

# Communities of Color & the ACA: Understanding & Maintaining Coverage

# HEALTH INSURANCE LITERACY & PERSISTENT BARRIERS



# What Do We Know

- ❖ 11.4% drop in uninsured Latinos 4+ million
- ❖ 10.3% drop in uninsured Af Am- 2.6 million
- ❖ 10.5 million uninsured eligible in OE3
  - > 1/3 of these eligible are people of color
  - > 19% of these eligible are Latino
  - ➤ 14% of these eligible are Af Am
  - ➤ 40% are living between 140-250 % FPL



# Persistent Barriers to Enrollment & Understanding

- ❖ 54% of Spanish-speaking Latinos stated having health insurance was very important
- ❖ 63% of Spanish-speaking Latinos prefer in person help
- ❖ 80% of those who did not visit marketplace were Spanish-speaking Latinos
- ❖ 77% of Spanish-speaking Latinos do not understand tax credits





## Outreach to Communities of Color

- \*Messaging through traditional media (TV, Radio, Print) works- its expensive, but it works.
- Trusted surrogates are best messengers (faith leaders, elected officials, local personalities, doctors, educators)
- ❖ In-person assistance is key
- Events in the community in trusted venues work best (churches, schools, libraries, hospitals)
- Messaging must be simple, clear, and linguistically & culturally competent.



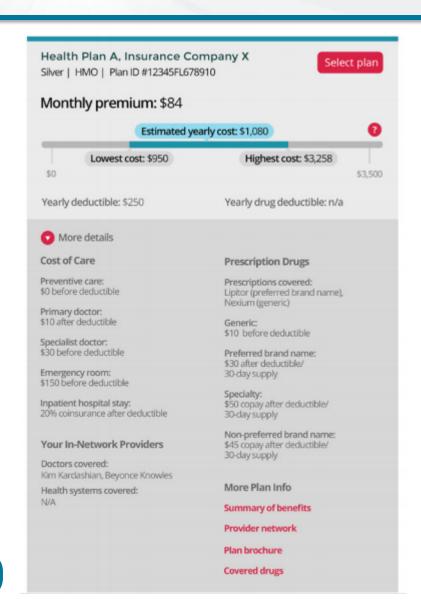
# Five-Point Framework for Work on Health Insurance Literacy

- 1. Understand the most persistent HIL gaps among the remaining uninsured and newly enrolled.
- 2. Define what information consumers value about HI and how to use coverage.
- 3. Uncover the best times to expose consumers to information about HI in order to positively affect their behavior (e.g. when shopping for coverage).
- 4. Discover how and under what circumstances consumers are interested in receiving new information about health insurance and how to use coverage.
- 5. Determine what messengers consumers want to hear from about health insurance and how to use coverage (family, doctor, health care provider, in-person assister, health insurance company, etc.)





### Tools to Address Health Literacy



#### Tools must be:

- Culturally & Linguistically Competent
- Break down complex terminology

#### **Assisters must:**

- Have expertise in plans
- Culturally & Linguistically competent





# Messaging must be Simple & Clear



YOU COULD QUALIFY FOR FREE OR LOW-COST COVERAGE. PAM IN PENNSYLVANIA GOT COVERED FOR

.43 A MONTH.



You could get help paying for your health insurance.

Through the Health Insurance Marketplace, you can find a plan that fits your needs and your budget.

WHO ALREADY SIGNED UP FOR HEALTH INSURANCE GOT HELP PAYING FOR IT.\*





#### Preventive care isn't just covered, it's free. That includes:

- Vaccinations
- Mammograms Cholesterol screening Pap smears
- Blood pressure screening And more!

\*Source: HHS, June 2014

#### THE AFFORDABLE CARE ACT

(or Obamacare) allows you to compare health insurance plans and prices side by side and choose the one that fits your needs and your budget. Best of all, financial help is available.

SIGN UP BY FEBRUARY 15TH.



#### It's more affordable than you think.

The average cost for those who got financial help is \$82 a month.\*

YOU CAN'T BE TURNED DOWN OR CHARGED MORE FOR HAVING A PRE-EXISTING CONDITION.



#### What you'll get with your new insurance:

- · Free preventive care
- hospitalizations Free vaccinations
- · Prescription coverage
- Mental health screenings and treatment
- · Maternity and infant care

. E.R. visits and

#### LOCAL HELP IS AVAILABLE.

PEOPLE IN YOUR COMMUNITY CAN ANSWER YOUR QUESTIONS AND WALK YOU THROUGH THE APPLICATION PROCESS-AT NO COST.





#### We're here to help.

At GetCoveredAmerica.org, you can find in-person assistance and see how much financial help you could qualify for.

SIGN UP BY FEBRUARY 15TH OR YOU MIGHT HAVE TO PAY A FINE OF \$325 OR 2% OF YOUR INCOME (WHICHEVER IS MORE).



## **GetCoveredAmerica.org**

# Thank you!

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# Getcoveredamerica.org EnrollAmerica.org

Source: Centers for Medicare and Medicaid Services analysis of the 2011 American Community Survey