



# Conducting Culturally Competent Outreach and Enrollment

July 21, 2015 3:00 PM

# Agenda

- Overview and Introductions
- Using Culturally & Linguistically Appropriate Services to Increase Enrollment
- Enrollment Lessons Learned for Asian American, Native Hawaiian and Pacific Islander Families
- On-the-Ground Outreach
- Questions and Answers
- Connecting Kids to Coverage Campaign Resources



# Using Culturally & Linguistically Appropriate Services to Increase Enrollment

- **Cara James, PhD**

Director, Office on Minority Health, Centers for Medicare and Medicaid Services



# Understanding Culture

Culture includes race, ethnicity, language, geography, religion and spirituality, and biological and sociological characteristics.



# Understanding the Impact of Culture on Enrollment

## Social Determinants of Health

- Social Gradient
- Early Life
- Social Exclusion
- Work
- Unemployment
- Social Support
- Addiction
- Food
- Stress
- Transportation
- Environment/Community
- Health Insurance
- English Proficiency
- Health Literacy

SOURCE: Richard Wilkinson and Michael Marmot, eds. *Social Determinants of Health: The Solid Facts*, 2<sup>nd</sup> Edition. Denmark; World Health Organization, 2003. Available at [http://www.euro.who.int/eprise/main/who/informationources/publications/catalogue/20020808\\_2](http://www.euro.who.int/eprise/main/who/informationources/publications/catalogue/20020808_2).

# Other Languages Spoken at Home (2011)

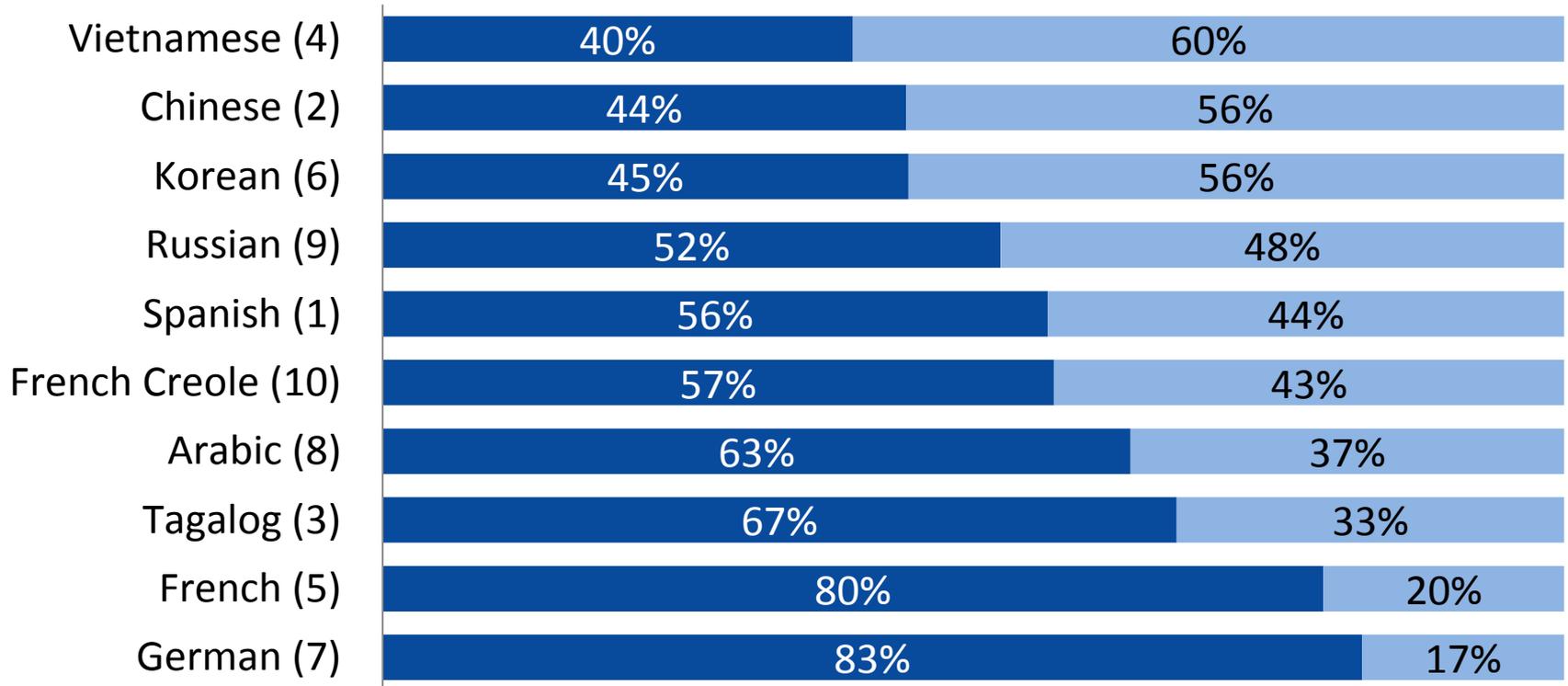
- More than **60 million** people speak a language other than English at home
- More than **25 million** (42%) speak English less than “very well” (LEP)

## Top 10 Languages Spoken Other than English

1. Spanish	37.6 million	6. Korean	1.1 million
2. Chinese	2.9 million	7. German	1.0 million
3. Tagalog	1.6 million	8. Arabic	.95 million
4. Vietnamese	1.4 million	9. Russian	.91 million
5. French	1.3 million	10. French Creole	.75 million

# Top 10 Languages Spoken at Home by English-Speaking Ability (2011)

■ Spoke English Very Well    ■ Spoke English Less than Very Well



# Health Literacy



- Defined as “the degree to which individuals have the capacity to obtain, process, and understand basic health information and services needed to make appropriate health decisions.” (Healthy People 2010)
- Problems particularly prevalent among elderly, minorities, immigrants and the poor.
- Health literacy problems have been linked to poor glycemic control among diabetics, increased hospitalization rates among ER patients, and other problems.

# Who Are the Uninsured?

1 in 2 has an income below 200% FPL

1 in 5 has not finished high school

1 in 2 identifies as a racial or ethnic minority

1 in 4 were born outside of the US

1 in 5 have limited English proficiency

1 in 2 uninsured adults lack a usual source of care

2 in 5 had no health care visit in the past year

1 in 2 likely uninsured for more than 12 months

# Providing Culturally & Linguistically Appropriate Services (CLAS)

“Cultural competence is the integration and transformation of knowledge about individuals and groups of people into specific standards, policies, practices, and attitudes used in appropriate cultural settings to increase the quality of services; thereby producing better outcomes.”

SOURCE: Davis, K. (1997). *Exploring the intersection between cultural competency and managed behavioral health care policy: Implications for state and county mental health agencies*. Alexandria, VA: National Technical Assistance Center for State Mental Health Planning.

# What is Linguistic Competence?

“The capacity of an organization and its personnel to communicate effectively, and convey information in a manner that is easily understood by diverse audiences including persons of *limited English proficiency*, those who have *low literacy* skills or are not literate, *individuals with disabilities*, and those who are deaf or hard of hearing.”

# National Culturally and Linguistically Appropriate Services (CLAS) Standards

## Principal Standard

- Provide effective, equitable, understandable and respectful quality care and services that are responsive to diverse cultural health beliefs and practices, preferred languages, health literacy and other communication needs.

## Governance, Leadership and Workforce (Standards 2-4)

- Recruit, promote and support a culturally and linguistically diverse staff.
- Educate and train staff in culturally and linguistically appropriate policies and practices on an ongoing basis.

# National CLAS Standards Cont.

## Communication and Language Assistance (Standards 5-8)

- Offer language assistance and easy-to-read materials to individuals who have limited English proficiency and/or other communication needs, at no cost to them.
- Inform all individuals of the availability of language assistance services.



# National CLAS Standards Cont.

## Engagement, Continuous Improvement and Accountability (Standards 9-15)

- Set goals and conduct ongoing assessments of the organization's CLAS-related.
- Collect and maintain accurate and reliable demographic data to monitor the impact of CLAS on outcomes and improve service.
- Partner with the community to understand the needs, and to design, implement and evaluate policies, practices.

# Providing Culturally and Linguistically Appropriate Services During Enrollment

Have cultural competency champions throughout the organization.

Collaborate with businesses, schools and other stakeholders to learn about the community and share information.

Hold trainings on how to address the needs of the population.

Identify the language preferences of your customers, and provide multiple forms of language services.

Make sure staff are fully aware of, and trained in the use of language assistance services, policies, and procedures.

Collect demographic data, and use data to guide plan development and monitor implementation.

Gather feedback on the quality of services from your customers.

# From Coverage to Care Resources

Visit <http://marketplace.cms.gov/c2c>

- Roadmap
  - Poster Roadmap
  - Consumer Tools
    - Insurance card
    - Primary Care vs. Emergency Care
    - Explanation of Benefits
  - Pull-out steps
- Discussion Guide
- Video vignettes



Print copies available from the CMS Clearinghouse

# From Coverage to Care Translations

- Which languages should you choose?
- How do you ensure a high quality product?
- Highlights and Lessons Learned



# Resources

- 1) National CLAS Blueprint – [www.thinkculturalhealth.hhs.gov](http://www.thinkculturalhealth.hhs.gov)
- 2) *The Guide to Providing Effective Communication and Language Assistance Services* - <https://hclsig.thinkculturalhealth.hhs.gov>
- 3) Marketplace resources for working with special populations (e.g. American Indians and Alaska Natives, immigrants, people with disabilities, the LGBT population, Veterans, and individuals living with HIV/AIDS) <https://marketplace.cms.gov/technical-assistance-resources/special-populations-help.html>
- 4) National Center for Cultural Competence - <http://nccc.georgetown.edu>
- 5) American Council on the Teaching of Foreign Languages – [www.actfl.org](http://www.actfl.org)
- 6) National Disability Navigator Resource Collaborative (NDNRC) - [www.nationaldisabilitynavigator.org](http://www.nationaldisabilitynavigator.org)

# Enrollment Lessons Learned for Asian American, Native Hawaiian and Pacific Islander Families

- **Bonnie Kwon**  
ACA Program  
Manager



# Our Mission

- The **Asian & Pacific Islander American Health Forum (APIAHF)** influences policy, mobilizes communities, and strengthens programs and organizations to improve the health of Asian Americans, Native Hawaiians and Pacific Islanders.

# Action for Health Justice



ALL PARTNERS are actively engaged to transform systems and institutions to provide accessible, high quality care that empowers AA and NHPI communities to lead healthier lives.



APIAHF influences policy, mobilizes communities, and strengthens programs and organizations to improve the health of Asian Americans, Native Hawaiians, and Pacific Islanders.



AAPCHO is dedicated to promoting advocacy, collaboration, and leadership that improves the health status and access of AA&NHOPIs within the United States, its territories, and freely associated states, primarily through [our member CHCs](#).



The mission of Asian Americans Advancing Justice | AAJC is to advance civil and human rights for Asian Americans and to build and promote a fair and equitable society for all.



Our mission is to advocate for civil rights, provide legal services and education, and build coalitions to positively influence and impact Asian Americans, Native Hawaiians, and Pacific Islanders and to create a more equitable and harmonious society.

# Five Pillars



# AHJ Two Year Impact

TOTAL ACA ENROLLMENT TOUCHES



**847,857**

AHJ HOSTED **22,910** EVENTS



AHJ connected with people in many ways, including through large town hall meetings, one-on-one sessions between assisters and clients, presentations at schools, and workshops at senior centers.

ASSISTANCE IN **56** LANGUAGES

In addition, AHJ developed the *Action for Health Justice (AHJ) Health Insurance Enrollment Glossary* containing approximately **100** of the most frequently used terms encountered by in-person assisters and navigators during the first round of Open Enrollment. The Glossary is available in the following languages:



ENGLISH KHMER  
TONGAN VIETNAMESE CHUUKES  
LAOTIAN MARSHALLESE HINDI  
TAGALOG CHINESE KOREAN  
HMONG BURMESE

OVER **500** PARTNERSHIPS



# Asian American & Native Hawaiian Pacific Islander Profile

1.9 million Uninsured

## Language

- 32% of Asian Americans are Limited English Proficiency (LEP)
- 70% of Asian Americans and 29% of NHPIs speak a language other than English at home
- 23% of Asian American households are linguistically isolated

## Immigration Status

- 60% of Asian Americans are foreign-born

# Lessons Learned



# Engaging Consumers

- Working in the community
- Developing trust
  - Addressing misconceptions
  - Immigration status concerns



# In-person In-Language Consumer Assistance

partner  
**SPOTLIGHT**



*Zing Thluai, a bilingual Chin outreach team member at SEAMAAC assisting a client with ACA enrollment.  
(AHJ Photo/SEAMAAC)*

**SEAMAAC**  
Greater Philadelphia, Pennsylvania

SEAMAAC, founded by refugees from Cambodia, Laos, and Vietnam, has 30 years of experience serving and advocating for refugees, immigrants, and asylees. SEAMAAC addressed language barriers by forming a local coalition, creating multilingual educational materials and workshops, training staff and community leaders as Certified Application Counselors, and partnering with Navigator organizations to provide on-site assistance. This was only possible with their uniquely qualified 42-staff and volunteer member team; fifty percent are immigrants or refugees and 80% are bilingual or multilingual, reading and/or speaking a total of 20 dialects and languages.

- Trust source
- Knowledgeable
- Meeting consumer where they are
- Culturally sensitive

# In-Language Assistance

- Arabic
- Bengali
- Bhutanese
- Bosnian
- Burmese
- Cantonese
- Chamorro
- Chin
- Chuukese
- English
- Farsi
- French
- Hmong
- Ilocano
- Indonesian
- Japanese
- Karen
- Khmer
- Korean
- Kurdish
- Laotian
- Mandarin
- Marshallese
- Mien
- Nepali
- Portuguese
- Punjabi
- Samoan
- Spanish
- Swahili
- Tagalog
- Taiwanese
- Teochew
- Thai
- Toisanese
- Tongan
- Urdu
- Vietnamese

# Providing Quality Translated Materials



## HEALTH INSURANCE ENROLLMENT GLOSSARY



### Coinsurance

A set percentage of medical costs that a person is responsible for paying each time insurance is used.

*Example: if the cost of an office visit through a health plan is \$100, and the consumer is responsible for 20% of the costs, the coinsurance payment is \$20. The health plan pays the rest of the amount if deductible is met.*



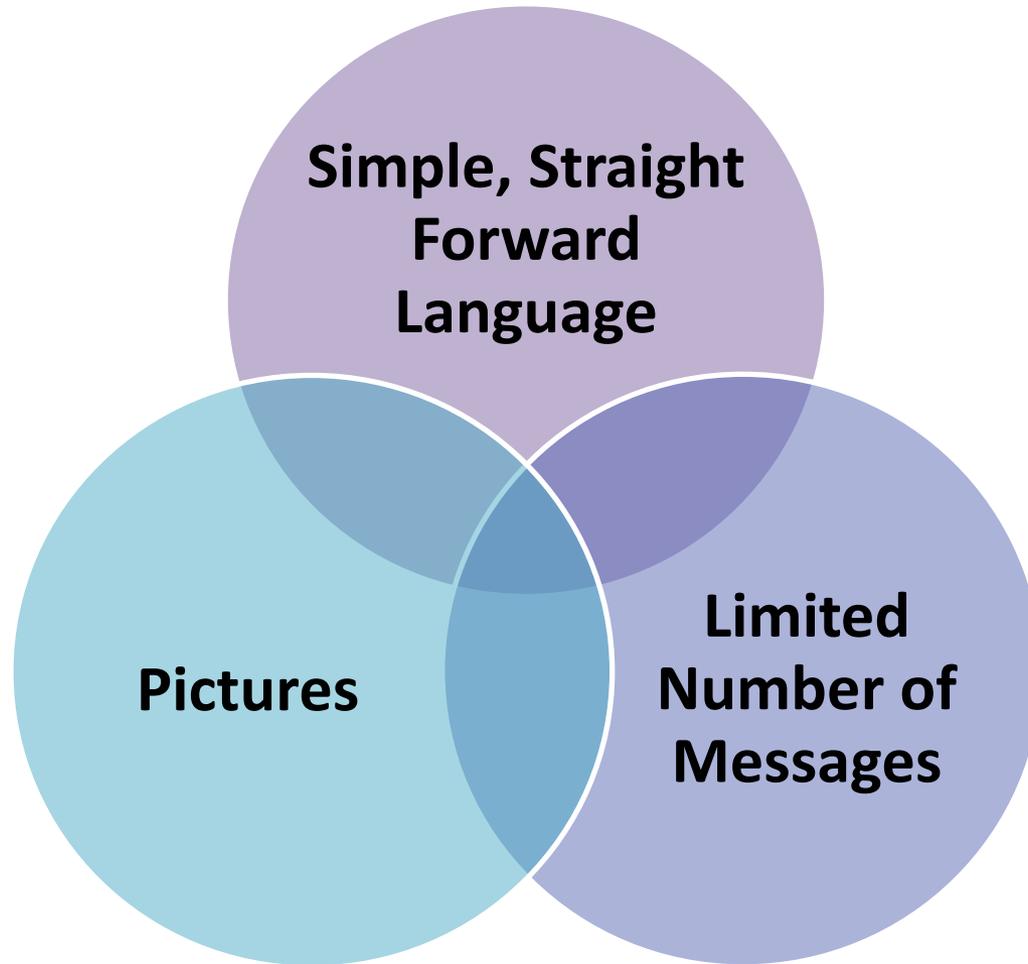
### Lệ phí đồng trả - Coinsurance

Số phần trăm của tiền chi phí y tế mà một người phải chịu trách nhiệm trả mỗi lần sử dụng bảo hiểm.

Thí dụ: nếu chi phí của một lần khám bệnh qua chương trình y tế là \$100, và người tiêu dùng chịu trách nhiệm 20% chi phí đó, tiền lệ phí đồng trả sẽ là \$20. Chương trình y tế sẽ trả phần còn lại nếu tiền khấu trừ (tiếng Anh gọi là deductible) được đáp ứng.



# Easy to Use, Easy to Read Materials



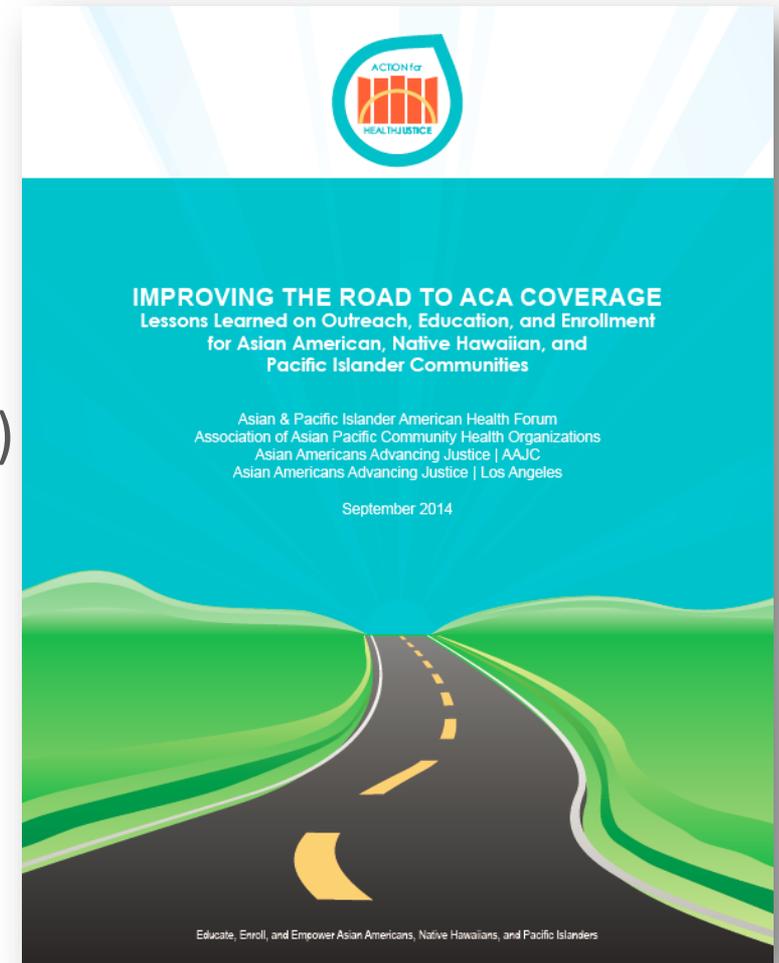
# Championing the Voices of AA and NHPI Communities

- Advocacy
- Collecting Stories
- Talking to policy makers, insurers and media



# Continuing the Work

- Supporting in-person assistance and navigation
- Insuring the “hard-to-reach”
- Helping people keep and use their coverage
- **Policy Recommendations (July 2014)**
- **Lessons Learned on Outreach and Education (September 2014)**
- **Translations Glossary (November 2014)**
- [www.apiahf.org/healthcare4me](http://www.apiahf.org/healthcare4me), “Action for Health Justice”



# Thank You!

- Bonnie Kwon  
Program Manager

Asian & Pacific Islander American Health Forum

[bkwon@apiahf.org](mailto:bkwon@apiahf.org)

# On-the-Ground Outreach

- **Zeenat Hasan**

Director of  
Empowerment and  
Advocacy



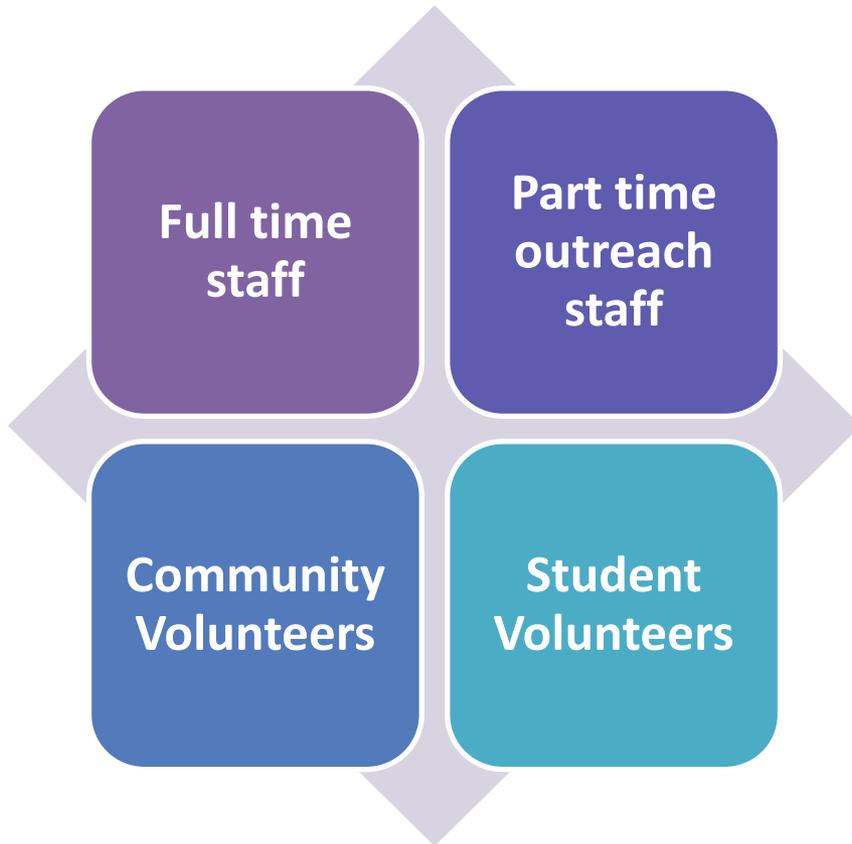
Asian Pacific Community in Action  
Advocating for Better Health



# Asian Pacific Community in Action Phoenix, Arizona

Founded in 2002, APCA is a community non-profit that serves Asian Americans, Native Hawaiians, Pacific Islanders and Emerging communities.

# Staffing



**15 languages**

**25 interpreters**

# Kids in Arizona

- Arizona dismantled Children's Health Insurance (CHIP)
- **40,000** kids uninsured
- Many were subsequently enrolled in Medicaid
- **Children's Action Alliance** – local advocacy group with multiple service partners (Medicaid enrollment)

# Volunteer Recruitment



Calendar all festivals

Lunar New Year outreach

- Community Relationships with bilingual volunteers
- Outreach events and tabling
- **Media outreach: Ethnic newspapers, radio, businesses\***
- **Community stipends**

# Retention of Volunteers

- Mutually supportive teams
- Language competent
- Team leads
- Stipend volunteers (reimburse for mileage)
- Locate in community
  - Consistent and familiar places (apartments, schools, places of worship, providers)
  - Transportation
  - Community events

# Volunteer Retention through Appreciation



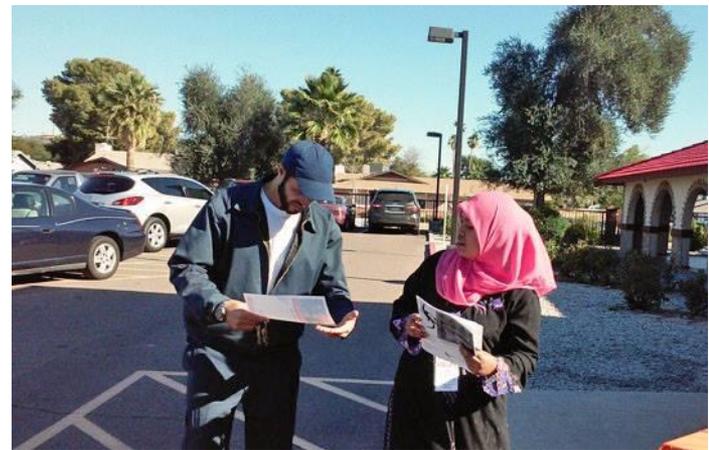
# Strategies for Outreach & Enrollment



- Ethnic media
  - Newspapers, radio
- **Relationships** with ethnic media
  - Translate articles
  - Buy ads
  - Invite to events

# Strategies for Outreach & Enrollment

- **Word of mouth** rules
- Volunteers, Navigators and CACs strategically placed in community who are **well equipped**
  - Information packets, process in place, cell phones, mobile scanners, laptops, wifi hotspots.



# Process



- Packets with information about what to bring to an appointment
- Set up an appointment **x2 for language**
  - **Multiple visits, little to no waiting**
- Schedule in a **consistent location**
- Intake and consent form are **site translated**

# Challenges

Appointment times were long, especially with Marketplace calls

Needed multiple appointments due to correspondence from Marketplace/Medicaid being in English only

Immigration status sometimes difficult to verify in the application itself

ID verification if no credit history – No language assistance at Experion



# Connecting Kids to Coverage Campaign Resources

# Customizable Print Materials

You may choose to insert your program name(s), your state's annual income eligibility limit for a family of four, your website address and/or phone number, and up to two logos.

**Please Note:** You may request these changes on all customizable materials.

**Your program name(s)**

**Your state's annual income eligibility limit for a family/household of four**

**Your website and/or phone number**

**Up to two logos**

Available in English and Spanish

Some available in Chinese, Korean, Vietnamese, Hmong and more.



InsureKidsNow.gov

## With health insurance, they'll be ready for whatever the school year brings.

Kids who have health coverage are better prepared to do well in school and succeed in life. Medicaid and CHIP offer free or low-cost health insurance for kids and teens. Children can get regular check-ups, immunizations, doctor and dentist visits, hospital care, mental health services, prescriptions and more. Children in a family of four earning up to \$47,700 a year or more may qualify.

Go to [InsureKidsNow.gov](http://InsureKidsNow.gov) or call 1-877-KIDS-NOW to learn more.

Visit [HealthCare.gov](http://HealthCare.gov) to learn more about affordable health coverage for your family.



# Flyers, Posters and Palmcards

## I'M YOUNG, BUT I WASN'T BORN YESTERDAY.

I know a good thing when I see it—like health coverage through Medicaid and CHIP. And I'm here to talk it up. It's low-cost or free for children and teens up to age 19. Us kids can get regular check-ups, shots, doctor and dentist visits, hospital care, mental health services, prescriptions and more. And kids in a family of four earning up to \$47,700 a year or more may qualify.

You can enroll any day of the year, but why put it off when you can protect your family (and your finances) today?

To learn more about affordable health coverage for your family, visit [HealthCare.gov](http://HealthCare.gov) or call 1-877-KIDS-NOW.

## Health coverage for teens who just want to have fun

Now your teens can have fun and get the health care they need. Medicaid and CHIP offer free or low-cost health insurance for children and teens up to age 19. That means check-ups, immunizations, doctor and dentist visits, hospital care, mental health services, prescriptions and more are covered. Children and teens in a family of four earning up to \$47,700 a year or more may qualify.

Go to [InsureKidsNow.gov](http://InsureKidsNow.gov) or call 1-877-KIDS-NOW to learn more.

Visit [HealthCare.gov](http://HealthCare.gov) to learn more about affordable health coverage for your family.



[InsureKidsNow.gov](http://InsureKidsNow.gov)

# Social Media Resources

- Web banners and buttons
- Social Media Graphics
- Language for Facebook and Twitter posts



URL: <http://www.insurekidsnow.gov/professionals/index.html>



InsureKidsNow.gov

# TV and Radio Public Service Announcements (PSAs)

- :30 TV PSAs in English and Spanish
- :60 radio PSAs in English and Spanish
- Tips for using PSAs
- Pitch letters in English and Spanish



URL: [insurekidsnow.gov/professionals/outreach/strategies/tv\\_and\\_radio\\_psas.html](https://insurekidsnow.gov/professionals/outreach/strategies/tv_and_radio_psas.html)



# Live Read Radio Scripts

- Live read PSA scripts are available for local radio on-air personalities to inform their listeners about Medicaid and CHIP enrollment
  - :15 radio PSA script in English and Spanish
  - :30 radio PSA script in English and Spanish
  - :60 radio PSA script in English and Spanish

URL: [insurekidsnow.gov/professionals/outreach/strategies/tv\\_and\\_radio\\_psas.html](https://insurekidsnow.gov/professionals/outreach/strategies/tv_and_radio_psas.html)



# Template Print Articles

- Ready-made articles (available in English and Spanish) that can be shared with local newspapers and media outlets.
- Template articles are also available and can be customized for local newsletters, bulletins, or other communications



# Outreach and Enrollment Best Practices



- All webinars available online

<http://www.insurekidsnow.gov/professionals/webinars/index.html>

- Outreach Video Library

[http://www.insurekidsnow.gov/nationalcampaign/campaign\\_outreach\\_video\\_library.html](http://www.insurekidsnow.gov/nationalcampaign/campaign_outreach_video_library.html)



InsureKidsNow.gov

# Keep in Touch With the CKC Campaign!

- Contact us to get involved with the National Campaign at [InsureKidsNow@fleishman.com](mailto:InsureKidsNow@fleishman.com) or 1-855-313-KIDS (5437).
- Sign up for eNewsletters here: [public.govdelivery.com/accounts/USCMS/subscriber/new](https://public.govdelivery.com/accounts/USCMS/subscriber/new)
- Follow the Campaign:
  - Twitter: [@IKNGov](https://twitter.com/IKNGov)





# Questions & Answers



**Thanks!**