

Strategies for Behavioral Health Organizations to Promote New Health Insurance Opportunities

In Asian American, Native Hawaiian, and Pacific Islander Communities

The **Affordable Care Act (ACA)** provides new health care options for Americans. The ACA brings affordable health insurance coverage and expanded access to mental health and substance use disorder services to millions of Americans. Community



outreach and enrollment efforts can play a vital role in making sure that uninsured individuals learn about new health insurance opportunities. Organizations, including behavioral health providers, working with Asian American, Native Hawaiian, and Pacific Islander (AANHPI) individuals and families face unique outreach and enrollment challenges. Some of these challenges include an insufficient number of trained bilingual staff, lack of staff with the language and cultural skills to do effective outreach and engagement, distrust of or lack of information about the western health care system, great diversity between AANHPI subgroups, and financial barriers such as high-out-of-pocket medical expenses and prescription costs.

This strategy brief provides **10 strategies** that your organization can use to help introduce AANHPI individuals and families to the new health insurance options. Examples are provided from organizations that have successfully used these strategies.

Outreach and Enrollment Strategies

1 *Adapt Materials to Be Appropriate for Your Community*

There are a number of federal and state resources available for educating individuals about health care enrollment and insurance plans. Determine if these resources can be more effective if they are adapted for your community. Translate resources into other languages or consider putting the information into a format that is more likely to be accepted in your community. The Montgomery County Asian American Health Initiative, Maryland, creates culturally and linguistically tailored health education materials for the Asian American community in English, Chinese, Korean, Vietnamese, and Hindi.

2 *Provide a Personal Approach*

Using fliers and pamphlets, particularly if they are not in the appropriate language, is not sufficient for engaging AANHPI communities. Instead, rely on trusted members of the community to answer questions and address concerns. The Asian Pacific Development Center, Colorado, and Mary Queen of Viet Nam Community Development Corporation, Inc., Louisiana, use trusted community members to schedule meetings outside of standard working hours and set up meetings in the community.



3 *Use a Behavioral Health Peer Model*

Employing staff that reflect the diverse AANHPI communities can lead to increased trust, flexibility, and knowledge of the community needs. Peers are effective in doing outreach and engaging others because of their personal experience. Peers have a commitment to working with others who have similar lived experiences. The Asian Pacific Family Clinic, California, relies on bilingual peer staff to help educate and engage community members in their Health Wise integrated health and behavioral health program. Likewise, the Filipino American Service Group, Inc., California, uses a behavioral health peer model to assist homeless AANHPIs and others through individualized service plans, case management, and job training.

4 *Use Language Familiar to Your Community*

AANHPIs represent over 30 countries and ethnic groups that speak over 100 different languages. Some AANHPI communities have few native English speakers. It is essential to provide bilingual staff to help individuals understand and enroll in health insurance programs. The Special Service for Groups, California, employs multi-ethnic, multilingual staff members who communicate in English, Cantonese, Hmong, Igarot, Ilocano, Japanese, Khmer, Korean, Laotian, Mandarin, Samoan, Tagalog, Taiwanese, Thai, Vietnamese, and Visaiyan.

5 *Incorporate Community Perspectives*

Ensure that your staff are familiar with the community and aware of traditional customs, traditions, and sociopolitical histories. Develop strategies that take into consideration local politics, religious beliefs, immigration status, and historical experiences of the community. Asian Americans for Community Involvement (AACI), California, holds South Bay First Thursdays (SBFT). This is a monthly dinner/discussion to engage young AANHPIs interested in supporting community activities throughout the South Bay area. AACI invites panelists to SBFT to provide expert opinions to audience members, bringing professionals to

the community. SBFT provides a forum for incorporating community experiences and expert opinions into discussion about activities and strategies to promote health care.

6 *Partner With Community Organizations*

Partner with community programs, schools, hospitals, places of worship, and cultural centers to maximize your outreach. Community Health for Asian Americans, California, has developed collaborative relationships with over 50 other local health and non-health organizations. Together these organizations work to improve access to culturally competent services and to encourage awareness about mental health services. Likewise, the Hale Na'au Pono, Hawaii, works closely with community organizations to support their Ka Wahi Kaiaulu-Wai'anae Neighborhood Place program. These programs engage community members in supporting each other and provide information, education, and resources.

7 *Integrate Your Message Into Community Events*

Provide opportunities for individuals to learn about and enroll in health care programs. Incorporate your message into community events and celebrations. The Vietnamese Youth Development Center (VYDC), California, regularly hosts cultural events, such as the annual Autumn Moon festival. It provides community members with basic health insurance and Medicaid enrollment information. Similarly, Asian Counseling and Referral Services, Washington, brings its message to over 1,000 people through Walk for Rice. This annual 2.5 mile walk/run raises awareness and funds their food bank, which supports over 5,000 AANHPIs.

8 *Create a Central Location for Resources*

Create a resource library for community members to access health care information. This could be an online library or could be located in the community where interested individuals can seek information and access your staff. The Center for Healthy Independence, California, is a self-help center focused on the AANHPI population offering culturally and linguistically appropriate information and services.



9 *Use Media As a Resource*

To expand your outreach, use media resources such as local talk radio, television programs, church or temple newsletters, and community magazines. Electronic media such as a local websites, Facebook group pages, text messages, and emails can also be effective ways to reach your audience. Ethnic media outlets geared toward AANHPI audiences are especially effective. Hale Na'au Pono, Wai'aenai Community Mental Health Center, Hawaii, uses the Hawaiian Potpourri radio show and television program to share and disseminate information about the services they provide to a broad audience.

10 *Address Barriers*

Be aware of challenges that can keep individuals from receiving information, understanding the information, and enrolling in a health plan. The Fu Yau Project of the Richmond Area Multi-Services, Inc., California, integrates a mental health consultant as part of the staff at a community child development center. In this familiar environment, families are more likely to talk about health concerns.

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Please visit the National Network to Eliminate Disparities in Behavioral Health NNEDshare website at <http://share.nned.net> for more outreach and enrollment practices or for more information about any of the organizations featured in the series.

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In African American Communities

*The **Affordable Care Act (ACA)** provides new health care options for Americans. The ACA brings affordable health insurance coverage and expanded*



access to mental health and substance use disorder services to millions of Americans. Community outreach and enrollment efforts can play a vital role in making sure that uninsured individuals learn about new health insurance opportunities. Organizations, including behavioral health providers, working with African American individuals and families face unique outreach and enrollment challenges. Some of these challenges include homelessness, lower rates of health care utilization, and financial barriers such as high out-of-pocket medical expenses and prescription costs.

*This strategy brief provides **10 strategies** that your organization can use to introduce African American individuals and families to the new health insurance options. Examples are provided from organizations that have successfully used these strategies.*

Outreach and Enrollment Strategies

1 Understand Your Community's Preferences

There is diversity among African American communities across the nation and a one-size-fits-all approach is not likely to work. The New York State Center of Excellence for Cultural Competence, New York, conducted the Health and Wellness Photovoice Project in Northern Manhattan. The goal of this project was to better understand the preferences and needs within their community. People were provided with cameras to document their everyday lives. The stories behind the photographs helped to promote critical dialogue about important issues and generated insight into health care preferences.

2 Provide a Personal Approach

Provide opportunities for individuals to speak directly with staff. Encourage staff to get to know individuals, build rapport, offer to help complete applications/paperwork, answer questions, and provide easy-to-understand information. Project Brotherhood (PB),



Illinois, hosts a health clinic at a local barbershop. PB clinical staff members avoid professional distance by dressing in PB t-shirts, sweatshirts, and denim shorts. This allows for a more personal interaction with community members.

3 Involve Community Members in Outreach

Involve community members in your outreach and enrollment activities. Staff should reflect the population you are serving in terms of ethnicity, language, and socioeconomic status. The Mental Health Association of Rochester, New York, finds that employing staff within the same communities in which they live leads to increased trust, flexibility, and knowledge of the community needs.

4 Use Language Familiar to Your Community

There are a number of federal and state resources available for educating individuals about health care enrollment and insurance plans. Determine if these resources can be more effective if they are adapted for your community. Translate resources into different languages or consider putting the information into a format that is more likely to be accepted in your community. A coalition of community-based organizations in Minnesota, including the Saint Paul Neighborhood Network, KFAI Community Radio, ECHO Minnesota (Emergency, Community and Health Outreach), and Confederation of Somali Community, created the Egal Shidad project. This project used folk tales and other cultural approaches to create a series of stories on Somali health. The Somali language stories were used for radio, television, and in the classroom.

5 Engage Community Members on Their Own Terms

Staff need to be willing to meet with individuals outside of standard working hours. Strict time limits for meetings are not helpful. Time must be given for individuals and families to understand and, if needed, work through their distrust before they are able to fully engage. MonmouthCares, Inc.,

New Jersey, and the Cape Atlantic Integrated Network for Kids, New Jersey, find that flexible scheduling is necessary when attempting to engage with individuals and families in the African American community.

6 *Make It Easy to Get Help*

Meet individuals in locations where they already are comfortable. Meeting locations need to be flexible and may include neighborhood centers, schools, and in someone's home. Village Wrap, New Jersey, provides information, services and enrollment assistance to individuals, including those who are homeless, at bus stations, parks, courtrooms, crisis centers, supermarkets, hair salons, and barber shops. Even if staff are not available on site, organizational contact information is clearly visible so that individuals can reach program staff.

7 *Integrate Your Message Into Community Events*

It is important to provide opportunities in the community for individuals to learn about and enroll in health care programs. Find ways to plan or be involved in community events and celebrations. Set up an information booth during a community event or parade, host a round table panel, provide a presentation during a community meeting, or distribute information at community centers, shelters, soup kitchens, and churches. Prime Time Sister Circles, a group intervention for improving women's health, meet in a variety of community settings nationwide and have been launched in conjunction with community health events and campaigns.

8 *Partner With Community Organizations*

Maximize your outreach through partnerships with neighborhood programs, schools, hospitals, shelters, churches, and cultural centers. Develop a relationship with leaders within your community and let them know what you are doing. Educate key community members such as church leaders, administrators at the local community center and health care facility, and other community leaders on the latest health reform information. The National Association of Pastors' Spouses, Tennessee, works with churches and religious institutions to raise awareness through health education. They also train faith leaders on health issues facing their communities.



9 *Use Media As a Resource*

Use electronic media such as emails, webpages, text messages, and social media to expand your outreach. Consider reaching audiences through local talk radio programs, television programs, church or temple newsletters, and community magazines. Media outlets geared toward African American audiences are particularly effective vehicles for outreach. The Mercer County Family Support Organization, New Jersey, uses Facebook to foster a sense of community and increase knowledge of health care opportunities among African Americans in their community.

10 *Address Barriers*

Be aware of the challenges that keep individuals in your community from receiving and understanding their health care options. Barriers can include homelessness, lack of childcare, inflexible work schedules, lack of transportation, and low levels of reading comprehension. Atlantic Cape Family Support Organization, New Jersey, makes available cell phones, snacks, literature, and games. Moreover, peer companions are able to assist in completing paperwork.

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Additional Resources

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In Latino and Hispanic Communities

The **Affordable Care Act (ACA)** provides new health care options for Americans. The ACA brings affordable health insurance coverage and expanded access to mental health and substance use disorder



services to millions of Americans. Community outreach and enrollment efforts can play a vital role in making sure that uninsured individuals learn about new health insurance opportunities. Organizations, including behavioral health providers, working with Latino and Hispanic individuals and families face unique outreach and enrollment challenges. Some of those challenges include homelessness, isolated communities with few English speakers, past experiences with discrimination, and financial barriers such as high out-of-pocket medical expenses and prescription costs.

This strategy brief provides **10 strategies** that your organization can use to help introduce Latino and Hispanic individuals and families to the new health insurance options. Examples are provided from organizations that have successfully used these strategies.

Outreach and Enrollment Strategies

1 Adapt Materials to Be Appropriate for Your Community

There are a number of federal and state resources available for educating individuals about health care enrollment and insurance plans. Translate resources into different languages or consider putting the information into a format that is more likely to be accepted in your community. Campesinos Sin Fronteras (CSF), Arizona, found that using *fotonovelas* is a powerful way to provide health and behavioral health care information and education to Latinos in the border region. *Fotonovelas* are short booklets that usually portray a dramatic story using photographs and captions.

2 Provide a Personal Approach

There is diversity within Latino and Hispanic communities. A one-size-fits-all approach is not likely to work. Hire bilingual, diverse staff from the community to help build understanding and trust into your outreach and enrollment efforts. Bienvenido Community Solutions, Indiana, trains community members nationwide to serve as facilitators. These community members support discussions with immigrants to improve their mental health and quality of life, and to engage with their local community.



3 Use a Behavioral Health Peer Model

Involve community members and behavioral health consumers in your outreach and enrollment activities. Staff should reflect the population you are serving in terms of ethnicity, language, and socioeconomic status. The New Jersey Association of Mental Health and Addictions Agencies, Inc. (NJAMHAA) assigns peer specialists to places of worship in the community. Peer specialists and community support workers make resources available during Sunday church services. They are also available to answer questions from congregants.

4 Use Language Familiar to Your Community

Providing assistance in Spanish is important to reaching monolingual Spanish speakers or limited English proficient (LEP) individuals. *Promotores de salud*/community health workers (CHWs) are bilingual individuals from the community who have an understanding of the community served. CHWs generally share the ethnicity, language, and socioeconomic status of the community members they serve. These social attributes and trusting relationships enable CHWs to serve as a liaison or intermediary between health and social services and the community. They facilitate access to and enrollment in services and improve the quality and cultural and linguistic competence of service. There are several examples throughout this document of potential roles for *promotores de salud*/CHWs.

5 Engage Community Members on Their Own Terms

It is important to provide many opportunities for individuals to learn about and enroll in health care programs. Find ways to become involved in existing community celebrations. The HOY Recovery Program, New Mexico, conducts pilgrimages in association with local churches. The pilgrimages commemorate significant social and spiritual events and help raise awareness about risk factors associated with community problems.

6 Partner With Community Organizations

Maximize your outreach through partnerships with neighborhood programs, schools, hospitals, churches, and cultural centers. The NJAMHAA works with schools and hospitals to inform and enroll individuals in their state health care programs. They train partner organizations to become culturally sensitive and competent. The partner organizations use bilingual individuals as *promotores*, peer specialists, community support workers, educators, and patient navigators.

7 Host Community Events

Health fairs (*ferias de salud*) are an effective and popular way to engage a broad range of Latino community members. The Albuquerque Center for Hope & Recovery (ACHR), New Mexico, organized and hosted a *Feria de Salud* focused on behavioral health and the ACA. The *Feria de Salud* provided a safe and trusted venue for businesses and individuals in the community to learn about, and discuss, health care options and emerging health care opportunities.

8 Communicate Directly with Community Members

Ensure that outreach campaigns reach individuals and families in places that they already go to, such as schools, doctor's offices, homeless shelters, and public transportation and on communication channels they regularly access, such as the Internet and television. Outreach campaigns using culturally appropriate and in-language messaging ensures that campaign messages are engaging and easily understood. The "Asegúrate" Latino media partnership, known as "Get Covered," aims to educate Latinos about the ACA and how to enroll in health coverage. The Get Covered campaign is a partnership between the California Endowment; Covered California, the state's health insurance marketplace; and the largest Spanish-language media outlets including Univision, Telemundo, and La Opinión-impreMedia. The campaign slogan "*tu bienestar al alcance*" ("your well-being within reach") was chosen based on research indicating that prevention messaging resonates strongly within the Latino and Hispanic communities.



9 Use Media As a Resource

Media such as talk radio, television channels, church newsletters, and community magazines provide opportunities to expand outreach efforts. Media outlets geared toward Latino audiences are especially effective. The Colorado Department of Health Care Policy and Financing, with partners, developed and produced the video series, "*Encrucijada: Sin Salud no Hay Nada*." The series consisted of 12 half-hour episodes that provided information on health insurance programs and ways to access health care. The format was developed to meet the interest of the community through a Spanish-language soap opera (*telenovela*). The *telenovela* involves health issues affecting Hispanics and the services the state provides.

10 Address Barriers

Be aware of the challenges that keep individuals in your community from receiving services and understanding their health care options. Barriers can include homelessness, childcare challenges, inflexible work schedules, lack of transportation, low levels of reading comprehension, need for English translation, and more. CSF finds that recent immigrants and families in their area have problems accessing services due to immigration status and the fragmented health system. Through their *promotores* program, Ventanillas de Salud, staff work with the Mexican Consulate and U.S. health care facilities to help clients identify and navigate medical care.

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More resources focused on outreach and enrollment of Latinos are available from the National Latino Behavioral Health Association at <http://www.nlbha.org/>.



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services to millions of Americans. Community outreach and enrollment efforts can play a vital role in making sure that uninsured individuals learn about new health insurance opportunities. Organizations, including behavioral health providers, working with American Indian and Alaska Native (AI/AN) individuals and families face unique outreach and enrollment challenges. Some of these challenges include homelessness, confusion around eligibility for AI/AN-specific and general social services programs, difficulties with transportation, distrust of the public health care system, and financial barriers such as high out-of-pocket medical expenses and prescription costs.

This strategy brief provides **10 strategies** that your organization can use to help introduce AI/AN individuals and families to the new health insurance options. Examples are provided from organizations that have successfully used these strategies.



Outreach and Enrollment Strategies

1 *Adapt Outreach to Be Appropriate for Your Community*

Ensure that staff is culturally competent and aware of cultural values. Integrate culture into your outreach approach. Help ensure that the local health care system is also aware of culture. The Missoula Indian Center, Montana, provides cultural sensitivity training to the community assistance programs who work with American Indian clients.

2 *Provide a Personal Approach*

Using mail service and distributing pamphlets is not sufficient for engagement, especially with persons who are homeless. Staff need to be available in-person to discuss questions and concerns with individuals. The Helena Indian Alliance, Montana, employs patient advocates. The patient advocates develop and maintain relationships with individuals interested in enrolling in health insurance programs. The advocates walk individuals through the application process, assist in

completing paperwork, and answer enrollment questions. First Nations Community Healthsource, New Mexico, informs patients of Medicaid requirements at the time of an appointment confirmation. This ensures that patients bring in the required documents needed for enrollment. Once the patient is on site, a Medicaid enrollment specialist assists in enrollment at the clinic.

3 *Designate Staff for Enrollment and Outreach*

Designate an Enrollment Specialist within your organization who can lead and direct your organization's outreach and enrollment activities. This person should be knowledgeable about the state regulations and enrollment processes. The Seattle Indian Health Board (SIHB), Washington, serves a large uninsured population in an area that borders three reservations. SIHB found that access and understanding of Centers for Medicare & Medicaid Services (CMS) programs has been a major barrier to the AI/AN populations in their area. To address this barrier, SIHB created an Enrollment Specialist position focused on CMS programs and the application process.

4 *Use Language Familiar to Your Community*

Be aware of challenges that keep individuals from receiving and understanding their health care options. One major challenge is health literacy and English proficiency. The United American Indian Involvement Los Angeles, California, tests their written material for literacy level and cultural sensitivity using community partners.

5 *Engage Community Members on Their Own Terms*

Time must be given for individuals and families to connect, especially if they are experiencing homelessness. If needed, time must also be given for individuals and families to work through their distrust before they are able to fully engage. The Oklahoma City Indian Clinic staff, Oklahoma, makes itself accessible at clinic locations and by mail, phone, or in other convenient settings. Staff is flexible regarding duration of meetings. They ensure that individuals are comfortable and can ask questions regarding coverage options.



6 Partner With Community Organizations

Partner with neighborhood or tribal programs, schools, hospitals, churches, and cultural centers in order to identify eligible individuals and expand outreach. Denver Indian Health and Family Services (DIHFS), Colorado, regularly partners with Native agencies such as the Denver Indian Center and the Denver Indian Family Resource Center. This partnership allows DIHFS to expand their outreach effort and for AI/AN-specific information to be made available at multiple locations in the community.

7 Integrate Your Message Into Community Events

It is important to provide many opportunities for individuals to learn about and enroll in health care programs. Find ways to plan or be involved in community events and celebrations. The Native American Rehabilitation Association of the Northwest (NARA), Oregon, regularly seeks opportunities to reach individuals and families in the community. Their Healthy Native Kids Outreach Team participates in events sponsored by the Portland Public Schools, local Native-owned businesses, community pow-wows, and the NARA Wellness facility.

8 Communicate Directly with Community Members

Outreach and enrollment can be facilitated by connecting with other public programs that engage AI/ANs. Individuals who are homeless can be reached through soup kitchens and shelters. The Indian Health Care Resource Center, Oklahoma, works with the local Indian Education programs to distribute information to parents. They speak at parent meetings and publish information in school newsletters. SIHB, Washington, also coordinated efforts with local Indian Education programs and school districts. They send letters to families about health coverage and distribute Medicaid applications at back-to-school events. The American Indian Health Services of Chicago, Illinois, developed an outreach Benefits Coordination referral form that is distributed in their medical and behavioral health clinic for clients to complete. The form provides a checklist of health insurance, employment, in-kind and cash assistance, and tribal enrollment resources for which clients may be eligible. This allows for easier outreach and integration of health needs, as clients can be referred to other services.



9 Use Media As a Resource

Radio stations, television channels, and the Internet are powerful resources for reaching out to AI/AN communities/tribes. Emails, community webpages, text messaging, and social media can be used to expand your outreach. Helena Indian Alliance, Montana, uses newsletters, brochures, outreach presentations, and Facebook to provide resources and information to the community. In addition, American Indian Health and Family Services, Inc., Michigan, has created videos for both clients and staff training to promote education on the benefits of insurance enrollment.

10 Attend to Feedback From the Community

Getting feedback from the community allows you to monitor outreach and enrollment work and determine which outreach activities are appropriate and needed. The North American Indian Alliance (NAIA), Montana, regularly administers a satisfaction survey, along with an annual community needs assessment evaluation. These evaluation methods allow NAIA to objectively determine the areas in which they can improve and identify any barriers or obstacles.

About the Strategies for Behavioral Health Organizations to Promote New Health Insurance Opportunities Series

This strategy brief is part of a series that highlights strategies that behavioral health organizations can use to disseminate information on the Affordable Care Act and help individuals with behavioral health conditions learn about health insurance opportunities. Strategy briefs are available that address strategies for working with the following communities:

- **African American,**
- **American Indian/Alaska Native (AI/AN),**
- **Asian American, Native Hawaiian, and Pacific Islander (AANHPI), and**
- **Latino and Hispanic.**

The content for each strategy brief was developed in partnership with the Substance Abuse and Mental Health Services Administration based on case studies provided by the National Latino Behavioral Health Association, National Leadership Council on African American Behavioral Health, National Asian American Pacific Islander Mental Health Association, and National Council of Urban Indian Health.

Please visit the National Network to Eliminate Disparities in Behavioral Health NNEDShare website at <http://share.nned.net> for more outreach and enrollment practices or for more information about any of the organizations featured in the series.

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Additional Resources

The Marketplace Call Center provides educational information about the Health Insurance Marketplace and assists consumers with application completion and plan selection. In addition to English and Spanish, assistance is available in more than 150 languages through an interpretation and translation service. Contact the call center at 1-800-318-2596; hearing impaired callers using TTY/TDD technology can dial 1-855-889-4325.

HealthCare.gov is the official website of the Health Insurance Marketplace, providing the latest information about health insurance coverage and enrollment.

Resources for individuals and organizations providing outreach and enrollment assistance are available at <http://marketplace.cms.gov/>.

The Center for Consumer Information and Insurance Oversight (CCIIO) provides regularly updated information on health insurance policies and regulations at <http://cms.gov/CCIIO/>.

Information on health reform for American Indians/Alaska Natives can be accessed at <http://tribalhealthcare.org/>. Information specific to Urban Indian populations can be found at <http://urbanindianhealth.org/>.



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