

Strategies for Behavioral Health Organizations to Promote New Health Insurance Opportunities

In American Indian and Alaska Native 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 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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