



Strategy 5: Using Innovative Strategies to Reach Vulnerable Populations



Overview and strategy excerpts from:
*Helping Individuals Obtain Health Coverage
Under the Affordable Care Act (2013).*
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Helping the uninsured enroll in health coverage is particularly challenging with vulnerable populations, including individuals who are homeless, who have a mental illness and/or substance use disorder or who are undocumented. However, it also is especially necessary because many of these individuals have limited financial resources and multiple chronic conditions.

All three hard-to-reach populations need the access to preventive and primary care that health coverage provides. Without such coverage, they may use hospital emergency rooms as their primary care site or forgo treatment all together. Additionally, accessing health coverage often is a critical first step on the road to recovery for individuals with a mental illness and/or substance use disorder.

Hospitals focus significant energy on developing and using innovative strategies to enroll vulnerable populations. Completing the enrollment process is the major challenge; renewal of coverage and ongoing compliance are continuing challenges. Many of these individuals do not have a permanent mailing address, reliable transportation, or access to telephones or computers.

Three Vulnerable Populations



Homeless
Individuals



Individuals with Mental Illness
and/or Substance Use Disorders



Undocumented
Individuals

INDIVIDUALS WHO ARE HOMELESS

Many individuals who are homeless are eligible for Medi-Cal or may qualify for charity or discounted care. To assist them many hospitals have adopted innovative charity care programs. For example, one organization leases seven beds at the local homeless shelter for patients whose physicians don't feel comfortable treating and releasing back to the streets. This gives the individuals who are homeless up to a three-day stay to have time to rest sprained ankles, get their glucose under control or address other such needs.

Numerous hospitals have outreach programs with city-operated homeless programs.

Hospitals also use eligibility and enrollment services vendors to assist with enrolling this hard-to-reach population. Vendor employees are able to visit shelters, and other places where individuals who are homeless gather, to locate specific patients and obtain the information necessary to enroll them in a health coverage program. Vendor strategies with this population include:



Many hospitals have **outreach programs** with city-operated **homeless** programs.

- Positioning staff in hospital emergency departments to make follow-up appointments for patients identified as homeless
- Giving individuals who are homeless taxi vouchers and bus tokens to meet at the local shelter or other public places to obtain the information required for an application
- Providing business cards and offering to help sign up individuals who are homeless for the CalFresh Program or other government assistance programs (Gaining health coverage may not be a high priority for some individuals who are homeless, but they may appreciate help with nutrition assistance or early Social Security eligibility. Vendors who gain the individual's trust by providing this assistance may have a higher likelihood of cooperation in enrolling the individual in health coverage.)
- Driving patients to their Medi-Cal appointments or to locations such as courthouses and the Department of Motor Vehicles to obtain copies of missing documentation

Because vendors often work under contract for multiple hospitals in the community, they can access their own records to determine if they have initiated or completed a prior application for a patient through a different provider. This helps to reduce duplicated efforts.

INDIVIDUALS WITH MENTAL ILLNESS AND/OR SUBSTANCE USE DISORDERS

Individuals with behavioral health issues often require similar strategies because their use of hospital emergency rooms is high, and success in completing coverage applications is often low. At the same time, the patients' need for access to health coverage is great. Research indicates that adults with serious mental illness die 25 years earlier than other Americans, largely due to treatable medical conditions.¹

Hospitals might consider using financial counselors who are specifically trained to assist patients with behavioral health needs, including alcohol and other substance abuse. The counselors' scope of responsibility may include driving to behavioral health facilities to obtain the patient's coverage eligibility-related documentation.

Another option is the use of contracted eligibility vendors whose employees can obtain the needed enrollment/re-enrollment information and documentation by contacting patients in person. Patients with mental health issues often do not answer letters and telephone calls, and residential address stability may be a problem. Contracted employees can set up appointments and meet with patients who regularly come in for services/programs.

INDIVIDUALS WHO ARE UNDOCUMENTED

Convincing individuals who are undocumented to seek enrollment in any health coverage program is challenging for a multitude of reasons, not the least of which is fear of deportation. Some communities have large populations of undocumented individuals, and like other uninsured populations, they often access hospital emergency departments when care is urgently needed. Many prefer to seek care at a specific hospital known by their families or friends. Hospitals provide the care and are not a threat to their immigration status. However, trust and fear remain significant barriers for patients.

It is important for hospitals to help eligibility and enrollment staff recognize and address the high level of fear they may encounter with patients who are undocumented. Having multilingual staff and/or translation services available are critical. To help develop patients' trust, hospitals can develop training programs to teach their staff ways to approach these patients in a non-threatening, non-authoritarian manner.



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CHA's Hospital Communications Toolkit

The national debate surrounding federal immigration policies provides an important opportunity for hospitals to reinforce the bond they have with patients and their local communities. Accordingly, CHA has developed the *Reassuring Our Communities Communications Toolkit*, which includes background information and sample content for use with internal and external audiences. The materials, many of which are in both English and Spanish, are formatted in Microsoft Word so they can be easily customized. The toolkit also includes sample of hospital policies and communications materials.

¹ R. Manderscheid, B. Druss, E. Elsie Freeman, "Data to Manage the Mortality Crisis," (2008) *International Journal of Mental Health* 2008; 37(2):49–68.