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# Lessons Learned: Community-Based Organizations Are a Key to Immigrant Medicaid Enrollment



Refugee resettlement agencies and other community-based organizations are trusted voices for immigrant community members across New York State. They help immigrants apply for safety net programs during times of need, relay important information, such as who public charge does and does not affect, and more. Immigrants rely on these organizations to help them enroll for services such as Medicaid due to challenges created by language barriers, the inability to read or write or the lack of knowledge about how and where to apply.

The process of Medicaid enrollment for refugees is fundamentally different than for other

immigrants. Refugee resettlement agencies interact with all levels of the state safety net programs such as housing, healthcare and childcare to name just a few. Refugee resettlement agencies take on refugee Medicaid enrollment before the individual arrives so that these new community members do not have to try to adjust to a new life in a new country and try to understand a complicated health insurance system. The refugee resettlement process is particularly relevant in upstate New York, where many immigrants are refugees.

Through interviews with a number of refugees across New York State, we found that although refugees are new to the United States, the refugee resettlement agencies do a tremendous job alleviating stress and challenges for the new arrivals by enrolling them for Medicaid. When refugees were asked about their experience with Medicaid enrollment, they all told a similar story: when they arrived at the airport, they were given a package of documents that included their active Medicaid health insurance.

Richard, a refugee from Russia stated: “Everything has been explained to us and it seems to us we know everything about Medicaid.” This sentiment is shared among the many other refugees who were interviewed. They all expressed that they did not have any difficulties and all of the enrollment work was done for them. Christian, a refugee from Afghanistan with a Special Immigrant Visa (SIV), talked highly of his caseworker who filled out the forms for him: “she does everything for me...she supports me all the time.”

Refugee resettlement agencies help with Medicaid renewals as well. Linda, a refugee from Burma, stated that the agency does her renewal every six months and that “They are always there, step by step. They are very helpful.”

Where do immigrants that aren't refugees go to receive help with their Medicaid applications?

Many of them rely on friends, family and staff from trusted community organizations. For example, Annie, an immigrant from Mexico, used to look for someone in the community to help her fill the forms out in English because when she arrived in 1989 the forms were only available in English. Now a staff member at Make the Road New York, a trusted community organization for many immigrants, fills it out for her. Daniel, an immigrant from El Salvador, also receives help from Make the Road and he stated that "It was very easy. They explained everything...and the amicability and patience was excellent." Other immigrants like Bernard, an undocumented immigrant from Mexico, relied on family to help: "the forms are in English, and I don't speak English, so my son is the one that filled it out."

Community-based organizations can help relieve some of the challenges and stress for immigrants applying for Medicaid. These organizations tend to have translators who can help call the Medicaid office when needed. Maria, an immigrant from Benin, also received help from a local CBO with her Medicaid forms and she said "She [the staff member] helped me a lot as I don't speak English well. She is the one who called them [Medicaid]." She also said that her daughter who speaks English helps explain the forms to her. Lynn, an immigrant from Nepal, also expressed that the CBO that she went to was extremely helpful with the process: "It went as smooth as possible. I was asked to collect a few documents which I did. It just went well."

**These interviews highlight the importance of community-based organizations helping immigrants access Medicaid. A key recommendation of this report is that *the state should promote, advertise, and encourage immigrants to use navigators at community-based organizations and trained enrollers to ensure that immigrants have a less difficult time applying, they understand the requirements, they have access to a translator and more.*** These trained Medicaid enrollment professionals can provide the same services that staff at refugee resettlement agencies do, however their needs to be more community education on these services because many immigrants are not aware that these services are available.

Vanessa, an undocumented immigrant from Mexico who had to search for information to find help enrolling for Medicaid, said:

"I would have liked for someone to tell me the required documents and I also would have liked for someone to tell me where to go because I didn't know where to go. I asked this information from 311 and they guided me but not everyone knows about this 311 service..."

Vanessa also went on to state that a better job needs to be done communicating that these resources are available to immigrant communities:

"First I think there should be more information to communicate to the community. For example, more education because most people that I know or who are wanting to do this have no idea how to do it. They say among themselves 'if you go here or if you go here they can help you' but normally they don't know the system and so more information about Medicaid perhaps an informative sheet or pamphlet because I think community centers will help but there's no public wall with that information."

Lucia, an asylee from Colombia, said she also had to search for help. First, she went to the library, but they didn't have helpful information. She eventually found a community organization who helped her and where she later became a Medicaid enroller herself:

“There was a lady that actually became my best friend in this country, it's a beautiful story. She's a very old woman now and she's living in retirement in Florida. I love her she was like a second mom to me. She was in the community and helped so many people. She's the one that told me I qualified for health insurance and my daughter too. She said let me do the application for you. She worked for [community organization] and she was kind of a facilitator and enroller. After a couple years of knowing each other, she recommended that I be a facilitator and enroller and I worked for [community organization] for 8 years.”

These interviews reveal that when immigrants have professionals or community-based organizations helping them enroll for Medicaid, the process is easy. These are not the same sentiments we hear from immigrants who did not have help from a community-based organization. Immigrants who apply without the help of a CBO express challenges and experiences with language barriers, technology, document requirements, discrimination and more.

Lucia, an immigrant with political asylum from Colombia, summed up the work of the community-based organizations well:

“If it's not for these organizations the community would sink. I really applaud the job that they do. I really think that these community organizations and community centers are helping so many people and they are underestimated in this country. But they do a great job...basically they give you the political asylum, welcome to the United States and then whoop welcome to the ocean and see how you can swim because there is not any other support to back you up. The community organizations are definitely doing their job and people tell you that...and other community members tell you don't go to the library the library doesn't give you that information go to [local community organization].”

While praise of the role of community-based organizations should be tempered by the fact that our interviewees were often referred to us through CBOs, we emerged from the interview convinced that community-based organizations are essential to immigrant communities. In some cases, their assistance with Medicaid enrollment can save a life.

Alexandra, an immigrant from Mexico, who was diagnosed with Cancer expressed extreme gratefulness to the staff member who helped her obtain Medicaid coverage:

“I never imagined this would happen... I spent many years without insurance and if it wasn't for this woman that helped me get the insurance I wouldn't have gotten it and I never imagined in 100 years I would be diagnosed with cancer...”

Immigrant New Yorkers appreciate the help they receive and some even want to return the favor. Lucia, an immigrant from Colombia, who received help from a CBO and later worked for them enrolling other immigrants for Medicaid expressed her gratitude by giving back to her community:

“That’s what I always say. If they give me this much help, I want to give it back and I have been working with that organization ever since.”

It is not only the CBO staff members that immigrant New Yorkers are thankful for. They express gratitude towards the Medicaid program itself for its coverage. Greg, a refugee from Congo, expressed that he prays for the Medicaid company because he is grateful for their help:

“We pray to that company [Medicaid] ‘may god bless them’ because you know when you come to a strange country and you have opportunity to get treatment without stop it’s very good...you know I have the problem with hearing if I was supposed to pay every day for medication with all my family...5 kids...it was supposed to be hard but we get medication and everything we have doctors that treat us very well...God bless them.”

Alexandra, an immigrant from Mexico who receives treatment for cancer, is thankful for health insurance coverage that she would not have received in her birth country:

“I really want to say thank you thought to Medicaid because they’ve provided all the medications and things I needed to face this illness...it’s all been provided to me by Medicaid. Even the taxis are included. I try not to take a taxi when I’m feeling good enough to walk. I’m not going to make them pay when I am good enough to walk... In my country I would never have all the help I’ve been receiving.”

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