

H-2A Farmworker Enrollment: Challenges and Successes

Mackenzie Mann, NC Farmworkers Project
Neissly Tapia, NC Farmworkers Project



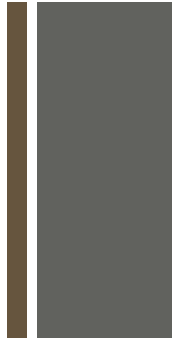
NC Farmworkers Project

- Founded in 1994 to promote the organization of farmworkers, help them find solutions to their problems, and give them the tools to better their working conditions, living conditions, and health.
- Benson, NC
- Current programs
 - Health
 - *Promotores*
 - Research partnership with Wake Forest University
 - Outreach and enrollment

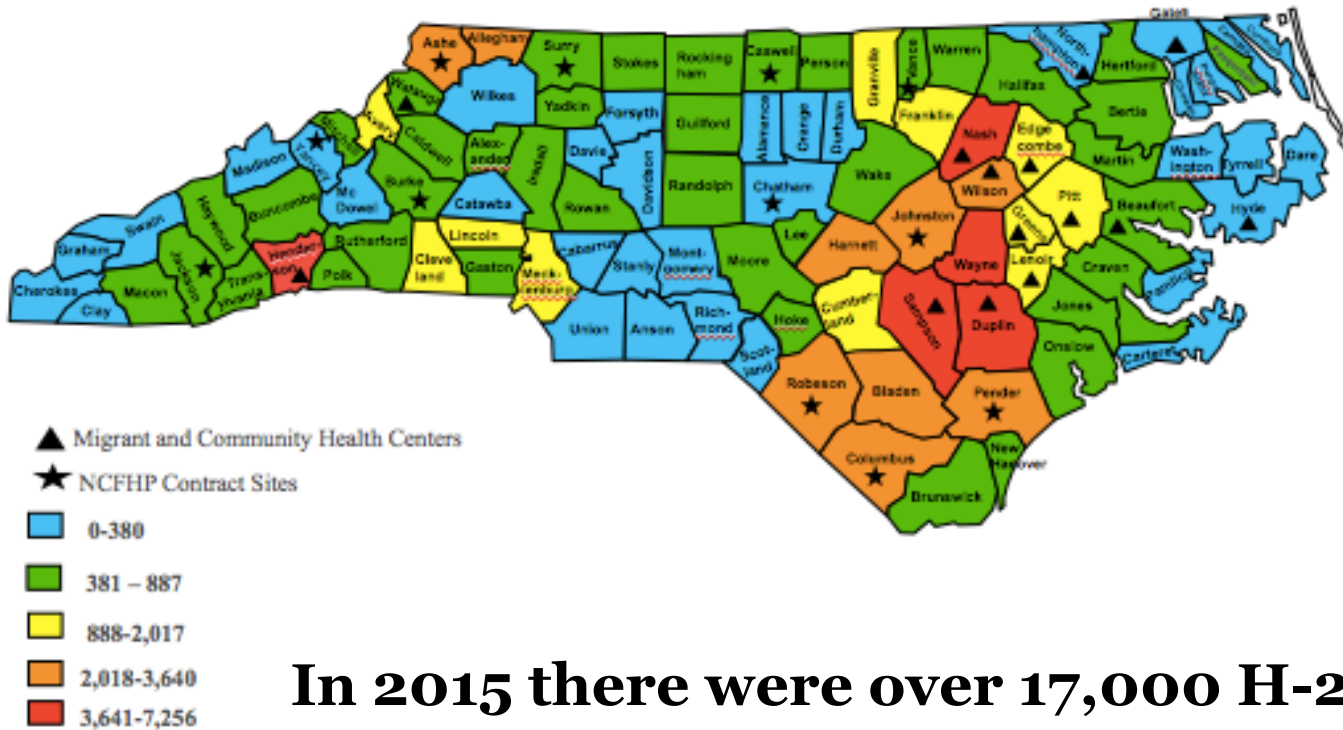




H-2A Farmworkers in North Carolina



Map 1: Department of Commerce Estimate of 2015 Farmworkers by County, with Farmworker Health Program Locations Overlay



In 2015 there were over 17,000 H-2A workers in North Carolina

NC Office of Rural Health

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Health Access Challenges for H-2A Workers

- Lack of transportation
- Language barriers
- Long, inflexible work hours
- Lack of information
- Fear/intimidation
- Low income
- Physical and social isolation





Enrollment Challenges



- 60 day SEP and limited availability for enrollment appointments
- Unfamiliarity with the Affordable Care Act and lack of information about local O&E programs
- Confusion about differences between worker's compensation and comprehensive health insurance
- Tax questions/problems and incompetent tax preparers
- Address changes
- Incorrect eligibility results
- Physical isolation and poor cellphone service



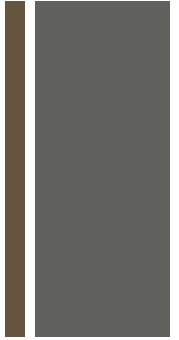
Motivations for Enrollment

- Security/protection
- Improved access to clinic and specialty services
- Lower medical costs
- Prevent illness
- Improve one's health
- Avoid the penalty



“They don’t know if they’re going to get sick or need it. The good thing is that it helps them to have something they can fall back on. It’s also helping workers with higher incomes avoid the penalty.”

- Ricardo Garcia, Rural Health Group



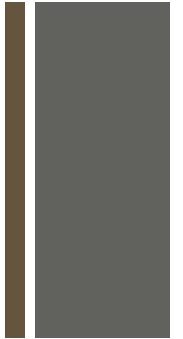
“Los trabajadores sienten más seguridad cuando van al doctor. Antes tenían miedo de ir a las consultas porque no sabían cuanto iba a costarles, y muchas veces no iban a sus referidos. He visto que muchos se han beneficiado con tratamientos complicados, como: problemas de piel, próstata, estomago, vista, y corazón. También, he visto que ha mejorado su calidad de vida porque ahora sienten que tienen un apoyo en cuestión de salud. Antes, cuando tenían una enfermedad, esperaban hasta que no podían aguantar más, hasta que estaba muy complicada la enfermedad, y muchos de ellos decidieron regresar a México para buscar tratamiento.”

- Janeth Tapia, NC Farmworkers Project

The workers feel more secure when they go to the doctor. Before, they were fearful to go to appointments because they didn't know how much the services would cost, and many times they wouldn't go. I have seen many people that have benefitted [from having health insurance because they can receive] complicated treatments for problems of the skin, prostate, stomach, vision, and heart. I have also seen that workers' quality of life has improved because now they feel that they have a support system when it comes to health. Before, when workers were sick, they would wait until the illness had worsened or become complicated, and many decided to return to Mexico to seek care.



Success Stories



“In 2015, a worker needed a glaucoma surgery but didn’t have insurance. We helped him enroll and he was able to have surgery two months later. He paid \$14.50/month for his premium and nothing for his surgery. Last year, another worker reported pain in the right side of his stomach. After enrolling, he went to see a primary care provider, who referred him to a specialist. The specialist identified a hernia and scheduled surgery within a month of the worker’s insurance start date. He paid \$11.44/month for his premium and \$500 (his out of pocket maximum) for the surgery and all of his appointments.”

- Health outreach worker, NC

“En el 2015, me lastimé mi pierna, me hicieron una operación porque se me había roto el hueso... si no tomo la decisión de tener seguro medico, habría gastado \$32,000, utilicé mi seguro y afortunadamente terminé pagando la cantidad menor de \$400.”

In 2015, I hurt my leg. They operated on me because the bone was broken...If I hadn’t made the decision to enroll in health insurance, I would have spent \$32,000. I used my insurance and fortunately ended up spending less than \$400.

- Farmworker, Cumberland County



Outreach and Enrollment Program

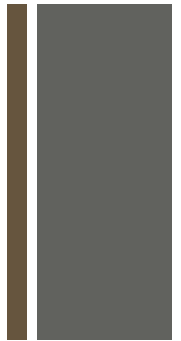
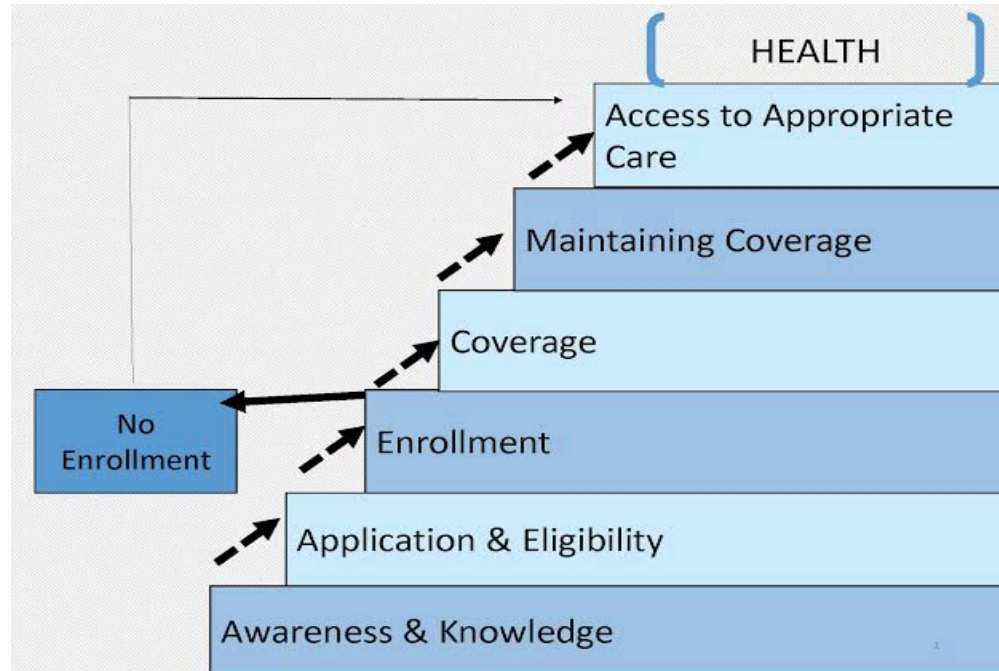


- Information outreach
- Enrollment
- Follow-up assistance
 - Billing and payments
 - Data matching issues
 - Selecting Primary Care Provider
 - Utilization information
 - High deductible health plans
 - Cancelling plans
 - Collaboration with health program
- Popular education trainings





Coverage to Care Model



“Ojala esto del seguro médico continúe por más tiempo... es de gran ayuda para nosotros.. Si nos siguen dando la ayuda como hasta ahora con los pagos, el correo, transportación para la clínica... gracias a todo eso nos facilita poder tener nuestro seguro, porque hacerlo nosotros solos no creo que yo pueda hacerlo. Pero gracias a todos los que nos ayudan para poder lograrlo.”

God willing that this health insurance [law] continues... it is a big help for us. If you [outreach workers] keep helping us with payments, mail, transportation to the clinic... thanks to this, it has been easy to have health insurance, because without it, I don't think we would be able to [keep our coverage]. But thanks to those who help us achieve it.

- Farmworker in Sampson County



Lessons Learned

- Develop relationships of trust with farmworkers
- Collaboration
 - Between organizations and agencies
 - Between farmworker outreach and O&E programs
 - Tax preparers
 - Churches
 - Policy experts
 - Local clinics
- Enrollment events
- Farmworker Health Insurance Team





Farmworker Health Insurance Team

- Statewide coalition including a diverse group of stakeholders
- Accomplishments:
 - *Dos Opciones, Un Camino*
 - Collaboration with NC Grower's Association
 - Letter to labor contractors
 - Tax preparer education
 - Tax partnerships
 - Data collection on farmworker enrollment
 - Individual relationships and education

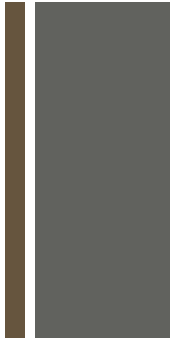


+ Outreach in North Carolina

- **Piedmont Health Services:** Outreach to camps in Prospect Hill and Moncure; held enrollment event on May 7th at Moncure Community Health Center
- **Roanoke Chowan Community Health Center:** “We’ve been assisting primarily H2-A Farmworkers with insurance coverage through the Marketplace since 2014, and average about 50 enrollments/renewals per season. We train members of our bilingual MSFW outreach team as CACs who go out in to the field to help workers enroll, often late at night and sometimes with the farmworker’s cellphone being the only way to contact the Marketplace. **When we first started outreach to farmworkers, most either hadn’t heard of the ACA or didn’t realize it applied to them. Now they come to us as soon as the season starts, ready to enroll!**”
- **Access East:** Partnership with Alliance One to facilitate access to camps; presentations to growers; outreach visits to over 300 farmworkers thus far in 2017
- **Rural Health Group:** Enrolled more than 400 farmworkers in 2016; three of the enrolled workers used their insurance for surgery
- **Legal Aid, Greensboro:** Enrollment events in China Grove, NC
- **Greene County Health Care:** Assisted over 1000 workers with enrollment in 2016



+ Upcoming Events



- Sunday, May 21 @ Episcopal Farmworker Ministry, Dunn, NC
- Sunday, June 11 @ Episcopal Farmworker Ministry, Dunn, NC



Contact Information



Mackenzie Mann

Mackenz.mann@gmail.com

910-891-8254

Neissly Tapia

neissly38@gmail.com

919-820-7381

Anna Jensen, Executive Director

annabjensen@gmail.com

919-915-9990