Health insurance status is a required MIECHV benchmark, and home visitors play an important role in supporting HRSA’s efforts to increase access to critical preventive health services. With the second open enrollment period occurring between November 15, 2014 and February 15, 2015, uninsured Americans once again have an opportunity to access comprehensive and affordable health insurance coverage. There are some important steps that home visiting programs can take during the open enrollment period to educate families, including the following:

Review key dates for enrollment
- Individuals must enroll by December 15, 2014 for health insurance coverage that starts January 1, 2015. To find the latest information, visit HealthCare.gov or CuidadoDeSalud.gov. Illinois-specific information is at GetCoveredIllinois.gov.
- If an individual already has health insurance coverage through the Marketplace, it is time to review their plan and decide if they need to make changes for 2015. A person can choose to stay in their current plan if it is still offered or select a new plan. If a person does not act by December 15, 2014, they might miss out on better deals.
- The second open enrollment period ends February 15, 2015.

Help Spread the Word
- During home visits, discuss with families the importance of health insurance of family members who do not qualify for Medicaid, federally or state subsidized health insurance programs;
- Direct families to www.HealthCare.gov or CuidadoDeSalud.gov or visit the website with families to learn about the Health Insurance Marketplace, enroll in coverage, and sign up for email and text alerts with important reminders. Families may also learn more by phoning the call center at 1-800-318-2596 (TTY: 1-855-889-4325). Assistance is available 24/7 to answer questions, learn about open enrollment, and sign up for private health insurance.

(continued on page 5)
Thank You!
The MIECHV State Team thanks all of our providers for submitting data and multiple years’ spending plans as part of our federal MIECHV reapplication process. We will notify all providers as soon as HRSA announces the grant awards.

State Team News
We are very pleased to report that Kennye Westbrook is now the Interim Chief of the Bureau of Early Childhood Development within the DHS Division of Family and Community Services. She is the interim replacement for Andrea Palmer, who is now the Chief of the Division of Maternal, Child and Family Health Services at the Illinois Department of Public Health (IDPH) Office of Women's Health.

DHS Maternal and Child Health nurses will be supporting the MIECHV Team in conducting our annual site visits starting in 2015. Specifically, the nurses will be offering help to providers related to quality improvement for the health benchmarks. The site visits will be scheduled after the new year, and providers will be given at least 30 days to prepare.

Fiscal Notes
- Please continue to submit EDFs (Expenditure Documentation Forms) by the 15th of each month, to Bev Sanders and Lydia McAfee.
- Please use the Revision of Budget Form whenever you need to transfer funds from one line item to another (due to expected overspending or underspending). Send this form to Bev Sanders and Lydia McAfee along with an email that includes a detailed narrative explaining the revision; a response from the State will follow.
- Please use the Budget Addition Request Form when you would like to request additional funds for your program. Send this form to Audrey Moy and Teresa Kelly; you will receive a response from the State within 30 days.
- The next round of quarterly fiscal calls will be scheduled in January 2015.

Recruitment Strategies
The State MIECHV Team would like to share some strategies for recruitment that are being used at the community level:

- Persistent outreach to medical homes (medical providers, especially OB-GYN and pediatricians serving Medicaid families). Through our partnership with the IL Chapter of the American Academy of Pediatrics (ICAAP), these providers received training and information about home visiting. Community Systems Developers are actively contacting the list of medical providers in their areas (provided by ICAAP).

- Universal outreach to WIC families: Rockford and Macon County have their Coordinated Intake located in the County Health Department, which serves as the primary or sole WIC provider in the area.

- With coordination from the Community Systems Developer, some Home Visitors in Elgin have conducted door-to-door outreach in targeted neighborhoods.

- The Southside Chicago cluster has a parent organizing arm that has been successful in having trained parent ambassadors reach out to at-risk families and generate referrals to home visiting. Elgin is also piloting this strategy.

- Coordinated Intake staff in Cicero have been conducting outreach at various community and neighborhood venues where parents can be found, including parks (as weather permits) and family-oriented businesses.

- Several communities have been using "iGrow" public awareness materials, including brochures, posters with tear-off information cards, and indoor and outdoor banners for use at community events.
Professional Development News

Developmental Disabilities
If you missed the series of three web trainings held earlier this year, you can view them online:
- Supporting Parents with Developmental Disabilities
- Early Identification of Autism Spectrum Disorder
- Supporting Children with Developmental Disabilities and Their Families

Domestic Violence
We are pleased to report that the Ounce Institute staff will soon be trained on the Futures Without Violence (Healthy Mothers, Happy Babies) curriculum, along with a group of Illinois trainers. Afterward, the Ounce will be able to provide this training as part of their regular offerings to home visitors statewide (for all models and all funding sources).

Maternal Depression
Anyone interested in being trained in the Mothers and Babies maternal depression curriculum should contact their IMH Consultant. Please also contact your IMH Consultant if you received training in the Mothers and Babies individual model and would like to use the group model. The IMH Consultants have been trained in Mothers and Babies and are available to support sites with implementation.

Parents As Teachers (PAT) Core Trainings
In response to requests from sites, the Ounce has scheduled more frequent PAT Core Trainings during this fiscal year. Ounce staff are reaching out regularly to MIECHV PAT supervisors to ensure that training needs are being met.

Statewide Home Visiting Conference
The major funders of home visiting in Illinois are working together with the Ounce Institute to plan a statewide home visiting conference in the spring of 2015. Details and dates are being finalized; the conference will be open to all home visiting programs.

Visit Tracker Database
For new staff or for others who are seeking a refresher on how to use Visit Tracker, there is an online training available on visittracker-web.com called “Illinois MIECHV training for new staff 1/1/13.”
Continuous Quality Improvement

Welcome to Stacey McKeever, who has joined CPRD as the new CQI Specialist, replacing Deborah Kemmerer, who moved out of state—we thank her for all of her work to build our CQI process, and wish her the best!

Sites have been making good progress on their CQI action plans, working on benchmarks including breastfeeding, education, and postpartum contraception use.

The State CQI Team reviewed an Attrition Report from CPRD and has selected family and home visitor attrition as a priority CQI issue. The first strategy implemented by MIECHV was to require all MIECHV programs to have weekly visits for all newly enrolled families for at least the first 8 weeks (regardless of model), effective November 1, 2014. Other prioritized strategies include increasing opportunities for Infant Mental Health Consultation and benchmark alignment, as well as ongoing efforts to professional.

MIECHV Benchmark Highlights

The Governor’s Office thanks all sites for contributing to a successful submission of our Year Three data in October! We saw improvements in all Form 2 areas. Lesley Schwartz will provide data highlights over the next few months, and the University of Illinois Center for Prevention Research and Development (CPRD) will schedule a webinar this spring, after completing the data analysis.

One of the benchmark measures collected by the CPRD field data collectors is the PICCOLO, a videotaped observation tool that looks at parent-child interactions. We are pleased to report a significant increase in PICCOLO scores between baseline and one year post-enrollment. CPRD will be reviewing program-level data with each of our sites in the months to come. If you have any questions, please contact Mary Anne Wilson.

Visit Tracker Database

In November, Visit Tracker provided us with a first look at the Coordinated Intake function. We are making final tweaks and expect to roll it out this spring. To make this successful, it is important for all home visiting agencies to correctly use the caseweight component in Visit Tracker. For assistance, please contact Lesley Schwartz.

Congratulations to Decatur Public Schools, Macon County Health Department, and Macon Resources (Macon County), Aunt Martha’s/Center for Children’s Services and Danville School District 118 (Vermilion County), ChildServ and The Women’s Treatment Center (Southside), and School District U-46 (Elgin) for reaching their MIHOPE enrollment goals! This has not been an easy process, and we extend our appreciation to all of the Illinois MIHOPE sites for their hard work. As of December 3, 2014, there were 630 Illinois families enrolled in MIHOPE; we have reached 79% of our state goal of 800 enrolled families.

The first annual report of the Mother and Infant Home Visiting Program Evaluation-Strong Start (MIHOPE-Strong Start) is now available at http://www.acf.hhs.gov/programs/opre/resource/the-mother-and-infant-home-visiting-program-evaluation-strong-start-first. (Please note that this report covers only the Strong Start study, which focuses only on HFA and NFP programs.) More information regarding MIHOPE is available from MDRC, the research firm leading the study.

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Health Care Enrollment (continued)

- If a person has health coverage through the Marketplace, it’s time for them to review their plan and decide if they need to make changes for 2015. A person can choose to stay in their current plan (as long as it’s still offered) or make changes. If a person does not take action by December 15, 2014, they might miss out on better deals and cost savings. Learn more about reenrollment at Healthcare.gov.

Disseminate Materials
- Run infographics and videos in waiting rooms and agency YouTube channels.
- Place widgets and badges on your e-newsletters, websites, and email signature.
- Share written materials like brochures, fact sheets, posters, postcards, and checklists with families and community partners.

Educate Newly Insured Families
Numerous resources are available through the Coverage to Care Initiative to help families with new health insurance coverage of any type understand their insurance benefits and connect to primary care and the preventive services that are right for them.

Connect through social media
- Join the discussion at Facebook.com/HealthCare.gov or Facebook.com/CuidadoDeSalud.gov
- Follow Healthcare.gov on Twitter@HealthcareGov or @CuidadoDeSalud

Become Enrollment Assisters and Champions for Coverage
If your organization would like to train your staff to assist families applying for coverage, you may be able to apply to become a Certified Application Counselor. Your organization can also apply to become a Champion for Coverage to help spread the word about the Marketplace.

Enrolling Newborns

If you recently gave birth, adopted, or fostered a child, you can get coverage for your child by reporting this change in circumstance to the Marketplace. This can be done by logging in to your account at www.HealthCare.gov or by calling the Marketplace Call Center at 1-800-318-2596 (TTY: 1-855-889-4325). You can also call the Get Covered Illinois Help Desk at (866) 311-1119.

This event may also change your coverage options or eligibility for advanced payment of premium tax credits and cost-sharing reductions. You have 60 days from the date of birth, adoption, placement for adoption, or placement for fostering to report this change and either enroll your child into your Qualified Health Plan (QHP) or enroll your entire household onto a new QHP that best meets your needs. Regardless of which QHP you select, coverage for your child will be retroactive to the date of birth, adoption, or foster placement.

Please note that if you had your child in 2014, you will need to either complete a 2014 application if you had not previously submitted one to the Marketplace, or report a change in circumstance on your 2014 application, and select a QHP to cover you and your child for the remainder of 2014. Since it is the Open Enrollment Period for 2015, you may also want to create a new 2015 application with your child and select a 2015 QHP that best meets you and your family’s needs.
Blended, Braided, and Sustainable Funding

During the fall of 2013, the Blending, Braiding, and Sustainable Funding Subcommittee of the Early Learning Council (ELC) conducted five Round Tables with stakeholders across the state. These groups identified impediments to accessing the funding streams needed to support quality programming, and braiding those funding streams to wholly meet the needs of children and families at the program level. In addition, the groups identified areas where state-level investments in programmatic supports and systems-level coordination across funders would greatly improve the ability to function at the local level.

Strategic Plan for Community Systems Development

The Race To The Top—Early Learning Challenge (RTT-ELC) included funding support for the Consortium for Community Systems Development, to create a more coherent approach for the development and support of early childhood collaborations at the local and regional level.

Illinois Action for Children led these efforts to strengthen and systematize local collaborations across the state, focusing on three areas: strategic planning; training and technical assistance, and; creating a sustainable support system. Visit the PartnerPlanAct website for the strategic plan and other materials related to the strategic planning process.

Steps for implementing the strategic plan include:

- The Community Systems Development Subcommittee of the ELC will recommend uniform language in state provider contracts, relating to participation in community collaborations.
- State agencies will be asked to respond to a list of priority data requests from community collaborations who are trying to assess baseline measures and the impact of their work.

Lessons Learned from Coordinated Intake

In November, the Governor’s Office presented a report on Lessons Learned from MIECHV Coordinated Intake to the Home Visiting Task Force (HVTF) of the state’s Early Learning Council. The report included recommendations to develop a “universal” prenatal recruitment strategy for home visiting using WIC, Family Case Management (FCM), and Better Birth Outcomes (BBO), and a “universal” post-natal strategy through birthing hospitals and centers. The HVTF is re-activating its Universal Screening Work Group to address these priorities. The prenatal strategy builds on the ongoing work of OECD and DHS to develop systematic transitions between home visiting, FCM, and BBO.

ABLe Change Framework

The ABLe Change Framework was developed by faculty at Michigan State University to improve the success of community change efforts and more effectively address significant social issues. State administrators of programs including the All Our Kids (AOK) Networks, MIECHV, and the RTT-ELC Innovation Zones are working together to pilot the Framework in selected communities. This will include training state administrators in the framework so that they can serve as program supports. More details will be available in January.

MIECHV and System Building

ZERO TO THREE’s new report, The Maternal, Infant, and Early Childhood Home Visiting Program: Smart Investments Build Strong Systems for Young Children, highlights one of the lesser known values of the MIECHV program: its role in enhancing state efforts to build high-quality, comprehensive statewide early childhood systems. Such strong systems are critical in making sure that federal investments are maximized to most efficiently meet the needs of young children when it matters most—during the early learning years.
Resources

For Service Providers

Federal Maternal and Child Health Webinars
The Health Resources and Services Administration’s Maternal and Child Health Bureau webinars are posted here:


Illinois Early Learning Council Webinars
The state’s Early Learning Council (ELC) hosts periodic webinars; recent topics include Early Intervention, Home Visiting Models, and Infant Mental Health: [http://www2.illinois.gov/gov/OECD/Pages/EarlyLearningCouncil.aspx](http://www2.illinois.gov/gov/OECD/Pages/EarlyLearningCouncil.aspx).

Medical Home (Provider) Connections

Pew Home Visiting Campaign Webinars

Illinois MIECHV Website
We are regularly updating the OECD MIECHV webpage to include a collection of MIECHV-related documents, forms, and past presentations and newsletters. Please visit [http://www2.illinois.gov/gov/OECD/Pages/MIECHVP.aspx](http://www2.illinois.gov/gov/OECD/Pages/MIECHVP.aspx). If you have suggestions for improvements or additions, please send them to [ebony.hoskin@illinois.gov](mailto:ebony.hoskin@illinois.gov).

Visit Tracker Database
For new staff or for others who are seeking a refresher on how to use Visit Tracker, there is an online training available on visittrackerweb.com called “[Illinois MIECHV training for new staff 1/1/13](http://www.visittrackerweb.com/).”

For Families

About Home Visiting
- Video testimonials from Kane County home visiting families in [English](http://www.youtube.com) and [Spanish](http://www.youtube.com)
- Video explaining a home visit (English, Pew Home Visiting Campaign)

About Childhood Trauma
- Videos and activities for parents and caregivers in [English](http://www.youtube.com) and [Spanish](http://www.youtube.com)
- Spanish-language [information](http://www.youtube.com)

Health Insurance Marketplace
- [www.GetCoveredIllinois.gov](http://www.GetCoveredIllinois.gov) (English)
We created this newsletter in response to MIECHV providers’ requests for a centralized source of updates. Please send your comments and suggestions to Ebony Hoskin at ebony.hoskin@illinois.gov.

Acknowledgments

Maternal, Infant, and Early Childhood Home Visiting in Illinois

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Public Awareness Innovations

The MIECHV State Team thanks our providers for developing home visiting public awareness and marketing strategies that can be adopted by other communities and programs.

• The Macon County MIECHV partners worked with DCC Marketing to create the iGrow brand for home visiting. If your community is interested in obtaining new or reprinted iGrow materials, please ask your Community Systems Development and Coordinated Intake team to contact Michelle Corley at DCC Marketing.

• The Elgin MIECHV partners worked with moms who had graduated from home visiting to create video testimonials in English and Spanish.

Public Awareness Innovations

This program was made possible by the Patient Protection and Affordable Care Act of 2010, which authorizes the creation of the Maternal, Infant, and Early Childhood Home Visiting program (MIECHV).

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