

MAR 30, 2022 / IMMIGRATION RESEARCH INITIATIVE

## “If you don’t understand English, you may need help”: Navigating Challenges of the Medicaid System



Navigating the Medicaid enrollment process is difficult for nearly everyone. Eligibility requirements are complicated, many types of documents can be required, and the language used in instructions is often quite technical. This process is all the more difficult for immigrants who find it challenging to read or speak English, who don’t have access to computers, or who don’t have an understanding of how the healthcare system in the United States works.

Under New York’s Executive Order 26, direct service providers in the state are required to provide translation and interpretation services, but that doesn’t always happen for immigrant New Yorkers. Vanessa, an undocumented immigrant from Mexico, expressed the difficulty at a Medicaid office in New York City: “They don’t have translators. I speak a little English but the people in the office didn’t understand me. It’s a little difficult to complete the process and it takes a long time. If there’s not an interpreter, you won’t be able to get what you need done that day. You’ll have to come back another day. Calls take too long...the waiting times are too long.”

Vanessa has to take time out of her busy day to make a trip to the Medicaid office to receive help. Being turned away because she doesn’t speak English and having to return another day can be frustrating, inconvenient, and stressful—as would be true for anyone, especially for people juggling busy work and home schedules.

Understanding the technical jargon used in the Medicaid application can be hard even for people who read English fluently. Christian, an immigrant from Afghanistan, who can read, write and speak English has difficulty understanding some of the words in the application: “Sometimes I don’t know the expression. I will go to the dictionary and find the translation in another language.”

Lucia, an immigrant from Colombia, understood the importance of providing application materials in plain and simple language:

“Not everybody has the same cognitive levels and I’m not saying that anybody is stupid or anything but it’s not exactly the same for everyone. Assuming that everyone will understand the same thing is not correct especially when you are trying to give the benefit of something that is so vital.”

She also stated that when she didn’t understand English well when she first came to the United States it made the application process hard, but it got easier once she learned the language. She also highlighted that

since the years that have passed since her arrival, language access for the Medicaid application has gotten better:

“For me as an immigrant in the beginning language access was a big problem. After I learned the language, it was a different story, but I realized other people that come to the country as a refugee or asylee or just immigrants that got married, whatever the situation is with their legal status...they still don’t know the language, they don’t manage the languages very well so back in the days there wasn’t that much access but today it’s much better. I think it’s progressing, and I hope that that gets [better] and more people will be able to understand the forms and get access.”

Lucia went on to note that even when the forms are translated, it is not always in the correct form of the language:

“The language barrier 17 years ago was that the forms were not necessarily in a good Spanish. Some forms were translated some were not. And I still see some problems with the translations because Spanish has so many versions. There’s not one Spanish. If you say spoon in Venezuela it’s one way and in Colombia it’s another way. Banana in Venezuela is not the same as Colombia. So right there you have a barrier because what kind of language are you talking about? What language in Spanish are you talking about? So that was another thing and sometimes I felt so offended because we don’t say that. But more important it made the application more confusing for people. If you barely read and then you don’t speak the same kind of Spanish it would of course be very difficult for them.”

Edgar, an immigrant from Pakistan, understood that his ability to read and write in English is what helped him easily access help with the Medicaid application: “If you speak English, you have no problem over the phone. If you don’t understand English, you may need help.”

In upstate New York, where Edgar resides, language access is a challenge for many immigrants who do not speak English. The law is that New Yorkers who do not speak English should have access to translators any time they call the Medicaid office, should be able to access forms in their native language, and should receive the same treatment as any other community member, regardless of whether they speak English or not.

Executive Order 26 was enacted to ensure that all direct service organizations provide translation and interpretation services for those who do not speak English. However, Executive Order 26 only requires documents to be translated in the top 10 non-English languages spoken in the state, which reflects the needs of New York City, not upstate, where there is a diverse range of languages due to refugees being resettled in the region.

The Medicaid application requires various forms of documentation to apply. Some of documentation requirements may be hard for immigrants to provide, for instance if they fled their birth country without their important paperwork including birth certificates and passports. Obtaining duplicates of these documents usually comes at a cost and takes time, and is often truly daunting.

Some required documents, such as employer letters, must be notarized. Cynthia, an immigrant from Mexico, who is an independent worker and applied for Medicaid during the COVID pandemic, expressed how she was burdened by the \$50 fees for each notarized letter from her employers. She also highlighted the difficulty she had obtaining these letters from past employers because they must be present at the notary to sign the document. Employers who may be skirting labor or other laws with some workers may be reluctant

to sign documents about any employees. Obtaining letters of employment from previous employers can be even more difficult for immigrants who left due to bad work conditions or treatment.

Lynn, an immigrant from Nepal, also had to obtain a letter from her previous employer. Except when she submitted it, they then told her she didn't need it. She went through the stressful process of contacting her previous employer for a document because she was misinformed by the Medicaid office.

Vanessa, an undocumented immigrant from Mexico, expressed the difficulty of providing a proof of address for undocumented individuals: "when you need documents to prove your address or when you have to submit copies of your bills...It's not often in your name so you have to ask other people for that and fill in the form."

Lucia, an immigrant from Colombia, summed up what it is like to be an immigrant trying to provide required paperwork to the Medicaid office:

"Think about it. You are leaving behind your family, your food, your culture, your past, you know? And you carry on with this backpack trying to adjust and be part of something that you don't know and it's uncertain and people tend to not even have the spaces to put their paperwork. And I remember myself living in boxes every time I need to move and one year, I moved 10 times for different reasons...it was so unstable. That was so hard to keep things in order but however I did, and I think that's because if you have your picture ID, your birth certificate and have all your papers in one place at least you will be able to provide it when they need it to apply for these programs."

Lucia wanted to tell other immigrants that it is important to stay organized and hold on to important paperwork because you will always need it and it will help the processes go smoother.

On top of not understanding the language the forms are written in or being able to access a translator, many immigrants do not have access to computers. Some immigrants only have access to a cellphone, or they have to travel to the library to fill out the application. Although the forms can be submitted in writing, Greg, an immigrant from Congo, highlighted that although using a computer was difficult for him, it was less difficult than filling out the forms by hand: "To use the computer sometimes was hard...It was easier to use the computer to fill out the form." It was as if Greg had to choose the less severe of two battles.

These individuals highlight the diverse experiences of immigrants across New York State and the challenges they face when applying for Medicaid. Simultaneously navigating the culture of Medicaid, which includes the ability to read and speak English, having access to a computer, and having all the required documents is hard. Medicaid personnel should help alleviate these challenges by ensuring that translators are provided in accordance with Executive Order 26 and unnecessary fees aren't being incurred by applicants for required documents.

**CYIERRA ROLDAN** Roldan is deputy director of Immigration Research Initiative, a nonprofit, nonpartisan think tank that looks at immigration issues. He can be reached at [roldan@immresearch.org](mailto:roldan@immresearch.org), or 518-344-9868.