

Connecting Eligible Immigrants to Coverage and Care: Key Lessons from Outreach Workers

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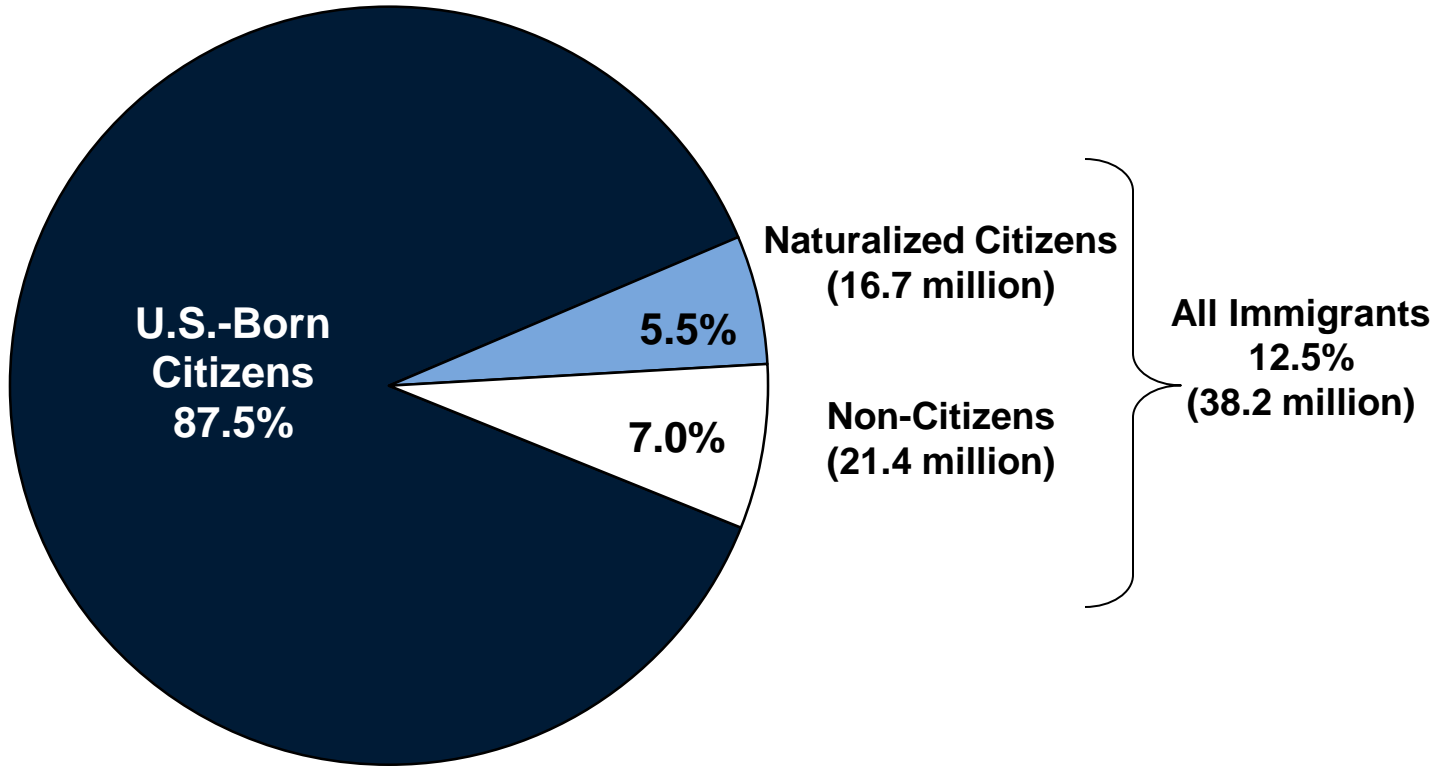
**Kaiser Commission on Medicaid and the Uninsured
Kaiser Family Foundation**

For

**Connecting Kids to Coverage:
2nd National Children's Health Insurance Summit**

**November 1, 2011
Chicago, Illinois**

Immigrants as a Share of the U.S. Population, 2010

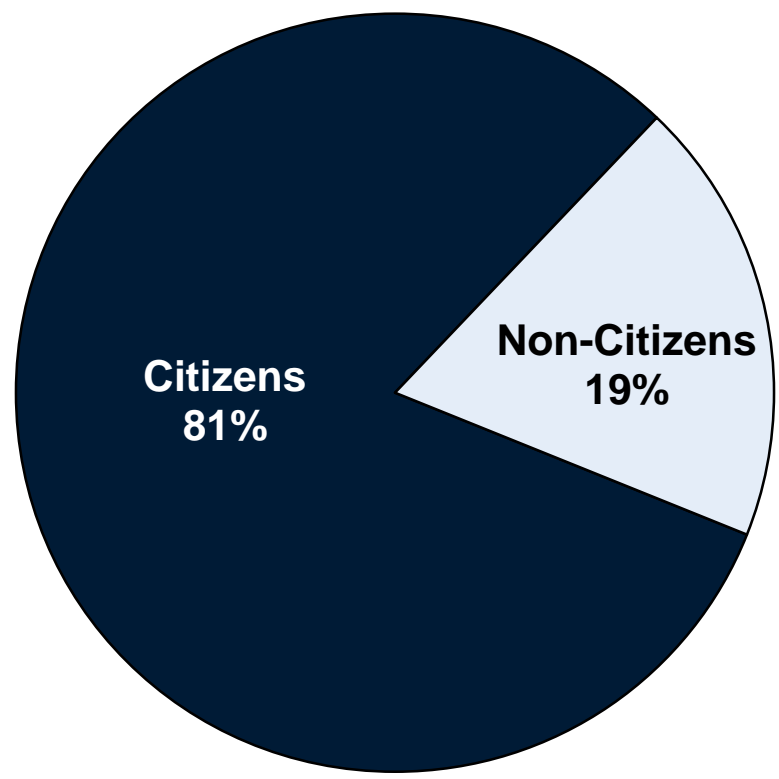


U.S. Population = 305 Million

SOURCE: KCMU/Urban Institute analysis of March 2011 Current Population Survey, Annual Social and Economic Supplement

FIGURE 2

Non-Citizen Immigrants as a Share of the Nonelderly Uninsured, 2010

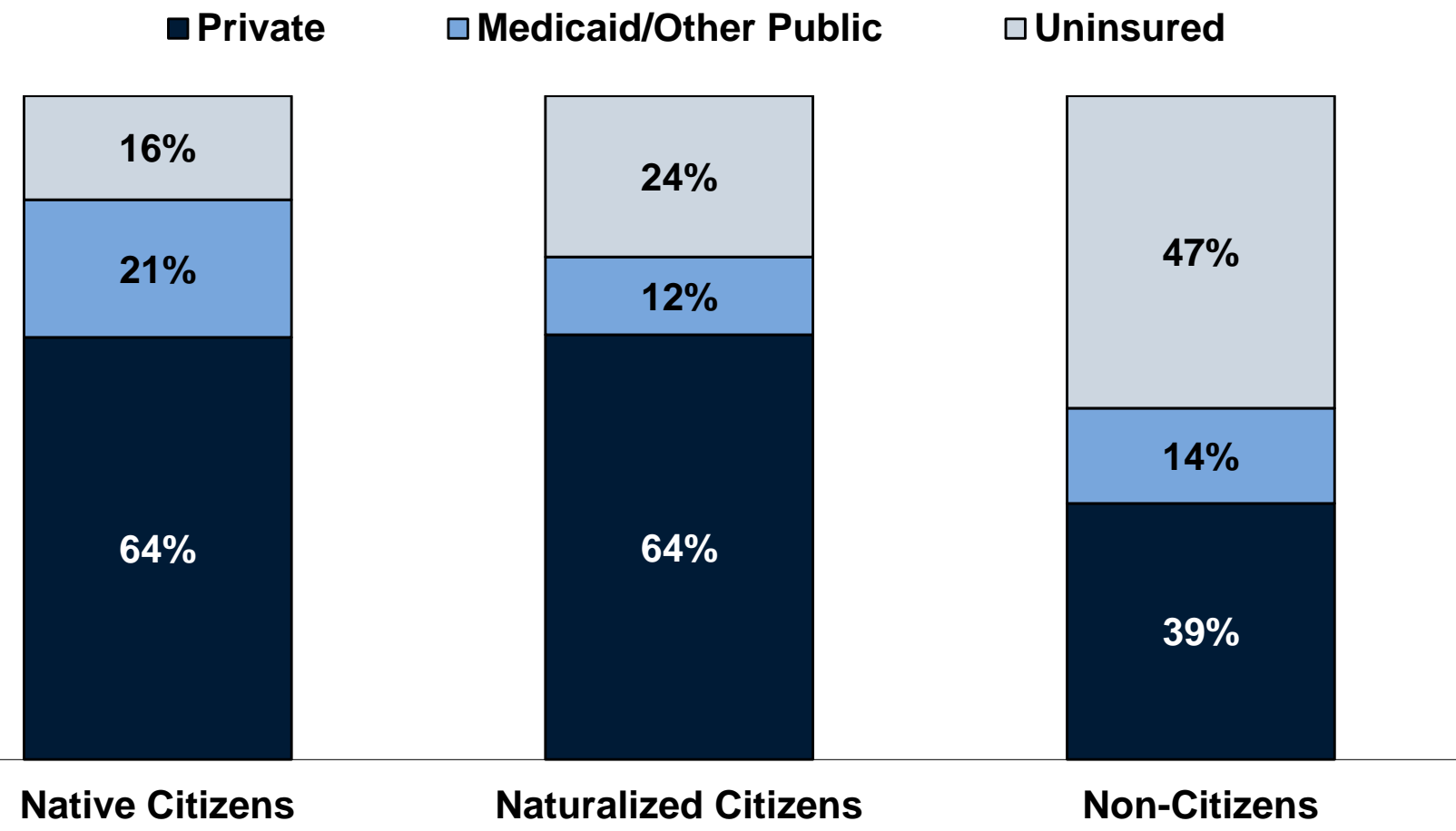


Total Uninsured = 49.1 Million

SOURCE: KCMU/Urban Institute analysis of March 2011 Current Population Survey, Annual Social and Economic Supplement

FIGURE 3

Health Insurance Coverage for the Nonelderly, by Citizenship Status, 2010



Medicaid/Other Public also includes CHIP, other state programs, Medicare, and military-related coverage. Data may not total 100% due to rounding. SOURCE: KCMU/Urban Institute analysis of March 2011 Current Population Survey, Annual Social and Economic Supplement

FIGURE 4

Immigrant Eligibility for Medicaid and Exchange Coverage as of 2014

	Medicaid	Exchange Coverage
Eligibility in 2014	Expands to nearly all individuals up to 133% FPL	Individuals without employer or public coverage can buy exchange coverage Tax credits available to those up to 400% FPL
Naturalized Citizens	Eligible on the same basis as U.S.-born citizens	May purchase exchange coverage and receive tax credits on the same basis as U.S.-born citizens
Lawfully Residing Immigrants	Most lawfully residing noncitizens are subject to a five-year wait before they may qualify States may <i>choose</i> to waive the five-year wait for lawfully residing children and pregnant women (but not for other adults)	May purchase coverage and receive tax credits without a five-year wait
Undocumented Immigrants	Prohibited from enrolling in Medicaid	Prohibited from purchasing exchange coverage

Study Approach

- **Conducted by Kaiser Commission on Medicaid and the Uninsured and Health Outreach Partners**
- **Focus groups with outreach and enrollment workers serving immigrant communities**
 - During July and August 2011
 - DC, Los Angeles, San Francisco, Tampa
- **Focus group themes:**
 - Role of Medicaid and CHIP for immigrant families
 - Current barriers to coverage and care
 - Successful strategies to overcome barriers
 - Considerations for health reform
- **Supplemented with other data and literature review**

Role of Medicaid and CHIP for Immigrant Families

- **Providing access to preventive and primary care, including prenatal care, as well as care for chronic conditions**
- **Making care affordable**
- **Contributing to an overall increased understanding of health and broad improvements in quality of life**
- **Facilitating connections to other social services**

“It also helps for the kids with immunizations and checkups, and the physicals for school and sports.”

Outreach Worker, San Francisco

“Where you access your health care . . . you also [access] education, social services, like many other services that if you don’t have an insurance you won’t go to your community center and you won’t get educated about these other resources....”

Outreach Worker, District of Columbia

“Not only do they get medications and healthcare, but they also get nutrition advice, advice on raising their kids to grow up healthier and have less medical problems when they are adults. So I think just having that access to [Medicaid and CHIP] increases their quality of life immensely.”

Outreach Worker, San Francisco

Enrollment Barriers for Eligible Immigrant Families

- **Fears**
 - Public charge related fears
 - Fears among mixed status families
- **Burdensome and confusing application processes**
- **Documentation requirements**
- **Language and literacy issues**
- **Limited access to technology**
- **Many challenges also lead to coverage losses renewal**

“...They have the fear, you know, that they sign on anything for any type of resources they won’t be able to get permanent status.”
Outreach Worker, Los Angeles

“I think most of the barriers we see with the people that we serve is not only that they don’t understand or they don’t know, but also the paperwork.... It is a lot of paperwork, it is a lot of proof they are requesting, a lot of information that many of them don’t have.”
Outreach Worker, San Francisco

“I just am constantly surprised by how many reports we get of people who are told...by the security guard or the person at the front desk there is just no one who speaks your language today.”
Outreach Worker, District of Columbia

Barriers to Care Facing Immigrants

- **Transportation**
- **Language**
 - Navigating to appointments
 - Provider interpretation services
- **Fears and confusion**
 - Obtaining care through an MCO
 - Identifying participating providers
 - Primary Care Provider assignment
- **Challenges accessing specialty care**
 - Finding participating specialists
 - Lengthy referral processes

“Many of our clients don’t speak English, so just getting there is a problem. They don’t know the way around, and they always have to ask a relative to take them, and it is hard for them to take off. So a lot of them just decide not to go to the services, it is too far for them.”

Outreach Worker, San Francisco

“If they can get Medicaid, how are they supposed to know what doctor to go to...that is a huge barrier. It is just getting the information out there to families that don’t have internet access in their homes.” Outreach Worker, Florida

“You can do really great eligibility [work] and get them the benefits but if you don’t do the teaching and education on how you use [the benefits]...you are not actually getting anybody access because they just have no idea that that doesn’t mean go to the ER.”

Outreach Worker, District of Columbia

Successful Strategies to Overcome Barriers to Coverage and Care

- **Utilizing trusted community organizations and individuals to provide outreach and enrollment assistance**
- **One-on-one assistance from individuals with a shared experience**
- **Educating families about benefits and the enrollment process**
- **Providing a list of required documents and identifying alternative options**
- **English and Spanish zero income and cash income form**
- **Cards that families can present to request translation assistance**
- **Keeping records and receipts of all paperwork submissions**
- **Maintaining contact over time to assist families with renewal and accessing necessary services**

Considerations for Health Reform

- **Assuring trusted community organizations and individuals are adequately prepared and supported to provide outreach and enrollment assistance**
- **Meeting immigrant families where they are**
 - Schools, provider offices, emergency rooms, food pantries, health fairs
 - Local businesses that serve and hire immigrants
 - Cultural radio and television channels
- **Providing a simple and welcoming application and enrollment process**
 - Overall simplification efforts
 - Cultural shift among local eligibility offices
 - Processes to meet the specific needs of immigrants
 - Accessibility
- **Strengthening and reinforcing messages to dispel fears among the immigrant community**