



2014 Hispanic Heritage Month  
*A Legacy of History, A Present of  
Action and A Future of Success*

## From Coverage to Care



***Connecting the  
Hispanic Community  
to New  
Opportunities for  
Better Health***

October 15, 2014

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**President and CEO**  
National Hispanic Medical  
Association

# Hispanics and ACA

Elena Rios, MD, MSPH  
President & CEO  
National Hispanic Medical Association  
October 14, 2014

# Key Facts about Hispanics

- ▶ Hispanics are the largest minority group in the U.S.: 50 million or 17% of the total U.S. population
- ▶ By 2042, Latinos will represent 25% of the U.S.<sup>1</sup>
- ▶ 33% <65 uninsured prior to, 23% post ACA
- ▶ 8.8 new insured after first ACA enrollment
- ▶ Young, working population – small business, service industries, agriculture
- ▶ Multigenerational mixed families, strong culture
- ▶ Language – Spanish, English, Bilingual

<sup>1</sup> US Census. 2011 projections.




# Barriers to Hispanic Enrollment

- ▶ Attitude
  - 2013 survey results: 52% vs 36% White non-Hispanic felt they were healthy enough not to need insurance\*
- ▶ Health Insurance Literacy worse than others
  - Financial and non-financial terms
- ▶ Limited prevention-seeking behavior
- ▶ Advance chronic disease at presentation
- ▶ Family informal knowledge/alternative medicine
- ▶ Social determinants of health – poor community
- ▶ Low level of education, language issues
- ▶ Email/social media/cell phone communications

\*Urban Institute Health Reform Monitoring Survey, 2013

# Strategies: Latino Enrollment

- ▶ Message: Affordable insurance
  - ▶ Outreach/promotions targeted to Latinos
    - Mixed families, adults without children
    - Community sites
  - ▶ Prescreening information needed
  - ▶ Eligibility discussion – referral to Medicaid
  - ▶ Enrollment with simple applications, promotoras and CBOs
  - ▶ Retention issues need to be addressed
  - ▶ Use of Care – PCMH, quality data, outcomes
- 



# Massachusetts & Hispanic Enrollment – Lessons Learned

- ▶ Conduct outreach at locations frequented by Hispanics (health fair, church, store, clinic)
- ▶ Utilize enrollment specialists to address the specific needs of applicants
- ▶ Collaborate to streamline enrollment processes by sharing communications and applicant information
- ▶ Address needs and concerns of mixed immigrant families
- ▶ Integrate culturally competent, bilingual services

▶ Cortes, D. et al, Best Practices for Targeting Outreach, Enrollment and Navigation Services to Hispanics in Massachusetts, 2014.

# NHMA & NHHF– Who are We?

- ▶ Established in 1994 in DC, NHMA is a non-profit 501c6 association representing 50,000 Hispanic physicians in the U.S.
- ▶ Mission: to empower Hispanic physicians to improve the health of Hispanic populations with Hispanic medical societies, residents, students and public and private partners.
- ▶ Established in 2002, NHMA's foundation, National Hispanic Health Foundation, a non-profit 501c3 foundation for research & education activities – affiliated with NYU Wagner Graduate School of Public Service

# NHMA & NHHF Contact Us

- ▶ NHMA – [www.nhmamd.org](http://www.nhmamd.org)
  - ▶ NHHF – [www.nhmafoundation.org](http://www.nhmafoundation.org)
  - ▶ Portal – [www.hispanichealth.info](http://www.hispanichealth.info)
- 
- NHMA 19<sup>th</sup> Annual Conference
  - March 27–29, 2015, Washington, DC

# Mayra Alvarez, MHA



**Director**  
State Exchange Group,  
Center for Consumer  
Information & Insurance  
Oversight  
CMS



# Marketplace Outreach

*Working to enroll the  
Latino Community*

*Mayra Alvarez, MHA  
State Exchange Group  
Center for Consumer Information and  
Insurance Oversight*

# 4 Ways to Apply

## Over the phone

Call the Marketplace Call Center at **1-800-318-2596**. TTY users should call **1-855-889-4325**. A customer service representative can help you apply and enroll over the phone.



## Online

Visit **HealthCare.gov** to apply and enroll on the web.



## In-person help

Get help from people in your community trained and certified to help you apply and enroll in the Marketplace. Visit **Localhelp.HealthCare.gov**, or call the Marketplace Call Center.



## Paper application

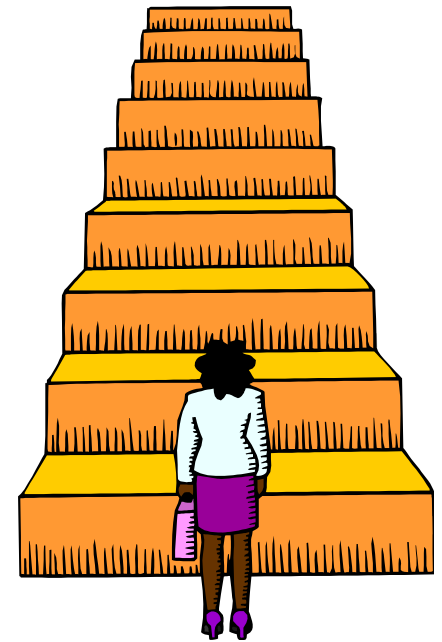
If you don't have a computer or time to apply and enroll over the phone, you can fill out a paper application. Call the Marketplace Call Center to get an application or download a copy from **HealthCare.gov**.





# Addressing Enrollment Challenges

- Health insurance literacy
- Language barriers
- Mixed status families and misinformation about immigration enforcement
- Digital divide
- Lack of information regarding costs of coverage and available financial assistance



# Health Insurance Literacy Webinars



- Partnership between HHS OMH and CMS
- Help communicate the value of health insurance
- Provide appropriate resources and tools
- Assist people in making informed decisions about their health coverage needs

# Overcoming Fears



- Many Latinos are part of mixed-status families and fear submitting information related to immigration on their application for health care coverage
- Clarify misconceptions via print newspapers, online news outlets, social media channels and television

# Emphasizing Affordability

- Cost is the top barrier for uninsured
  - Fear of not making their monthly premium payments
  - Fear of the individual shared responsibility payment- *aka the fee*
- Raise awareness about eligibility for financial assistance that can lower costs
  - Get financial assistance that can lower costs for accessing health services or lower your monthly premium
  - Many people applying for coverage through the Marketplace are eligible for advance premium tax credits that can be used to lower their monthly premiums and health care services



# Enrollment and Outreach Best Practices

- Social media
- Traditional media, especially local
- Educational resources
- Spread the word on the street
- Community outreach



# Latino Health Education and Resource Summits

- Partnership between the Department of Health and Human Services, Enroll America, Planned Parenthood, LULAC, National Latina Institute for Reproductive Health but also many community partners like health centers, community centers, and libraries.
- Targeting areas with high uninsured, such as McAllen, TX; Miami, FL; Phoenix, AZ
- Features enrollment assistance in person, but also a range of activities, including screenings, games, cultural events



The poster features a header with three images: a caduceus, a doctor's hands holding a stethoscope, and an IV drip. Below the images, the text reads: "Latino Enrollment Summit", "Get Health Insurance Coverage in 2014!", "Saturday, February 15, 2014", "12:00 PM - 4:00 PM", "HIRIAM CLARKE MULTI SERVICE CENTER", "3810 W. Fuqua Street, Houston, Texas 77075", "Call 281.489.1111 for more information.", "Come join us for our Health Fair as well!", "Diabetes and cholesterol examinations and free blood pressure screenings!", "...", "...", "... awareness on exercising regularly, ...", "... and maintaining a healthy weight!", and the Houston Department of Health and Human Services logo.

**Latino Enrollment Summit**

Get Health Insurance Coverage in 2014!

Saturday, February 15, 2014  
12:00 PM - 4:00 PM

HIRIAM CLARKE MULTI SERVICE CENTER  
3810 W. Fuqua Street, Houston, Texas 77075  
Call 281.489.1111 for more information.

**Come join us for our Health Fair as well!**

Diabetes and cholesterol examinations and free blood pressure screenings!  
...  
...  
... awareness on exercising regularly,  
... and maintaining a healthy weight!

Houston Department of Health and Human Services



The poster features a map of Texas in the background. The text reads: "Visítanos en el Latino Enrollment Summit", "¿Cuándo? Este sábado, 15 de marzo de 10am a 5pm", "¿En dónde? Union City Housing Authority Pavilion, 3911 John F Kennedy Blvd, Union City, New Jersey", and the logo for Mercado de Seguros Médicos.

Visítanos en el  
**Latino Enrollment Summit**

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**¿Cuándo?**  
Este sábado, 15 de marzo  
de 10am a 5pm

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**¿En dónde?**  
Union City Housing Authority Pavilion  
3911 John F Kennedy Blvd  
Union City, New Jersey

Mercado de Seguros Médicos



# In-Person Assistance

- Navigators
- Certified Application Counselors
- In-person Assisters
- Agents & Brokers
- Champions for Coverage



Consumers are referred to these sources as a trusted entity for help



# In-Person Assistance in the Community

- Trusted sources for information
  - Regular gathering places (churches, schools, libraries, community centers, etc.)
- Accessible location
  - Near public transportation
- Dedicated phone number for appointments
  - Learn about organizations that are assisting with enrollment in your community: <http://ayudalocal.cuidadodesalud.gov/es/>
- Extended hours of service
  - evenings and weekends

# Leveraging Community Resources

- Work with trusted community based organizations
  - Churches, pastors, faith-based organizations
- Seek support from local and municipal agencies that provide social services:
  - County health, housing, homeless and food banks
- Elected officials can lend support:
  - Mayors, Councilmembers, School Board
- Create or work with local Latino coalitions
- Partner with pharmacies and grocery stores

# Now and Next Steps

- Data Matching
- Renewals and Redeterminations
  - Key Dates
  - Aligning with Employer Sponsored Insurance
- Improved Application for 2015 Open Enrollment
- Continual Improvement of CuidadodeSalud.gov

# Cara V. James, PhD



**Director**  
CMS Office of Minority  
Health



# From Coverage to Care/ De La Cobertura al Cuidado de Su Salud



*Helping the Newly  
Insured Connect to  
Care*

*Cara V. James, PhD  
CMS Office of Minority Health*

*“Working to Achieve Health Equity”*

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# What is *From Coverage to Care*?

- C2C is an effort to help educate consumers about their new coverage and to connect them with primary care and preventive services that are right for them so they can live long, healthy lives.
- Resources online and in print include the Roadmap, Discussion Guide, videos, and more.
- C2C builds on existing networks of community partners to educate and empower newly covered individuals.

# 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

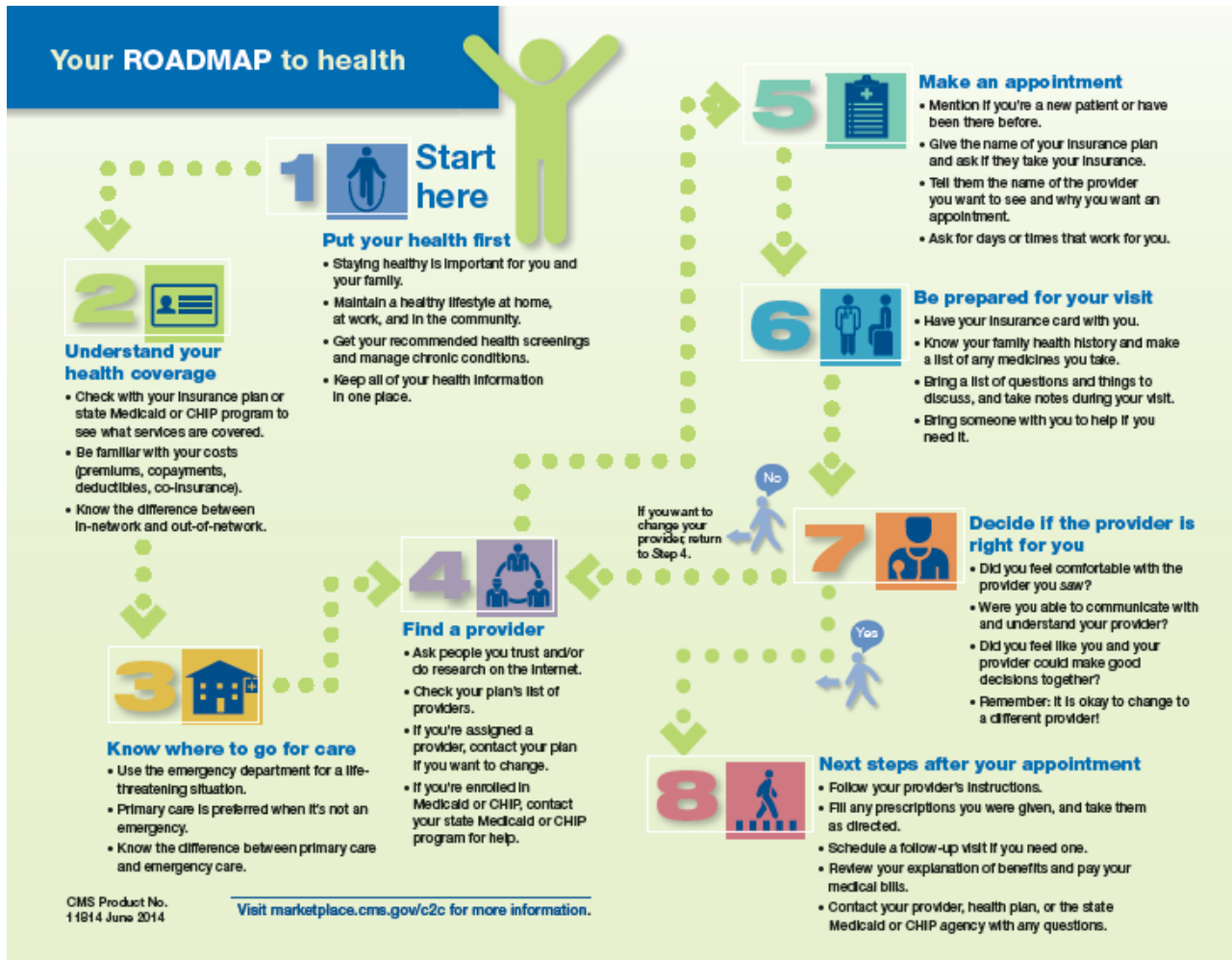


Print copies available from the CMS Clearinghouse

# How to Use the Roadmap

- **Start the Conversation.** Use the Roadmap and Discussion Guide as a tool to help people understand their new coverage and understand the importance of getting the right preventive services.
- **Help Consumers Understand.** The Roadmap has a lot of information for consumers. You can help them use it as a resource to refer back to as they journey to better health and well-being.
- **Personalize it.** You know your community. Consider adding local resources and information.

# Coverage to Care Roadmap

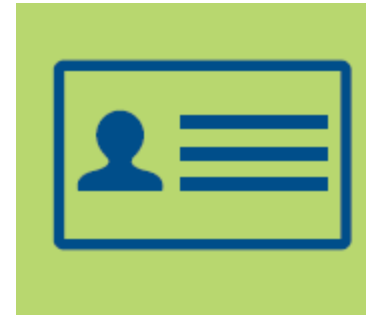


Online at [marketplace.cms.gov/c2c](http://marketplace.cms.gov/c2c)

# Step 2: Understand Your Health Coverage

## Key Points for Consumers

- Check with your insurance plan or state Medicaid CHIP program to see what services are covered.
- Be familiar with your costs (premiums, copayments, deductibles, coinsurance).
- Know the difference between in-network and out-of-network.



## Key Questions for Consumers

- *Do you know how to find a provider in your network?*
- *Can you estimate how much you will pay when you see a provider?*



# Key Terms On An Insurance Card

## Key terms

- 1) Member Name
- 2) Member Number
- 3) Group Number
- 4) Plan Type
- 5) Copayment
- 6) Phone Numbers
- 7) Prescription Copayment

The image shows two overlapping insurance cards. The top card is in English and the bottom card is in Spanish. Both cards have numbered callouts (1-7) pointing to specific fields. The English card has fields for Plan type (4), Member Name (1), Member Number (2), Group Number (3), PCP Copay (5), and Prescription Copay (7). The Spanish card has fields for Tipo de plan (4), Nombre del Socio (1), Número de Socio (2), Número de Grupo (3), Copago PCP (5), Copago de Recetas (7), and Servicio de Socio (6).

Field	English Card	Spanish Card
1	Member Name: Jane Doe	Nombre del Socio: Juan Torres
2	Member Number: XXX-XX-XXX	Número de Socio: XXX-XX-XXX
3	Group Number: XXXXX-XXX	Número de Grupo: XXXXX-XXX
4	Plan type	Tipo de plan
5	PCP Copay \$15.00 Specialist Copay \$25.00	Copago PCP \$15.00 Copago de Especialista: \$25.00 Copago de Sala de Emergencia: \$75.00
6		Servicio de Socio: 800-XXX-XXXX
7	Prescription Copay	Copago de Recetas Médicas \$15.00 Genéricos \$15.00 De Marca

# Sample Cost Tables

Having a baby (normal delivery)	
<ul style="list-style-type: none"> <li>Amount owed to providers: \$7,540</li> <li>Plan pays \$5,490</li> <li>Patient pays \$2,050</li> </ul>	
Sample care costs:	
Hospital charges (mother)	\$2,700
Routine obstetric care	\$2,100
Hospital charges (baby)	\$900
Anesthesia	\$900
Laboratory tests	\$500
Prescriptions	\$200
Radiology	\$200
Vaccines, other preventive	\$40
<b>Total</b>	<b>\$7,540</b>
Patient pays:	
Deductibles	\$700
Copays	\$30
Co-insurance	\$1,320
<b>Total</b>	<b>\$2,050</b>

Managing type 2 diabetes (1 year of routine maintenance of a well-controlled chronic condition)	
<ul style="list-style-type: none"> <li>Amount owed to providers: \$5,400</li> <li>Plan pays \$3,520</li> <li>Patient pays \$1,880</li> </ul>	
Sample care costs:	
Prescriptions	\$2,900
Medical equipment and supplies	\$1,300
Office visits and procedures	\$700
Education	\$300
Laboratory tests	\$100
Vaccines, other preventive	\$100
<b>Total</b>	<b>\$5,400</b>
Patient pays:	
Deductibles	\$800
Copays	\$500
Co-insurance	\$580
<b>Total</b>	<b>\$1,880</b>

Cost scenarios like managing Type 2 Diabetes and having a baby help consumers **understand what their care may cost, and how their plan may divide these costs.**

**NOTE: These are not real costs.**



# Primary Care vs. Emergency Care

Newly covered consumers may not know when to visit a **Primary Care Provider** and when to use **Emergency Department** services.

Primary Care Provider	Emergency Department
You'll pay your <b>primary care copay</b> , if you have one. This may cost you between \$0 and \$50.	You'll likely pay a copay, co-insurance, and have to meet your <b>deductible</b> before your health plan pays for your costs, especially if it's not an emergency. Your copay may be between \$50 and \$150.
You go when you <b>feel sick and when you feel well</b> .	You should only go when you're <b>injured or very sick</b> .
You <b>call ahead</b> to make an appointment.	You <b>show up when you need to and wait</b> until they can get to you.
You may have a short wait to be called after you arrive but you <b>will generally be seen around your appointment time</b> .	You may <b>wait for several hours</b> before you're seen if it's not an emergency.
You'll usually see the <b>same provider each time</b> .	You'll see the <b>provider who is working that day</b> .
Your provider <b>will</b> usually have access to your health record.	The provider who sees you probably won't have access to your health records.
Your provider works with you to <b>monitor your chronic conditions</b> and helps you improve your overall health.	The provider <b>may not know what chronic conditions you have</b> .
Your provider will <b>check other areas of your health</b> , not just the problem that brought you in that day.	The provider <b>will only check the urgent problem</b> you came in to treat but might not ask about other concerns.
If you need to see other providers or manage your care, your <b>provider can help you make a plan</b> , get your medicines, and schedule your recommended follow-up visits or find specialists.	When your visit is over you will be <b>discharged with instructions to follow up</b> with your primary care provider and/or specialist. There may not be any follow-up support.
In some areas, you may be able to go to an <b>Urgent Care Center</b> . If Urgent Care is available in your area, call your health plan before you go to find out how much you will have to pay.	

# Step 8: Next Steps After Your Visit

## Key Points for Consumers

- Write down your providers' instructions and healthy living tips so you can act on them every day.
- Schedule any follow-up or other visits and fill prescriptions so you don't forget or get too busy.
- Review any documents or bills you receive and contact your plan or state Medicaid or CHIP program if you have questions.




## Key Questions for Consumers

- *Do you know what to do now to keep yourself healthy?*
- *Do you know what number to call if you get sick and need to make a same-day appointment or come back?*

# Explanation of Benefits (EOB)

It's a summary of health care charges from the care you or those covered under your policy received. It is NOT A BILL!

**Explanation of Benefits (EOB)** Customer service: 1-800-123-4567



Statement date: XXXXXX      Member name:  
 Document number: XXXXXXXXXXXXXXXXXXXX      Address:  
**THIS IS NOT A BILL**      City, State, Zip:

Subscriber number: XXXXXXXXXX      ID: XXXXXXXXXX      Group: ABCDE      Group number: XXXXXXXX

Patient name:			Provider:			Claim number: XXXXXXXXXXXX					
Date received:			Payee:			Date paid: XXXXXXXX					
Claim Detail				What your provider can charge you		Your responsibility			Total Claim Cost		
Line No.	Date of Service	Service Description	Claim Status	Provider Charges	Allowed Charges	Co-Pay	Deductible	Co-Insurance	Paid by Insurance	What You Owe	Remark Code
1	3/20/14–3/20/14	Medical care	Paid	\$31.60	\$2.15	\$0.00	\$0.00	\$0.00	\$2.15	\$0.00	PDC
2	3/20/14–3/20/14	Medical care	Paid	\$375.00	\$118.12	\$35.00	\$0.00	\$0.00	\$83.12	\$35.00	PDC
			<b>Total</b>	<b>\$406.60</b>	<b>\$120.27</b>	<b>\$35.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$85.27</b>	<b>\$35.00</b>	

Remark Code: PDC—Billed amount is higher than the maximum payment insurance allows. The payment is for the allowed amount.

# Other Information in the Roadmap

- Glossary of health coverage terms.
- Resource list.
- Personal health tracking checklist.
- Health information page for coverage and provider information.

# What Can You Do?

- 1) Share C2C resources.
- 2) Customize resources to your community.
- 3) Consider incorporating the Roadmap into assister training.
- 4) Engage providers and issuers.
- 5) Let know how what works, and what other resources would be useful.

# More Information

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Get C2C Resources

[Marketplace.cms.gov/c2c](https://Marketplace.cms.gov/c2c)

Contact Us

[Coveragetocare@cms.hhs.gov](mailto:Coveragetocare@cms.hhs.gov)

[OMH@cms.hhs.gov](mailto:OMH@cms.hhs.gov)



# Adriana del Rio



**Outreach and Enrollment Specialist**  
Sunset Community Health Center





# SUNSET COMMUNITY HEALTH CENTER, INC.

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*"The clinic you can trust"*

[WWW.SUNSETCOMMUNITYHEALTHCENTER.ORG](http://WWW.SUNSETCOMMUNITYHEALTHCENTER.ORG)





# OUR COMMUNITY

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**FACT: Yuma is Arizona's warmest winter city and the sunniest year round place in the USA!**

## **Seasonal and Migrant Community**

Yuma County is the nation's third largest vegetable producer! *According to Arizona Farm Bureau*

## **Military Community**

Military bases contribute substantially to the local economy with the Marine Corps Air Station and Yuma Proving Grounds located in the county.

## **Tourism**

Every year Yuma County welcomes about 100,000 'Winter Visitors.'

## **Border Town Community**

The Mexican Freeport of San Luis Rio Colorado is located 23 miles southwest of Yuma.

## **Uninsured and Underserved**

Approximately 50% of user population is below Federal Poverty Level (FPL)

**SCHC is an important part of the healthcare safety net and continues to expand sites and services to meet the needs of the communities we serve.**



# SCHC “Get Covered” Campaign

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**In late 2013, Sunset Community Health Center began an aggressive campaign to educate the community on health care changes in 2014.**

The Campaign focused on offering assistance

- Marketplace/Medicaid Applications
- Creating Marketplace/Email Accounts
- Facilitating Plan Selection
- Educating about Insurance

Sunset Community Health Center offered

- 5 community **Health Insurance Enrollment Fairs**
- Over 30 **Educational Sessions & Public Presentations**
- Throughout Yuma County
  - Dateland, Wellton, Northend-Yuma, Central-Yuma, Somerton



# How We did It

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- Due to the **Harvesting Season** (*during Open Enrollment Period*) & **Migrant Population** , we accommodated events during weekends and late evenings to target this population
- Services were offered in English & Spanish
- One-on-one appointments were scheduled
- SCHC wrote letters to patients that could be potential applicants
- Used SCHC website to explain about the Marketplace
- Disseminated over 50,000 educational material such as brochures, flyers, partnered with local media outlets & local agencies to increase public awareness and education





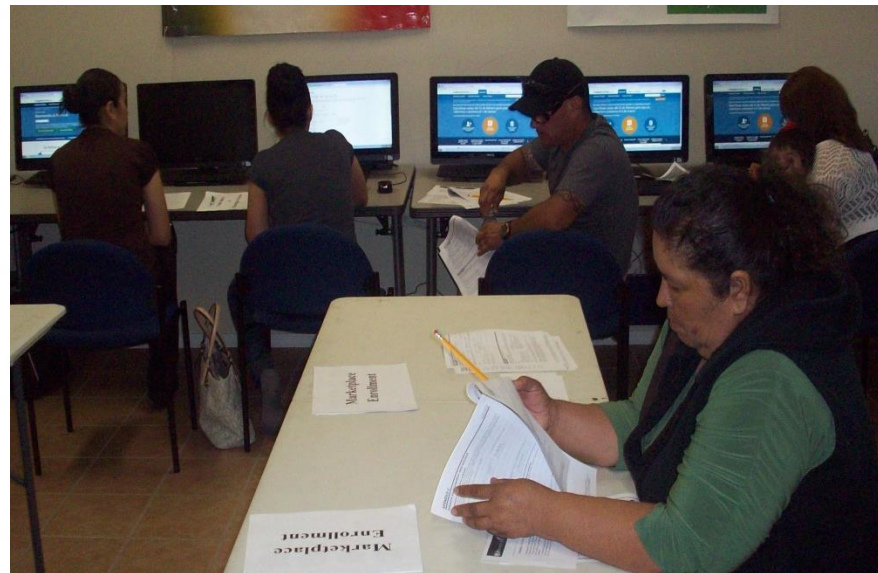
# Events







# Events





# Enrollment Results

October 2013 - April 2014

**1,311**

Health Insurance  
Marketplace

**1,689**

AHCCCS

**3,000**

Total  
Enrollments





**There's ALWAYS light at the end of  
the Tunnel ...!**





# SUNSET COMMUNITY HEALTH CENTER, INC.

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*"The clinic you can trust"*

## THANK YOU!



# Comments

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Please take a few minutes to share your feedback.  
[www.surveymonkey.com/s/DPP23FQ](http://www.surveymonkey.com/s/DPP23FQ)

Contact Us  
[omh@cms.hhs.gov](mailto:omh@cms.hhs.gov)