

# Policy Brief

Building Quality Affordable Health Care for ALL New Yorkers



Health Care For All New York

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## HCFANY 2014 Agenda to Address Health Disparities Based on Race and Ethnicity

Racial and ethnic minorities often receive inferior care and have worse health outcomes than white Americans.<sup>1</sup> African American infants die prematurely at rates nearly twice that of whites. The mortality rate for diabetes is more than 40 percent higher for Latinos than for whites; the African American mortality rate is even higher.

The Affordable Care Act (ACA) provides a major opportunity for New York to advance health equity by expanding access to health insurance for racial and ethnic minorities. The new health insurance marketplace, NY State of Health (NYSOH), offers more affordable health coverage to individuals, families and small businesses. Individuals and families whose incomes qualify can receive tax credits to lower their monthly premiums.

However, much more needs to be done to significantly reduce racial and ethnic disparities in coverage, access and care. This policy brief proposes additional steps the State can take to promote health equity in New York, including strengthening initiatives that are already in place.

### Target outreach and enrollment efforts

The State should focus on enrolling people in “hard to reach” communities where people of color, low-income people and immigrants live and work. This will reduce health disparities, while helping New York meet its goal of enrolling at least 1 million people in three years. New York should:

- Partner with community-based organizations to engage target populations;
- Use proven techniques to reach racial/ethnic minorities, like outreach at community events and door-to-door canvassing;
- Market to ethnic and other targeted media outlets; and
- Use “trusted messengers” and relevant images in promotional materials and advertising.

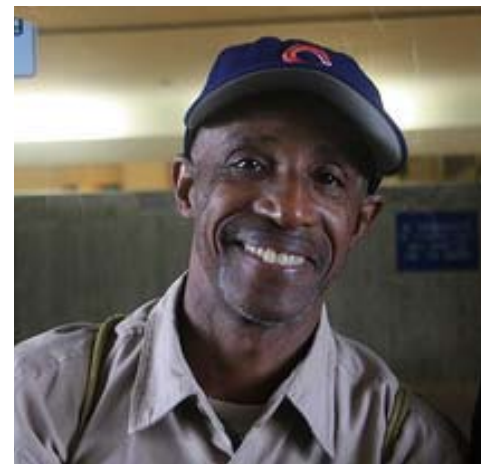
### Support Consumer Assistance Programs

Community Health Advocates (CHA), works through community groups, often based in hard to reach communities, to help people use their coverage once they have it. Since 2010, CHA has completed over 160,000 cases. The Legislature should adopt the Governor's budget proposal to authorize \$2.5 million in federal funds to support this program.

### Improve “no wrong door” policy on NY State of Health

NYSOH should continue to improve its effective “no wrong door” policy, allowing New Yorkers to enroll in public and private plans. The State should rapidly move to ensure that all Medicaid populations can enroll directly through NYSOH. This will help keep more New Yorkers covered, since many people, including people of color, frequently move between public and private plans as their incomes fluctuate.

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Enrollment efforts should use culturally appropriate strategies to target “hard to reach” communities.

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## Address disparities based on language

Roughly 2.5 million New Yorkers are limited English proficient (LEP). The State should take the following steps to ensure that Marketplace staff, navigators, consumer assistance programs, health plans and participating providers are able to serve the wide array of cultures in New York:

- Assure that the Marketplace, and navigator and other consumer assistance programs make multilingual staff, interpreters, and telephonic interpretation services available to LEP consumers;
- Translate basic plan information, such as plan benefit summaries, into the State's six most spoken languages other than English, in compliance with the Governor's Executive Order No. 26;
- Translate critical features of the NYSOH website, including the enrollment portal, into these six languages, starting with Spanish;
- Use photos that depict diverse populations on the NYSOH website and in written materials that are distributed to the public; and
- Provide adequate training and other requirements to ensure culturally competent services.

## Enhance and enforce standards for health plans sold through the Marketplace

NYSOH should enhance its standards to ensure that insurance carriers take positive, documented steps to address health disparities.

For example, the Marketplace should ensure that provider networks include a sufficient number of providers who speak languages other than English.

The Marketplace should also strongly enforce existing requirements mandating that health plans develop quality standards to address disparities. The State should establish a monitoring system to track elements like the provision of language services.

## Collect and disseminate adequate data on health disparities

The State Department of Health should require insurers and health care institutions to regularly report data on health care usage and outcomes by race/ethnicity, primary language, income, gender, sexual orientation, gender identity, and disability status. This data should be compiled so that the public can make informed decisions about their health care and policymakers can develop policy solutions and hold plans and providers accountable. As a first step, NYSOH should publicly report the demographics of applicants and enrollees by these factors on a monthly basis. Without demographic information, the public has no way of knowing whether the Marketplace is adequately serving each of the state's diverse communities.

## Create ongoing mechanisms to address health disparities

The State should strongly enforce the prohibitions in the ACA of discrimination based on race, national origin, sex, gender identity, disability and age, and other civil rights laws like the Americans With Disabilities Act (ADA).

Non-discrimination should be a guiding principle of Marketplace operations, including outreach, enrollment and eligibility determination processes, the selection of covered benefits, and network adequacy standards. The NYSOH should establish a permanent unit responsible for investigating and enforcing civil rights laws. Finally, the Marketplace should establish a stakeholder task force to provide guidance on reducing health disparities.

## Increase overall affordability and quality of health care coverage

Ensuring high quality coverage of all types will help to reduce health disparities. Strengthening public programs, like Medicaid, is particularly important, since people of color are more likely to be enrolled in public plans. New York can advance health equity through broader improvements to the health care system, including:

- Establishing a "Basic Health Program" to serve low- to moderate-income New Yorkers;
- Merging the individual and small group markets to increase affordability of individual coverage; and
- Proactively educating consumers about Managed Long-Term Care (MLTC) and the Fully Integrated Duals Advantage (FIDA) programs, which serve some of the most vulnerable New Yorkers.

1. Significant health disparities also exist for women, people with disabilities, lesbian, gay, bisexual and transgender people. Visit [www.hcfany.org](http://www.hcfany.org) for information on the specific needs of these New Yorkers. Many of the proposals in this Policy Brief would help advance health equity these New Yorkers.