a linear fashion during that time period.

Funding is allocated across several categories of intervention - \$100,000 to increase awareness of the issue that builds on tactics funded by other entities, \$300,000 to fund entities or contractors to provide direct support to residents to re-enroll or find alternative health insurance; \$40,000 to provide trainings to staff and other community organizations on how to help residents re-enroll. Finally, included is \$35,000 for a variety of materials, and \$25,000 for DHHS's administrative support of this work.

The County intends to partner with the communications firm Inpower for a part of the awareness campaign, and with the non-profit Covering Wisconsin for a part of the training effort. Doing so allows the County to expand the scope of awareness and training efforts that are already planned.

The funding allows DHHS to complement a lot of other efforts by the State Department of Health Services, the Milwaukee Health Care Partnership, the Milwaukee Health Department, health care agencies, and community agencies that are expending resources to address this issue.

BUDGET

Complete the short-form budget and provide a formula for your calculation by defining the expense item, number of units, and cost per unit for the requested project period. Please add rows as necessary. In the table below, outline any matching funds or resources. Please note: all costs needed for a project should be included in the budget below (example: staffing capacity, rent/space, utilities, etc.).

Expense Item	Description	Total Cost
Personnel Expenses (including fringe benefits)		
1. Administrative Support	Staff time to oversee the implementation of this project, to coordinate and adapt tactics over time	\$25,000
2.		
3.		
Professional Services		
1. Awareness Campaign	Partnering with Inpower and other communications firms to expand the reach of a variety of social, text, TV/radio, and physical campaigns to raise awareness of need to re-enroll in Medicaid throughout the year	\$100,000
2. Agencies Targeting Aging and Disabilities Populations	Partnering with known agencies that today work directly with older residents or residents with different abilities that have a track record of being able to add capacity quickly in the field	\$150,000
3. Limited Term Contractors	Partnering with a contracted agency to bring on several limited-term contractors who may reside within County facilities and help residents who come to our programs to re-enroll in Medicaid or explore alternative health insurance	\$150,000
Supplies & Equipment		
1. Materials and Technology	Funding for flyers, posters, and other physical materials to improve awareness; technology to support staff's ability to help residents re-enroll in Medicaid in the field	\$35,000
2.		
3.		
Capacity Building Resources for Implementation		
1. Training of Staff and other Providers	Training to DHHS staff, contracted staff, and community partners in helping residents re-enroll in Medicaid, understand alternative options if no longer eligible for Medicaid; the County intends to partner with Covering Wisconsin non-profit for a part of this effort	\$40,000
2.		
3.		
Total Calculations		
Total Expenses		\$500,000

While the County intends to spend \$500,000 to support the Medicaid unwinding event, a number of government, health care, and community organizations will be working to connect residents affected by Medicaid unwinding. The below partner revenue sources have been collected from a variety of conversations. While DHHS does not have details about amount invested, we are aware that entities like State Department of Health Services, health care providers, Medicaid insurance providers, and other entities will be working on supporting residents with this topic.

Other Revenue Source (s)	Committed or Available Revenue Amount	Potential Revenue Amount
Milwaukee Health Department		\$200,000
Milwaukee Health Care Partnership	\$60,000	
Total Other Revenue Amount	\$60,000	\$200,000