Using MyFriendBen in Relational Community Organizing: Role Play

NC Nonprofits' Conference November 20, 2025

You are a community organizer and you are helping to organize and attend a food giveaway event for Thanksgiving. You are talking to people about the work of your organization and explain you are using MyFriendBen-NC to help families find out about benefit programs and tax credits they might be eligible for.

You complete the screener and offer to follow-up. If they are willing to share their contact information, you can enter it into the Empower app along with the screener results link, so you can follow-up with the community member at a future point to help them apply and further engage them in the work and events of your organization.

Post application follow-up: The community member you screened qualified for Medicaid and you helped them apply. You want to follow-up with them in 45 days to see if they got a decision about their application.

STEP 1: In the Notes section answer the following:

- Date
- Your name
- Your organization

STEP 2: Start by answering the initial TWO questions:

- 1. Question 1 Your results showed that your household was eligible for **Medicaid**. Did you apply for this program?
 - YES Proceed to Question 3
 - NO Proceed to next question
- 2. Question 2 Why did you decide not to apply for Medicaid?
 - Did not know how
 - Did not have time
 - It did not seem worth it
 - Applied, proceed to Question 3
 - Other: write reason in Notes section

NOTE: If they did not apply to Medicaid, the survey is now **complete**. Otherwise, proceed to Questions 3 through 13.

STEP 3: Answer the following questions:

- 3. How did you apply?
 - (a) Online (if yes, ask if they used EPASS)
 - (b) Over the phone
 - (c)In person at the program office
 - (d) Mailed or used a drop box for a paper application
 - (e) Faxed a paper application
- 4. How long did it take you to complete and submit your application?
 - (a)15 minutes or less
 - (b) 15-30 minutes







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- (c) 30-45 minutes
- (d)45-60 minutes
- (e) 60 minutes or more
- 5. How soon after submitting your application did you receive a decision about your application?
 - (a) Within one week
 - (b) 1-2 weeks
 - (c) 2-4 weeks
 - (d) More than 4 weeks
- 6. What was the outcome of your household's application for Medicaid?
 - (a) Everyone was approved
 - (b) Everyone was denied
 - (c) Some people were approved and some people were denied.
- 7. How many people in the household were approved for Medicaid?
 - (a) Everyone was denied
 - (b) Enter the number of people approved in the Notes section (ex. "Question 6: 3 approved")
 - (c) Unsure
- 8. If APPROVED, how soon after applying did you receive the benefit?
 - (a) Was denied
 - (b) 1-2 weeks
 - (c) 2-4 weeks
 - (d) 4-6 weeks
 - (e) Still have not received the benefit
- 9. How many people in the household were denied?
 - (a) Everyone was approved
 - (b) Enter the number of people denied in the Notes section (ex. "Question 9: 2 denied")
 - (c) Unsure
- 10. Please select the reason or reasons the people in your household were denied for Medicaid?
 - (a) Do not understand why you were denied
 - (b) Household income is over the limits for the program
 - (c) Did not have an eligible immigration status
 - (d) Failed to provide requested verification
 - (e) was approved
 - (f) Other. Please explain in the Notes section (ex. "Question 11: filled form out incorrectly")





