

# Innovations

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## Breaking Down Barriers to Limited English Proficiency (LEP) Outreach

Community partners throughout Florida, who work towards enrolling uninsured, but eligible children, into Florida KidCare, the state's Children's Health Insurance Program and Medicaid, report that communication is one of the larger barriers for enrollment.

Yun, et. al. (2013) found that nearly one quarter of U.S. children have at least one foreign-born parent. These families make up a culturally and linguistically diverse population of individuals whose well-being is compromised by disparities in healthcare access and utilization of services. The Center for Poverty Research (2014) states, "These new Americans, most of whom are U.S. citizens, are more than twice as likely as children of natives to have no health insurance."

The Committee on Child

Health Financing (2014) shows that the Children's Health Insurance Program (CHIP) and Medicaid has increased children's insurance coverage, access to care, utilization of primary and preventative services, and generally positively impacted measures of health and wellbeing. The data also reflects that racial and ethnic disparities in access and utilization decreased as a result of CHIP enrollment.

The American Academy of Pediatrics (2014) recommend that in order to increase CHIP and Medicaid enrollment for limited English speaking (LEP) families, outreach programs need to:

- Implement targeted outreach for CHIP to LEP families
- Develop culturally appropriate outreach and enrollment materials

- Produce linguistically appropriate materials that can be used by pediatricians to encourage enrollment in CHIP
- Encourage partnerships between community-based organizations that work with LEP families and organizations that work to enroll uninsured children

This Innovations report will look at the need for targeted LEP outreach within Florida; collaborations by organizations that work with refugee and LEP populations; and demonstrate how specific outreach strategies can translate into children receiving and maintaining health care coverage within Florida's CHIP and Medicaid program, Florida KidCare.



Florida KidCare outreach  
National Refugee Day Celebration,  
Tampa, FL

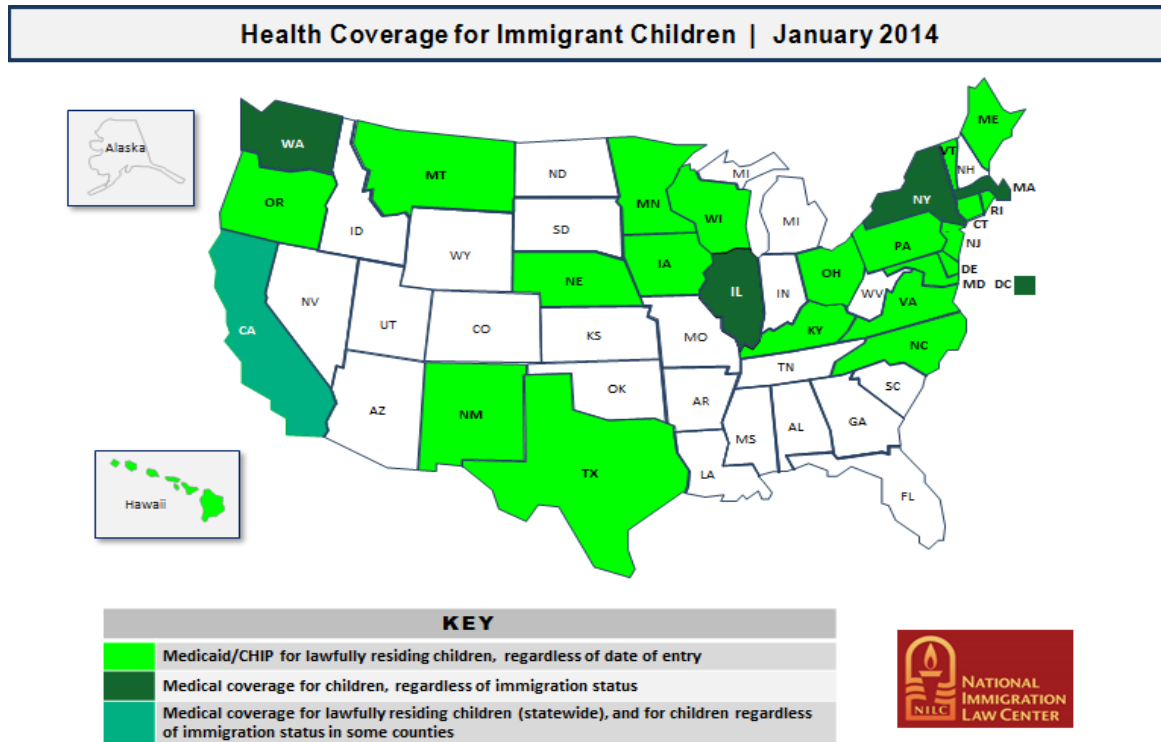


Florida KidCare outreach  
ESOL Parent Event Levy County  
School District, Bronson, FL



Joel Velasco, FL-CKF  
LEP Coordinator and Florida  
KidCare Consumer, Tampa, FL

## Why Florida KidCare Outreach is Vital



The National Immigration Law Center (2002) found that “more than one out of every three children who are eligible for Medicaid, but not enrolled, live in an immigrant family.” Many limited English speaking (LEP) families have fears about applying for healthcare coverage. These fears are the result of misinformation about the application process, yet they are rooted in legitimate concerns that need to be dealt with through empathy and knowledge. A best practice to reach LEP families is to work with bi-lingual entities that have established relationships with immigrant, refugee, and LEP families. Application Assistors, outreach workers, and anyone else assisting LEP families apply for health care coverage for their children need to comprehend families’ concerns.

According to the National Center for Education Statistics (NCES), Florida is third in the nation in the percentage of public school students identified as LEP. During the 2010-2011 school year, 243,684 students were identified as LEPs in Florida, and while the majority of these children are U.S. citizens and therefore eligible to receive Medicaid and CHIP benefits, they are more likely to lack health insurance than children of U.S. born parents. The Florida Department of Education reports that an estimated 69% of children of immigrant parents in Florida are U.S. citizens; 160,552 children identified as LEP were born in the United States (plus an additional 6,029 of Puerto Rican heritage).

Lessard and Ku (2003) cite “Culturally appropriate, community-based outreach is essential to ensuring LEP children's participation in health insurance programs.” Outreach and enrollment workers need training to understand LEP families' concerns, time to develop relationships of trust, and technical support from immigrant rights and legal services organizations to accurately interpret eligibility rules.

Additionally, this study found “partnerships that bring together the resources of health groups and the expertise of culturally competent community based organizations can further LEP children's enrollment.” It was through this concept that led to *Florida Covering Kids & Families* creating the LEP Outreach project, specially designed outreach strategies and materials to work one-on-one with LEP families and organizations that work with LEP families.

## Florida Covering Kids & Families LEP Outreach

**“Even when eligible for public health insurance coverage, immigrant families often do not enroll, because they fear that receiving benefits might jeopardize family members' immigration status.”**

**(Lessard & Ku, 2003)**

Parents who do not speak English can find the Florida KidCare application extremely complex and the application process difficult to navigate. Adding the uncertainty about the application process to the fear of losing or reporting immigration status and it is apparent as to why LEP families may not enroll into Florida KidCare.

*Florida Covering Kids & Families'* Limited English Proficiency (LEP) Outreach Project was designed to reach and enroll underserved and vulnerable children through school-based and community outreach targeting LEP families.

Outreach efforts focus on geographic areas with diverse populations and high rates of uninsured children who may qualify for Florida KidCare. Notably, the counties with the highest rates of LEP families are correlated with the highest rates of uninsured children. This project collaborates with schools' English for Speakers of Other Languages (ESOL) programs, faith-based communities, Refugee Task Forces, and community partners to organize outreach events and enrollment opportunities for LEP families. These opportunities provide openings to reach families about health care coverage for their children in their native language and create bridges to build trust in and awareness of Florida KidCare.

*Florida Covering Kids & Families*

works to improve enrollment and retention among children of LEP families with a targeted focus on utilizing the following outreach strategies:

- Increase knowledge of Florida KidCare benefits and the enrollment and renewal process among teachers, staff, and school-based paraprofessionals that work with LEP families
- Expand upon the culturally and literacy appropriate train-the-trainer model for local capacity building with LEP community partners
- Provide technical assistance and materials for school and community programs serving LEP and refugee children
- Improve outreach to parents of LEP children in the form of parent workshops and the availability of multilingual Florida KidCare materials
- Organize school-based enrollment events and application assistance trainings with bilingual paraprofessionals and parent volunteers

Initially funded under the CHIPRA Cycle I grant as the Refugee and Asylee Outreach Program, the LEP project trained and established application assistance sites throughout the state with

refugee service providers. Under CHIPRA Cycle II, the project expanded to working with English-Language Learners through school-based outreach and providing one-on-one application assistance to LEP families.

During this past year, with funding through *Connecting Kids to Coverage*, the project has expanded its application/renewal network to include community social service organizations the LEP population is already utilizing, such as community health centers and faith-based organizations to create bridges that build trust in and awareness of Florida KidCare. There have been 488 LEP children assisted with Florida KidCare applications and/or renewals.

As part of this initiative, *Florida Covering Kids & Families* engages the following key partners in these outreach efforts: Department of Education Refugee School Impact Grant (RSIG) programs; English for Speakers of Other Languages (ESOL) programs, teachers, and paraprofessionals; rural and migrant early education and charter school programs; and the Department of Children and Families' Refugee Youth & Family Programs.

## Department of Children & Families' Refugee Services Program

In 2013, the Florida Department of Children and Families (DCF) Refugee Services Program recorded the largest population of refugees in the nation: 29,461 with 5,420 under the age of 18. The top seven countries of origin for refugees were Cuba, Haiti, Iraq, Burma, Venezuela, Egypt, and Colombia.

Refugee Services is a statewide program of DCF that is 100% federally funded and all of the money for services comes through the Office of Refugee Resettlement within the Department Health and Human Services. These services are available for those who have fled their country because of a well-founded fear of persecution based on race, religion, nationality, social group or political opinion and has been granted refugee status in a country of asylum. Refugee Services also includes Cuban and Haitian entrants with additional services for victims of human trafficking.

Many community-based, social service providers, businesses, and health care professionals are not familiar with the refugee resettlement process. The resettlement agencies, through the Reception and Placement Program, are the organizations that meet the refugee at the airport and work intensively with them for 30-90 days. At the end of that time period, the resettlement agency discharges the refugees from care and refugee providers under contracts with DCF Refugee Services step in to assist. In Florida, 71,214 refugees received services funded by Refugee Services in 2013.

A continuum of services is provided to refugees to help them become self-sufficient. The DCF program, through its contracted providers, offers English classes for adults at no charge; youth mentoring and tutoring program; employment programs; programs for professionals; and career-laddering assistance. There are also childcare services available, and the integration assistance is available for those who are most vulnerable and unable to thrive with the existing services.

One of the orientation pieces that refugee service providers give to new families is an introduction to the health care system. A critical component of this service is assisting refugees with applying for healthcare coverage for their children. DCF reports that the refugees coming into Florida have healthcare expenditures that are very different from U.S. citizens.

Children under the age of 18 living with a parent can receive extended Medicaid eligibility; however it is crucial for refugee providers to determine the child's uninsured status in order to get the application processed in a timely manner.

## A Family in Need

One LEP family has agreed to share their Florida KidCare application experience for this report but requested that their identity be kept anonymous. This is the story of "the Jones family:"

The Jones family was prepared to move out of the state to obtain health care coverage for their child. The Jones' child has a chronic health condition and was in need of medical attention. Even though their child is a U.S. citizen, as undocumented parents, they believed that their child's Florida KidCare application was being processed as a non-citizen due to their immigration status. The parents faced months of frustration and fear due to not being able to articulate their situation to Florida KidCare customer service.

A local community partner in Plant City, FL referred the Jones' to FL-CKF's LEP Project. The parents explained that they had grown fearful because they were undocumented and they thought that something could happen to them if they continued to try and get health care coverage for their child. They were scared of being deported or being placed in jail. The family just assumed that the child had been categorized as undocumented, because her parents were undocumented.

The LEP coordinator assisted the family to troubleshoot the issue and encouraged the family to advocate for themselves and their child by instructing them to provide the proper citizenship documentation to process their child's application. Subsequently, the Jones' child has received Florida KidCare health care coverage and has obtained needed medical care.

Florida KidCare community partners can help LEP families, like the Jones family, apply for health care coverage for their uninsured children through providing trainings and application assistance to ESOL programs; collaborate with migrant farms; and partner with faith-based organizations offer services to LEP families. Contact Joel Velasco, LEP Coordinator for FL-CKF at [jvelasc1@health.usf.edu](mailto:jvelasc1@health.usf.edu) for information on LEP partners in your area.

## Department of Children & Families' Refugee Service Program *Continued*

The refugee providers are trained to help families access their Medicaid accounts and print out temporary Medicaid cards in order for children to seek medical treatment as soon as possible. However, there are situations when a refugee family has started working and earning income, and the family may no longer be eligible for Medicaid. This is when the other Florida KidCare programs (MediKids, Healthy Kids, and Children's Medical Service Network) become beneficial and important for that family. Janet Blair, Community Liaison with DCF Refugee Services, supported the need for assistance stating that "the system to obtain health care coverage for children is difficult for refugee families to translate and navigate. These families need Florida KidCare community partners to work with the Refugee Services and assist families through the Florida KidCare application process, follow up with the families on their application status, and assist them through renewal." Florida KidCare local coalitions should be inviting local refugee services program to your coalition meetings and collaborating with Refugee Services to offer assistance to one of the most vulnerable populations within Florida.

Supporting DCF's need for Florida KidCare community partnerships to assist refugee families obtain health care coverage for their children, Williams and Rosenbach (2007) found that tailored outreach increases the merit of CHIP's message of saving time, money, and resources, which then increases enrollment opportunities for "hard-to-reach" populations, such as refugees and LEP families.

## Application Assistance Best Practices for Working with LEP Families

Recruit application assisters who are bilingual, bicultural and have relationships with immigrant and refugee communities.

Provide application assisters with basic training on immigrant eligibility for benefits, but emphasize that there are many exceptions.

Ensure that application assisters form relationships with resources, such as legal services offices, which can assist them in serving families.

Ensure that all application assisters have training and resources to enable them to assist families with concerns about sponsor liability, public charge, and other immigration concerns.

Encourage application assisters to think carefully about ways to avoid asking applicants if they or their family members are undocumented.





### Credits

Agency for Health Care Administration

The Center for Poverty Research

Committee on Child Health Financing

Department of Children and Families

Florida Covering Kids & Families

The Kaiser Family Foundation

Lawton & Rhea Chiles Center for Healthy Mothers & Babies

Lessard, G. and Ku, L. The Future of Children Journal

K. Yun, et. al. Maternal and Child Health Journal

The National Immigration Law Center

USF Health

Williams, S. and Rosenbach, M. Health Care Financing Review

