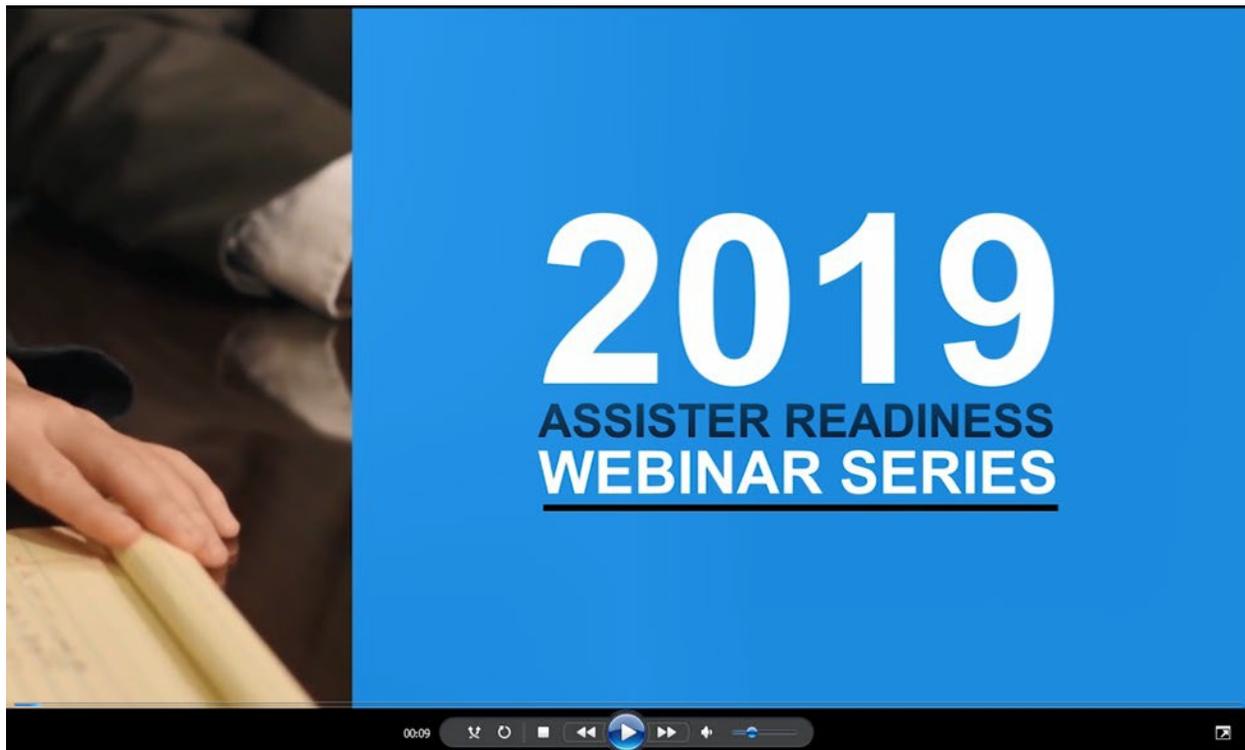


Working Effectively with Vulnerable and Underserved Populations – Part 1



This document is a transcript of the Marketplace Assister Technical Assistance Webinar.

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Disclaimer

This presentation is intended as training and technical assistance for Marketplace assisters (i.e., Navigator grantees, certified application counselors (CACs) and other assisters). This presentation is not a legal document.

- The slides summarize complex statutes and regulations and do not create any rights or obligations.
- Complete and current legal standards are contained in the applicable statutes and regulations.
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Cover Slide

Hello, I'm Elissa with the Consumer Support Group for the Marketplace. I'll be guiding you through today's webinar along with my colleague, Melissa MacLean. Welcome to the 2019 Assister Readiness Webinar Series! Content in this module focuses on the *Making Coverage Accessible* topic of *Working Effectively with Vulnerable and Underserved Populations – Part 1*.

Assister Readiness Webinar Series Overview

Here's an overview of the entire 2019 Assister Readiness Webinar Series. As you can see, the module on *Working Effectively with Vulnerable and Underserved Populations – Part 1* is situated in the Week 4 installment of the series and falls under the topic of *Making Coverage Accessible*.

If you have not yet viewed the other modules under this week's topic, be sure to do so in advance of our Friday LIVE webinar. On Friday's webinar, you'll have an opportunity to ask questions, so remember to take notes and please bring your questions.

Titled Slide: Working Effectively with Vulnerable and Underserved Populations Part 1

Consumers who are considered vulnerable and/or underserved may face barriers that make it difficult to get health coverage and basic health care services. Today, we will go over part one in our two-part series on working with vulnerable and underserved populations.

Underserved, Vulnerable, and Special Needs Populations

The Department of Health and Human Services (or HHS) characterizes underserved, vulnerable, and special needs populations as communities that include members of minority populations or individuals who have experienced health disparities. These include Latino populations, African American populations, American Indian and Alaska Native populations, refugees, individuals with Limited English Proficiency, young adults, new mothers and women with children, individuals with disabilities, and Medicaid-eligible consumers who are not enrolled in coverage despite being eligible for Medicaid.

Vulnerable Populations

Vulnerable populations include consumers who share one or more of the following characteristics. First, they may have a high risk for multiple health problems and/or pre-existing conditions, or they may have limited life options (such as financial, educational, or housing options), or they may display fear and distrust in accessing government programs or disclosing sensitive information about family members.

Vulnerable Populations (Cont.)

Or they may have a limited ability to understand or give informed consent without the assistance of language services. For example, consumers with LEP or cognitive impairments. They may have mobility impairments or a lack of access to transportation services. They may have a lowered capacity to communicate effectively or face any type of discrimination.

Underserved Populations

Now let's take a look underserved population characteristics. Underserved populations include consumers who share one or more of the following characteristics. They may:

- Receive fewer health care services.
- Encounter barriers to accessing primary health care services (such as economic, cultural, and/or linguistic barriers).
- They may have a lack of familiarity with the health care delivery system, or face a shortage of readily available providers.

Now I'll turn it over to Missy to talk about cultural competence.

Cultural and Linguistic Competence

Thanks Elissa. To be culturally and linguistically competent, you should be able to first identify, understand, and respect differences in consumers' cultural beliefs, behaviors, and needs. And second, respond appropriately to consumers based on their culture and language needs, which may include making referrals or asking for help (such as getting interpretation and translation services).

As a best practice, you should ask consumers how they perceive or identify themselves, their partners, and their family members. Then you should be careful to use the same terms. You can ask consumers to help clarify these terms, if appropriate. And you should treat each person as a unique individual. We encourage you to review and follow the HHS Office of Minority Health National CLAS Standards for Culturally and Linguistically Appropriate Services, which give guidance on providing culturally and linguistically appropriate services to consumers.

Treat Each Consumer as Unique and Avoid Assumptions

Keep in mind the following tips and examples when you work with consumers from different backgrounds. You should always respect the unique cultural needs of all consumers. For example, some consumers prefer to seek out traditional healer services like using herbs or acupuncture to treat illness, which is different from seeking service providers who are trained in Western medicine.

When helping consumers with these beliefs, it might be useful to acknowledge your respect for their beliefs — whether or not you agree with them — and explain the potential benefits of getting coverage. You should also avoid making assumptions about a consumer's culture or identity based on the consumer's appearance, name, or other outward characteristics. For example, a consumer's gender identity may be different from your perception—so we recommend using gender-neutral terms such as “you” or “your spouse.”

Consumers with Pre-existing Conditions

Now, we'll get into a few examples of vulnerable or underserved populations and go over some tips for assisting them. First, let's talk about consumers with pre-existing conditions. Health insurance companies generally can't refuse to sell a policy to consumers or charge them more just because they have a pre-existing condition. They also can't charge consumers more based on their gender under any new individual or small employer policy. Certain existing plans, including grandfathered individual market plans, may not offer these protections. Consumers enrolled in these plans may want to enroll in new plans that offer these protections.

Married Same-Sex Couples

Married same-sex couples are another vulnerable population. The Marketplace treats married same-sex couples the same as married opposite-sex couples. This means that if an insurance company offers coverage to opposite-sex spouses, it must do the same for same-sex spouses. As long as a couple is legally married under the laws of the jurisdiction where the marriage occurred, an insurance company cannot discriminate against them when offering coverage.

This is true regardless of the state where the couple or either spouse lives; the state where the insurance company is located; or the state where the plan is offered, sold, issued, renewed, operated, or in effect. Additionally, health insurance companies offering non-grandfathered group or individual health insurance coverage can't use marketing practices or benefit designs that discriminate on the basis of certain factors, including a consumer's sexual orientation.

The Marketplace also treats married same-sex couples the same as married opposite-sex couples when they apply for APTC, CSRs, Medicaid, and CHIP. Like married opposite-sex couples, married same-sex couples must file a joint federal tax return for the year that they're seeking help paying for coverage through the Marketplace to be eligible for APTC and CSRs.

Consumers with Low Literacy

Another vulnerable population you might encounter is consumers with low literacy. This is because the ability to read, write, and speak English or another language can affect how well consumers understand their coverage options. Consumers may be embarrassed or ashamed about their low literacy and try to hide the fact that they have difficulty reading or writing. But they may say or do things that could indicate to you that they have low literacy. For example, a consumer may say things like: *I forgot my glasses, My eyes are tired, What does this say, I'll take this home for my family to read, or I don't understand this.* Or a consumer may do things like: ask other people to take notes or fill in forms, return forms that are only partially filled out, or call or visit you several times to clarify things.

Tips for Working for Low Literacy Consumers

So, if you notice any of these indicators, these are some tips we recommend for working with consumers who have low literacy: use commonly used words, ask open-ended questions, read written instructions out loud and check that consumers understand you, speak slowly, draw or point to pictures, posters, and other visuals, use plain language and simple words, especially when you describe difficult coverage terms.

Tips for Working for Low Literacy Consumers (Cont.)

Additionally, write information down and share it with the consumer who can read it in greater detail at home. Present complex information in small amounts to avoid potentially overwhelming the consumer, and you can provide or direct consumers to Coverage to Care materials. The link to this website is on your screen (<http://www.hhs.gov/healthcare/coverage-to-care/>).

Consumers with Low Health Literacy

Health literacy in general is the ability to get and understand basic information about coverage and health care services, use the information about coverage and health care services to make decisions, and follow instructions for treatment.

Generally, consumers who are health literate understand how to use their health coverage and navigate health coverage options available to them. But patients with low health literacy may have difficulty understanding that they have to pay premiums on time and copays during a provider visit, finding providers and services, filling out complex health forms, and sharing their medical history with providers.

Consumers with Low Health Literacy (Cont.)

They may also have difficulty seeking preventive health care, knowing the connection between risky behaviors and health, managing chronic health conditions, and understanding directions on taking medicine.

Tips for Working with Low Health Literacy Consumers

And here are some tips we recommend for working with consumers who have low health literacy: avoid using acronyms, avoid technical language when possible, explain any necessary technical terms, ask consumers to repeat back key things that you say to them, and give information in small chunks.

Tips for Working with Low Health Literacy Consumers (Cont.)

Instead of "qualified health plans," you can say "health plans that have been approved by the Marketplaces." Instead of "premium tax credit," you can say "a tax credit that can be used to lower your monthly health insurance payments." And just know that it may take additional time to help these consumers. And now I'll turn it back over to Elissa.

How to Engage with Older Consumers

Thanks Missy. Next, let's focus on working effectively with older consumers. Remember, you should always be respectful of everyone you help. To best help older consumers, you should be aware that they may face challenges with the following: First, they may have disabilities. The need for reasonable accommodations increases with age. You may need to provide reasonable accommodations to ensure that you're effectively communicating health coverage options to older consumers if they have cognitive, hearing, speech, and/or vision impairments, as well as consumers with physical or intellectual disabilities. We'll talk more about reasonable accommodations in a later module this week.

Another challenge older consumers may face is low health literacy. Recognizing and addressing this challenge will help you provide effective assistance to this population. For instance, you may need to spend time explaining health insurance terminology and how health insurance works before helping older consumers compare their health coverage options.

How to Engage with Older Consumers (Cont.)

Older adults may also be accompanied by caregivers. To the greatest extent possible, consumers seeking coverage should be the primary source of information and decision-making about their health care coverage, even when the consumers are accompanied by caregivers, authorized representatives, guardians, or family members. These individuals can definitely participate in the discussion of the consumer's health care; but, when others are authorized to represent the consumers, you should make sure that the consumers are the focus of the discussion and participate in the conversation as much as possible.

Working Effectively with Older Consumers

Older consumers may be eligible for several health coverage options, including coverage through the Marketplace, job-based coverage, and public programs such as Medicare and Medicaid. Providing older consumers with accurate information about their options is an important part of your job. For example, you may work with:

- Older consumers applying for health coverage through the Marketplace who aren't yet eligible for Medicare, or
- Older consumers who need information about transitioning from their Marketplace coverage to Medicare.

Older Consumers with Incomes under 138 Percent of the FPL

Coverage options for adults under the age of 65 may vary by state. In states with an expanded Medicaid program, consumers who are younger than age 65 with incomes under 138 percent of the federal poverty level, or FPL, who are not eligible for Medicare may qualify for the expanded Medicaid adult eligibility group.

However, once a consumer become Medicare-eligible, they will no longer be eligible for the expanded adult Medicaid eligibility category and may be automatically disenrolled. State Medicaid agencies are required to consider all other bases of Medicaid eligibility before terminating a beneficiary's Medicaid coverage.

Regardless of whether an older consumer is eligible for Medicaid, there are programs that may help pay for Medicare costs, including Medicare Savings Programs, which provide help paying for Medicare costs, and "Extra Help" paying for prescription drug costs.

Assister Readiness Webinar Series Resources

Congratulations on completing the *Working Effectively with Vulnerable and Underserved Populations – Part 1* module of the Assister Readiness Webinar Series! Please proceed to the next Week 4 module, *Working Effectively with Vulnerable and Underserved Populations – Part 2*. Also, feel free to visit the Assister Readiness Webinar Series Resources listed on this slide, including: training materials for Navigators and other assisters and the assister webinars webpage.

If you have topical questions about this presentation: Navigators please contact your Project Officer directly. CACs can email the CAC Inbox at CACquestions@cms.hhs.gov.