



TESTIMONY

OF

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**HUMAN RESOURCES ADMINISTRATION/
DEPARTMENT OF SOCIAL SERVICES
OFFICE OF CITYWIDE HEALTH INSURANCE ACCESS**

**BEFORE THE CITY COUNCIL
GOVERNMENT OPERATIONS COMMITTEE AND
HEALTH COMMITTEE**

ON

**OVERSIGHT – ENROLLMENT IN PUBLIC HEALTH INSURANCE:
MY NEIGHBORHOOD STATISTICS IN THE BRONX**

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Good afternoon. I am Marjorie Cadogan, Executive Deputy Commissioner of the Human Resources Administration's Office of Citywide Health Insurance Access (HRA/OCHIA). With me today is Joyce Weinstein, Assistant Commissioner of the Bureau of Health Insurance Programs, Division of Health Care Access and Improvement of the Department of Health and Mental Hygiene. Thank you for the opportunity to speak before you today about enrollment in public health insurance and the City Council's proposed Intro 293, which would make applications for Child Health Plus available in public schools and day care centers.

Enrolling uninsured children and adults who are eligible for public health insurance but not enrolled (EPHINEs) is a longstanding priority for Mayor Bloomberg. Since Mayor Bloomberg took office, enrollment in public health insurance programs administered by HRA has increased by 51 percent. As of October 2007, approximately 2.6 million adults and children in New York City were enrolled in HRA administered public health insurance programs¹ and 152,000 additional children in the City were insured through the State's Child Health Plus B (CHP-B) program.²

The mission of my Office, the Office of Citywide Health Insurance Access, is to expand access to health insurance for all New Yorkers. Our priorities are twofold: first, to ensure that uninsured New Yorkers eligible for public health insurance programs are enrolled and, second, to expand access to affordable health insurance for the City's small businesses, sole proprietors and working individuals.

A cornerstone of the City's outreach and enrollment efforts is the Mayor's HealthStat initiative, a citywide campaign coordinated and overseen by my Office. The HealthStat initiative mobilizes the work of 14 City agencies, community and faith-based organizations, managed care plans, and other private organizations to identify and enroll eligible residents in public coverage. Already in 2007, more than 80,000 people have applied for public coverage through the HealthStat initiative; since the start of the Bloomberg administration close to one-half million have done so.

Together, HRA and its HealthStat partners design and implement strategies that identify uninsured populations and assist families with accessing facilitated enrollment. These strategies target children, adults and populations at risk for remaining uninsured, such as immigrants, through a myriad of locations and outreach efforts.

HRA's Medical Insurance and Community Services Administration (HRA/MICSA), which administers the Medicaid program and Family Health Plus program in New York City, is responsible for enrollment of all individuals and families into these public health insurance programs. HRA has taken many steps to help eligible individuals enroll in public coverage. For example:

- Beginning in 2002, HRA undertook a major initiative to transform its 19 Community Medicaid Offices into Model Offices that make applying for public health insurance easier. The core elements of this initiative included eliminating pre-screening,

upgrading technology, strategic triaging of consumers upon arrival and interviewing and processing efficiencies.

- An HRA initiative in collaboration with the Health and Hospital Corporation's (HHC) hospitals is to enlist outpatient clinic personnel in reminding patients to renew their public health insurance coverage and assist them in doing so at their next scheduled appointment.
- Starting next year, HRA will begin implementing New York State policies permitting presumptive eligibility for children, making it even easier for children to obtain coverage. This will begin with children being treated in certain federally qualified health centers.

Additionally, recognizing that many eligible children and adults face barriers to public health insurance related to the application process, New York State created a facilitated enrollment program in 2000. Facilitated enrollers are community-based organizations and managed care plans that assist families in the enrollment process. These enrollers are situated in diverse neighborhood settings, and often are available during evening and weekend hours so that families can apply for coverage without having to miss work. Many facilitated enrollers also speak more than one language, so they are especially able to assist non-English speaking families in completing and submitting their applications.

Furthermore, since applicants must have a face-to-face interview with an authorized person before they can enroll in a public health insurance program, meeting with a facilitated enroller fulfills this requirement and saves individuals or families eligible for Medicaid or Family Health Plus from having to make a separate trip to the local social services office. Moreover, for children eligible for CHP-B, facilitated enrollers can enroll applicants directly into a health plan.

The City has established many avenues for enabling individuals to obtain information about public health insurance. New York City residents do not even need to leave their homes to learn about public health insurance options. Using ACCESS NYC, an internet-based system, families can print out a public health insurance application that is partially completed using information entered during the system's pre-screening process and take it to a facilitated enroller or apply directly at Community Medicaid offices.

Similarly, individuals can call 311 to learn about both public and private health coverage options and be referred for more help. Between January and September of this year, approximately 18,000 people called 311 asking for information about public health insurance, which is an average of 2,000 calls per month. One way in which families learn about 311 is through the existing Local Law 1 pamphlet. As specified by law, designated City agencies must disseminate these pamphlets to individuals when they apply or renew their application for services as well as if they change their address.

Together with public and private sector partners, City agencies also employ numerous strategies on the ground—in neighborhoods, at special events, at agency offices, in healthcare facilities and in the schools—to enroll eligible children and their families in public health insurance. For example, through the HealthStat initiative, OCHIA works with a number of agencies that provide services to potentially eligible adult and young adult populations to devise strategies and help facilitate public health insurance enrollment efforts, including:

- The Department of Small Business Services, which places facilitated enrollers in its Workforce1 Career Centers in all five boroughs to conduct outreach and enroll jobseekers in public health insurance programs.
- The Department of Probation, which facilitates public health insurance enrollment for probationers by helping them secure necessary identification documentation. The Department also stations public health enrollment counselors at borough probation offices.
- The New York City Housing Authority (NCYHA), which hosts public health insurance outreach and enrollment activities at NYCHA developments and service sites, including Section 8 and General Application Offices located throughout the five boroughs.

- The Taxi and Limousine Commission, where health insurance enrollers conduct outreach to uninsured drivers and their families at the licensing and adjudication office in Long Island City.
- The New York City Fire Department, which organizes activities that jointly promote fire safety and the availability of public health insurance programs in neighborhoods.
- The City University of New York’s (CUNY) Office of Student Affairs, which connects students to health insurance coverage and provides administrators with tools and resources for helping with facilitated enrollment in its 18 campuses. For example, facilitated enrollers are available at freshman orientations, wellness and health fairs, AIDS awareness events, Healthy Heart Days and health related conferences. In partnership with my office, CUNY is also working to designate a “health insurance advocate” for each campus and to develop systems to collect information about students’ health insurance status during registration so that outreach and enrollment assistance can be channeled toward those who need it most.

We also work with our HealthStat partners to engage in special efforts targeting outreach to immigrant adults and their families.

- We have forged a relationship with the U.S. District Court Eastern Division at Cadman Plaza in Brooklyn to make public health insurance outreach part of their naturalization ceremonies. Health insurance enrollers are provided the opportunity to share information and provide direct enrollment services to naturalization candidates and their family members at these ceremonies.
- The Department of Youth and Community Development (DYCD) contracts with nine community-based organizations to promote and organize public health insurance outreach within targeted DYCD neighborhood development areas. These contracted agencies offer a gamut of services to immigrant children and families and are located in neighborhoods with a large immigrant population. HealthStat Coordinators identified by these community-based organizations conduct in-reach and outreach activities for the purpose of connecting eligible families and individuals to public health insurance awareness and enrollment opportunities.

In addition, there are a number of City initiatives targeting children and their families.

Some of those efforts include:

- A data matching process developed by the New York State Department of Health and HRA that ensures that newborns of Medicaid eligible mothers are automatically provided Medicaid coverage. In this process, DoHMH Vital Statistics birth records

are matched with State Medicaid records to ensure eligible children are covered from birth.

- The Administration for Children’s Services, which ensures that facilitated enrollers are onsite to assist families in need of health insurance at each of the four Division of Child Care and HeadStart offices within the City where parents register children for publicly subsidized day care/Head Start programs.

In addition to its HealthStat work, OCHIA provides a significant amount of education and consumer assistance to those interested in learning more about public health insurance. For example:

- We conduct informational presentations and workshops for City agencies, community-based organizations, borough and ethnic chambers of commerce, women and minority-owned business associations, local development corporations, and business improvement districts.
- New Yorkers can find information to make informed health insurance decisions by accessing information at www.nyc.gov/healthstat. We also respond to phone inquiries or questions submitted through the website. From January to September 2007, over 71,000 people visited this website. This is an average of approximately 8,000 visits each month.

- Additionally, OCHIA's *Guide to Health Insurance Options for New York City's Small Businesses, Sole Proprietors and Working Individuals* aids those groups in selecting appropriate private or public health insurance options.

Now, I want to turn your attention to some special enrollment initiatives being completed by the City.

First, I would like to focus on the work being done in the public schools to enroll children and their families in public health insurance. My Office has worked closely with the Department of Education (DoE) and other HealthStat partners to develop multi-pronged strategies for reaching eligible children and their families through the New York City public school system.

Starting at the early education level, DoE has integrated health insurance outreach and enrollment with pre-kindergarten, kindergarten, and first grade registration by ensuring that enrollment counselors are available to answer parents' questions and enroll eligible students and their families into public coverage programs. The Office of Early Childhood Education also has revised many of its documents for parents to include information on eligibility for health insurance programs and the application process.

For the past five years, OCHIA and DoE have conducted annual Back to School Campaigns that provide eligible yet uninsured children and families with opportunities to learn about and enroll in public coverage at key locations across the City. These

campaigns have included placing enrollment counselors at school registration sites.

Enrollers are also onsite at parent-teacher conferences and other school-based special events.

Unique to New York City, we have worked with DoE to revise the school lunch form completed by parents each year to include a question about health insurance coverage. I am sharing it with you today. As you will see, the health insurance question on the school lunch form serves as a mechanism for families to request assistance with enrollment. School staff input information from the form into the school system's database; then, a referral is sent to facilitated enrollers for parents requesting help with health insurance. Last year, 11,000 parents who requested help with health insurance received follow-up letters and phone calls from facilitated enrollers.

HRA and the Office of School Health (jointly administered by DoE and DoHMH) also have developed a ready reference, *Hands on Health*, for parent coordinators and other school staff so that they can better assist parents with their health insurance questions. *Hands on Health* contains summaries of all public health insurance programs in the City, options for families not eligible for public programs, and information about other public benefit programs for low-income families.

Next, I would like to highlight some of the work being done by DoHMH. Providing direct enrollment assistance is a key strategy of DoHMH's Take Care New York initiative, a comprehensive health policy agenda that aims to reduce preventable illness

and death. The first of ten steps in the policy agenda is for every New Yorker to “Have a Regular Doctor or Other Health Care Provider,” and we know that the key to taking that first step is having health insurance.

As a principal partner in the Mayor’s HealthStat initiative, DoHMH employs 30 enrollment facilitators to identify, screen and enroll uninsured children and families into public health insurance programs. These enrollers are based in communities where they provide face-to-face assistance at one of DoHMH’s health center sites or even at someone’s home, where they can help collect the documentation needed to complete the application. Each individual is guided through the application process, which includes counseling on the various health insurance programs and health plans, support in selecting a primary care provider, a detailed explanation of each program's benefit package, and ongoing assistance from the time that the application is submitted until the person is enrolled. In fact, DoHMH enrollers even follow up with beneficiaries to provide additional assistance when it comes time for them to recertify.

Since DoHMH launched its facilitated enrollment program in 2000, they have assisted over 90,000 individuals citywide with their health insurance enrollment, including 7,000 this calendar year to date. In the Bronx this year, they screened close to 5,000 persons and enrolled over 1,100.

Specifically, DoHMH actively works to increase insurance coverage in New York City by engaging in a number of different facilitated enrollment efforts.

- DoHMH enrollers are co-located with other agency programs including tuberculosis, immunization and STD clinics. This enables the enrollers to connect at the point of service with New Yorkers potentially interested in obtaining health insurance.
- In addition, DoHMH provides training and materials about health insurance for its home visiting programs, such as the Nurse Family Partnership and the Lead Poisoning Prevention Program. These programs, along with other agency programs, identify and refer families to the facilitated enrollment unit for assistance in applying for health insurance.
- DoHMH also targets medically/developmentally “high risk” uninsured children for public health insurance eligibility screening through referrals from the agency's Early Intervention program and the Children with Special Health Care Needs program.

This year, DoHMH more fully integrated facilitated enrollment services into the Early Intervention program's review process. As a result, over an eight month period, the unit has screened over 2,000 high need uninsured and underinsured children—and their families—for public health insurance eligibility.

For those children with special needs who are ineligible for Medicaid or whose insurance does not cover all essential care, DoHMH conducts facilitated enrollment

into the Physically Handicapped Children's Program, which funds vital medically prescribed healthcare services.

- DoHMH also targets facilitated enrollment efforts toward individuals leaving City correctional facilities by coordinating internally with the Correctional Health Services Discharge Planning Program and externally with organizations such as the Bronx Correctional Center and the Center for Employment Opportunity.
- Finally, DoHMH contracts and collaborates with the Community Service Society which receives funding from the City Council to operate an ombuds program to provide navigational assistance for managed care enrollees, as well as educational workshops and assistance to clients who wish to apply for public health insurance programs. The program known as the New York City Managed Care Consumer Assistance Program (MCCAP) contracts with 25 community based organizations to provide services throughout New York City. Since it began providing services in 2000, MCCAP has conducted educational workshops and other services to approximately 100,000 City residents.

Together, these and other City initiatives for enrolling children and adults in public health insurance have been tremendously successful. Nonetheless, work remains to be done. HRA estimates that out of the 217,000 uninsured children in NYC, approximately 123,000 to 193,000 children are eligible for public health insurance but not enrolled (EPHINES). We also estimate that of the 1.2 million uninsured adults in the City, there

are between 212,000 to 305,000 EPHINE adults who would qualify for public coverage based on their income.³

Based on these estimates, we have identified the concentration of EPHINEs in each borough and community district. For example, we estimate that there are from 48,000 to 67,000 EPHINE children and from 63,000 to 84,000 EPHINE adults in the Bronx. The community districts (CDs) in the Bronx with the highest concentrations of EPHINE children and adults are:

- Bronx CD 1 and CD 2, which includes the neighborhoods of Melrose, Mott Haven, Port Morris / Hunts Point, and Longwood;
- Bronx CD 3 & CD 6, which includes the neighborhoods of Morrisania, Crotona Park East/East Tremont, and Belmont;
- Bronx CD 4, which includes the neighborhoods of Highbridge and Concourse Village;
- Bronx CD 7, which includes the neighborhoods of Bedford Park, Norwood and Fordham.

Additionally, among the top five CDs in the Bronx, there are high concentrations of EPHINE children in CD 5, which includes the neighborhoods of University Heights,

Fordham and Mount Hope, and there are high concentrations of EPHINE adults in CD 9, which includes the neighborhoods of Soundview and Parkchester. Along with our HealthStat partners, we are working to design targeted outreach strategies for reaching these EPHINE children and adults and others throughout the City. We would welcome the Council's suggestions on particular neighborhood based venues in which we should focus our outreach efforts.

I would like to close my testimony with several important comments on Intro 293. The City of New York supports the intent of this bill and applauds the Council's interest in ensuring that all eligible uninsured children and adults are enrolled in public health insurance. However, we have concerns about several aspects of the proposed bill. First, public health insurance program applications are developed and produced by New York State, so the City cannot control the quantity and availability of these applications. Second, with the *Access NY* application, all family members can enroll in public health insurance; the *Growing Up Healthy* application, identified in the bill as the application for Child Health Plus, is only for children and is increasingly not used. Third, in light of the extensive and culturally competent assistance available through facilitated enrollers and Community Medicaid Offices, merely providing applications to families' would shortchange their needs when seeking public health insurance. Making the application available will also not eliminate the need for individuals and families to meet with these enrollers to comply with the programs' requirement for a face-to-face interview.

To ensure that all those eligible for public health insurance are enrolled, we believe new approaches for identifying and engaging eligible individuals and families are needed.

There also is a need to focus on the retention of coverage for children and adults who have public health insurance but lose it. The State has made efforts to simplify the renewal process, and starting next year the renewal application for adults will be simplified to allow self-attestation of income. While we applaud these efforts, more changes are needed to enable children and adults to maintain continuous coverage for at least 2 years in order to improve continuity of coverage.

Thank you once again for the opportunity to testify today about increasing enrollment in public health insurance programs. We share the Council's interest in improving access to public health insurance and would very much appreciate your support in advancing new outreach and enrollment strategies for reaching EPHINE children and adults in the City. I welcome any questions you may have at this time.

¹ Human Resources Administration's Office of Data Reporting and Analysis: HRA Facts Report, October 2007.

² New York State Department of Health: CHP-B Monthly Enrollment Reports, October 2007.

³ Number of EPHINEs Is from HRA/OCHIA. Reducing New York City's Uninsured: Identifying Communities with the Greatest Numbers of Uninsured Children and Adults Eligible for Public Coverage. Report forthcoming in 2007. Number of uninsured is from New York State Department of Health. Unpublished data from Profile of New York State Uninsured in 2006. (2007.)