

***New Mexico
Human Services Department
Health Insurance For Native Americans***

**Presentation to
Legislative Health & Human Services Committee**

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New Mexico Human Services Department

Highlights for Today's Discussion

1. Summary of *"Barriers to Obtaining Health Insurance Among Native Americans in New Mexico"* (January 2006)
2. HSD's Efforts to Address Findings
3. American Recovery and Reinvestment Act (ARRA)
- Native American Implications



Summary of “*Barriers to Obtaining Health Insurance Among Native Americans in New Mexico*” Study

- ◆ **Focus Group Study to Find Out Why Native Americans Are Disproportionately Uninsured in New Mexico**
 - 28% of Native Americans Compared to 11% of Non-Hispanic Whites
- ◆ **First Study of Its Kind in the Nation**
- ◆ **Commissioned by HSD with RWJ Foundation Funds**
 - Part of *Insure New Mexico! Council* Studies
- ◆ **Conducted by Research and Polling, Inc.**
 - Fall of 2005
- ◆ **Report in January 2006 On *Insure New Mexico!* Website**
<http://www.insurennewmexico.state.nm.us/Inm/index2.html>



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Findings – 1

1. Native Americans Consider Health Insurance to Be Important

- Provides access to high quality health care
- Promotes peace of mind
- Provides coverage for services not available through the Indian Health Services (IHS) or on an emergency basis
- Provides access to specialized plans such as dental and vision
- Serves as a safety net in addition to IHS



Findings – 2

2. Reasons For High Uninsured Rates Among Native Americans Are Financial, Logistical And Cultural

- High cost
- Feeling that health care for Native Americans is federal government's responsibility – through IHS
- Cultural barriers
- Lack of trust
- Complexity of bureaucratic process
- Lack of understanding the process
- Lack of education and outreach by insurance companies



Efforts to Address Findings – 1

◆ Aggressive Outreach for Medicaid

- Numerous outreach events in Native American communities
- Radio ads on Native American stations
- Work with local tribal offices on Medicaid enrollment
- CoLTS outreach efforts by HSD & ALTSD staff and CoLTS MCOs
- Working Disabled Individual (WDI) program targeted outreach
- Eligibility training for 100+ Native American providers & consumers
 - In 2008 & 2009, in collaboration with Indian Health Service (IHS)
 - Two-day trainings on IHS services, Medicaid benefits, Managed Care Organizations' (MCOs') benefits, Veterans' Administration, and Medicare
- Required semi-annual training by MCOs
 - In 2009, with Lovelace, Blue Cross Blue Shield, Presbyterian, Molina, AmeriGroup, & Evercare to increase Native American awareness & knowledge of benefits
- Special behavioral health tribal outreach by OptumHealth



Efforts to Address Findings – 2

- ◆ **Out-Stationed Income Support Division (ISD) Workers in Eight (8) Native American Communities**
 - ISD workers placed in IHS and other Native American sites to increase enrollment by assisting, accepting and processing Medicaid & Food Stamp (SNAP) applications
 - Shiprock, Crownpoint, Gallup, Albuquerque, Santa Fe, Acoma-Canocito-Laguna, Mescalero & Zuni
 - Sites opened in 2006 & 2007
 - Zuni Pueblo initiative separate from IHS; office opened May 2009
 - Takes special funding for staff and significant contracting and computer arrangements with the sites
- ◆ **Simplified Recertification Processes Help Native Americans**
 - 12 month recertification effective July 1, 2006
 - Fax, phone, e-mail, mail or in person – centralized recertification unit
 - Verification of existing information rather than new application
 - Reconsidering continuous eligibility per CHIPRA



Efforts to Address Findings – 3

- ◆ **Implementing New Citizenship Documentation Rules from CHIPRA**
 - Matching Social Security Numbers thru Social Security Administration January 2010
 - Using newly allowed tribal documents
 - Determining how to enroll for 90 days pending documentation
- ◆ **Southern Institute Special Reviews**
 - Founded in 1990 to improve well being of children and families
 - Nationally recognized expertise in addressing issues for low income families and children
 - HSD participated in Medicaid retention initiative: “Achieving Stability in Medicaid and the Children’s Health Insurance Program”
 - Reviewing/analyzing out-stationed workers at IHS facilities to make recommendations for improvement to increase effectiveness and efficiency



ARRA Implications for Native Americans

- ◆ **ARRA Funding Replaced General Fund Used to Operate the Medicaid Program**
 - Helped to support Medicaid services & prevent deep reductions
 - 80,150 Native Americans enrolled, 17.7% of total Medicaid enrollment (Jan 2009)
 - 45% of total Native American Population enrolled in Medicaid (U.S. Census 2005 - 2007 three year average)
- ◆ **Health Information Technology (HIT) Funds for Providers**
 - Funding and rules not yet released
- ◆ **Other ARRA Funds for Native Americans**
 - \$500 million for IHS to improve health care and boost economy in Native American communities
 - HHS funding for New Strengthening Communities Fund
 - Indian Health Construction funding in President's FFY10 Budget
 - State, tribes to get stimulus money for child care, vaccines

