OMB Control Number CMS-XXXXX, OMB XXXX-XXXX

Connecting Kids to Coverage Outreach and Enrollment Final Semi-Annual Report Template

Project Title:

Funding Opportunity:

Report Due Date:

Cooperative Agreement Number: Start typing here.

State: Start typing here.

Name of Awardee: Start typing here.

Name and Title of Person Completing Report: Start typing here.

Authentication

I certify the accuracy of all report content:

Type name in lieu of signature

Enter date

Authorized Certifying Official (typed name in lieu of signature; add date)

CMS Project Officer Acknowledgement & Acceptance

I acknowledge and accept the content of this report:

Type name in lieu of signature

Enter date

CMS Project Officer (type name in lieu of signature; add date)

Reporting Requirements

Use this final semi-annual report template to describe the progress of your CKC Outreach and Enrollment project.

This final semi-annual report must be submitted to CMS through Grantsolutions.gov, as described in the special terms and conditions of your cooperative agreement.

This template is formatted for Microsoft Word software (.docx format), and the template must be returned as a Word document. Please do not submit a PDF file.

- Narrative responses should be entered in the template under each question, in single-spaced, 12-point, Times New Roman font. Length guidelines are indicated for each question; 600 words are equal to approximately one page of single-spaced, Times New Roman 12-point type. Please aim for clarity when writing your narrative responses.
- You may attach up to two pages of additional narrative, tables, graphs, or other documents that contain project information that is not covered by the questions in the template.

Upload the completed report into Grantsolutions.gov for review by your CMS Project Officer by _____.

PRA Disclosure Statement This information is being collected to assist the Centers for Medicare & Medicaid Services (CMS) with the data needed to reflect the aggregate goals and accomplishments for this cooperative agreement program. This mandatory information collection (42 U.S.C. 1396a) will be used to demonstrate the outcomes that result directly from this funding opportunity, and will also be used to help evaluate the success of outreach and enrollment strategies and identify areas that need improvement or mid-course corrections. This request does not collect personally identifiable information. Consequently, the Privacy Act of 1974 does not apply. According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid Office of Management and Budget (OMB) control number. The valid OMB control number for this information collection is 0938-1148 (CMS-10398 #7). Public burden for all of the collection of information requirements under this control number is estimated to range from 16 to 20 hours per response, including the time reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to CMS, 7500 Security Boulevard, Attn: Paperwork Reduction Act Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.

ENROLLMENT AND RENEWAL DATA EXPLANATIONS

1. Explanation of enrollment and renewal data

1a. If your organization has changed its processes since previous semi-annual reports, please describe the system you now use for tracking applications from the time they are submitted, through the review process, to approval or denial. Also describe how you verify the numbers of children and parents (as applicable) enrolled and renewed as a direct result of the CKC funding (e.g., data obtained from the state or county, calls to the state eligibility determination office). (300 words)

Start typing here

1b. Please provide additional information, if needed, to explain your enrollment results to date as reported in the monthly reports you submit. For example, if the number of new enrollments and renewals is much higher or lower than your expected progress toward your CMS-approved goal, explain why you think this happened. (200 words)

Start typing here

EFFECTIVE STRATEGIES

2. Most effective strategies

2.1. If you could continue just one or two of the most effective strategies you used to help children newly enroll and stay enrolled through renewal, which would you choose to continue and why? Consider strategies used under your current cooperative agreement and any previous rounds of CKC funding. Please be specific. For example, if your use of application assistors or navigators to help people submit applications was effective, were there particular kinds of staff (e.g. bilingual, experienced outreach or application assistance workers) who were most effective, or were particular kinds of locations (e.g. grocery stores, middle schools) more productive than others? If attending education and outreach events was an effective strategy, which kinds of events (e.g. community-organized health fairs, assemblies at schools in low-income areas) were the most effective? (300 words)

Start typing here.

2.2. Please also explain why you think a particular strategy was effective. For example, do you keep track of which staff at which locations complete the most applications? Do you ask applicants how they heard about the help you offer?

Start typing here.

CONTINUATION OF ACTIVITIES

3. Continuation of activities after the cooperative agreement period

Will you continue implementing any project activities once the CKC funding ends? If so, which activities, and how will they be funded? (300 words)

Start typing here.

LESSONS AND CHALLENGES

4. Lessons learned

What are the three most important things your organization has learned over the course of the funding period? You may list lessons learned about any aspect of your activities, including identifying, contacting, and engaging eligible families, helping children and their parents to apply for coverage, or helping them to stay covered. In your answers, consider whether you would have done anything differently if you had known at the start of the funding period what you know now. (300 words)

4.1. Lesson 1

Start typing here.

4.2. Lesson 2

Start typing here.

4.3. Lesson 3

Start typing here.

5. Primary challenges in increasing the percentage of eligible children enrolled and retained, and the most effective approaches to overcome them

Looking ahead over the next year or two, what do you think are the two biggest challenges in increasing the percentage of eligible children enrolled in CHIP and Medicaid in your state? Please discuss any types of challenges: state policies, cultural belief, language, transportation, administrative issues, funding, or anything else you think important. For each challenge, what are the best ways organizations like yours can overcome it? (300 words)

5.1. Biggest challenge

Start typing here.

5.2. Best way organizations like yours can overcome it

Start typing here.

5.3. Second biggest challenge

Start typing here.

5.4. Best way organizations like yours can overcome it

Start typing here.