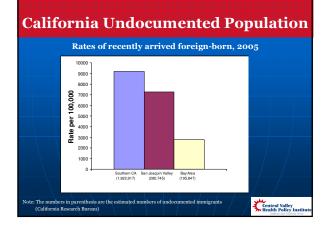




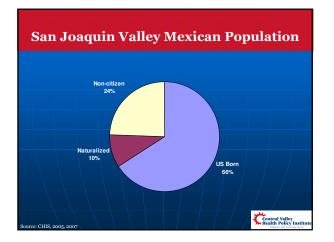


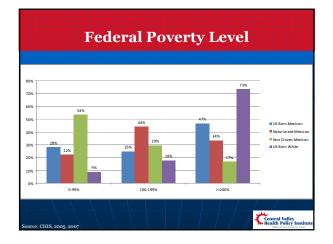
Background
Study methods
Findings
Policy recommendations

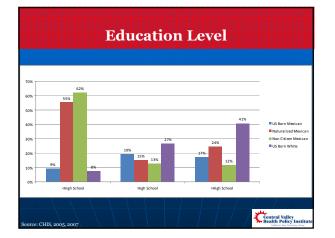
**Overview** 

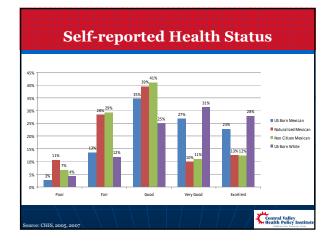


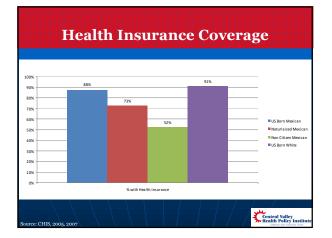


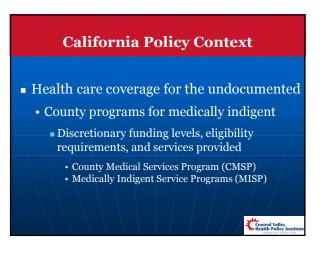












# **California Policy Context**

- Health care coverage for the undocumented
   Medi-Cal
  - Undocumented are not eligible for full-scope
  - Undocumented are eligible for:
  - Emergency Medi-Cal; Pregnancy only Medi-Cal
  - Emergency Medical Treatment and Labor Act
     Medicare participating hospitals must examine or treat patients' emergency medical conditions regardless of an individual's ability to pay and citizenship
    - Hospitals are required to provide stabilizing treatment for patients

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# 

 Children with mixed-status families could be shut off from Healthy Families along with other U.S.-born children due to state cuts

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What is the impact of serving undocumented patients on San Joaquin Valley safety net providers and how are immigrant groups experiencing care access?

# Study Methods Provider Perspectives

Telephone, in-person and electronic interviews with administrators/ representatives from 12 health care provider organizations in the San Joaquin Valley

 Public and private hospitals, rural health clinics, federally qualified health centers, and county clinic systems

#### Interview questions

- Volume of undocumented individuals accessing care through the safety net system
- Types of services used; impact on clinic/emergency services capacity
- Costs of services provided
- Percentage of bad debt and/or charity write-offs directly
   attributable to services provided to undocumented immigrants

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## Study Methods Patient Perspectives

#### 2 Promotoras Studies

- Studies used CHWs as promoters of health care access
- Intervention through referrals, follow up calls, or home visits
- Success was measured through a three-month follow up survey and interviews with Promotoras
  - <u>Access Indicators:</u> 1) increasing enrollment in health insurance programs 2) receipt of preventive care services, 3) establishing a usual source of care, and 4) improve self-efficacy

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## Study Methods Patient Perspectives

#### Immigrant Advocacy Groups

- Interviews with representatives from 2 immigrant advocacy groups
- Provided additional information on the health care experiences of undocumented Latinos

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#### Findings Provider Perspectives

- Providers generally do not collect information on patients' citizenship status, therefore, the number of undocumented immigrants using health services and the financial costs associated with treating them are unknown.
- Some providers reported a decrease in the number of undocumented Latino immigrants due to a reduction/ loss of employment in agricultural and construction jobs, but this perspective was not universal.

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## Findings Provider Perspectives

- Providers reported an increase in the overall number of uninsured populations attributable to unemployment and discontinuous enrollment in public programs.
- Providers are placing new emphasis on qualifying uninsured patients for federal, state, and county programs that offer reimbursements.
- Since these providers serve relatively more Medi-Cal beneficiaries, low reimbursements are an ongoing concern.
- Levels of uncompensated care have increased for all of the providers interviewed. As a result, providers are focusing on operational efficiencies and improving cash flow.
  - One provider discussed stepping up collections processes. Several providers are requiring payments up front or proof that the patient is able to pay for services.

#### Findings Provider Perspectives

- Providers working with programs to address access for low-income and uninsured
  - Local Children's Health Initiatives- enrolls children into health
     insurance programs (federal, state and local)
  - Health Initiative of the Americas- coordinates the availability of health resources for Mexican immigrants families through bilateral training, research, and health promotion activities
  - Central Valley Health Network- A consortium of 13 Federally Qualified Health Center's throughout the Central Valley
     Provides advocacy, training, technical assistance, resource
    - Forties advocacy, training, technical assistance, resource development, and program administration
       Focuses on critical issues affecting members and their patients'
    - Focuses on critical issues affecting members and their patients' access to health care

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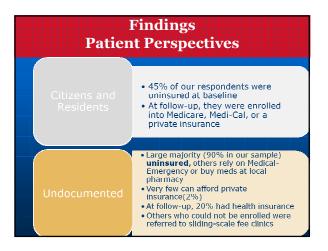
#### Findings Patient Perspectives

- Fear of being reported, navigating a complex health system, and language barriers exist when seeking care
- Waiting lists and stringent requirements block access

Patient Quote

"...for my people who do not know where or with whom to go with, or those of us who do not understand-we are scared of <u>immigration</u> agents."

#### Central Valley Health Policy Institute





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# **Policy Recommendations**

- Long-term sustainability plan for safety net providers
- Supplemental funding for services provided to the undocumented and uninsured
- Addressing cultural barriers to health care by holding providers accountable for meeting the CLAS standards

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# **Policy Recommendations**

- Institutionalizing community health workers/ promotores de salud by developing certification programs and specific reimbursements
- Include undocumented in national health reform plans
- Target health care access assistance to children in mixed-status households

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We would like to thank our funders				
California Program on Access to Care				
The California Endowment Centers for Medicare and Medicaid S	Services His	nanie Health	Somicos Roso	arch Grant Progra
Kaiser Permanente Fresno Communi			Services Rese	aren orant riogia
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