

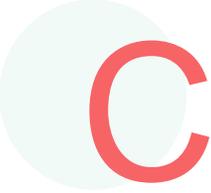


Benefits Enrollment Best Practices

CAPI USA

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The logo for C API USA features a large, stylized letter 'C' in red, positioned to the left of the text. The 'C' is partially enclosed by a light green circular shape. The text 'API USA' is in a bold, black, sans-serif font, followed by a descriptive paragraph in a smaller, black, sans-serif font.

API USA is a community-based non-profit whose mission is to guide refugees and immigrants in their journey toward self-determination and social equality. Today, we are an inclusive, multilingual, and immigrant-led nonprofit annually serving over 6,000 new refugees and immigrants from all over the world, including Minnesota's Asian, East and West African, and Latinx communities as well as underserved US born communities, across three core service areas: Basic Needs, Economic Empowerment, and Civic Engagement. With a diverse staff of 30 who collectively speak 15 languages, a new headquarters in Brooklyn Center, MN, and a second multi-service community center in Minneapolis, CAPI is working hard to help close the equity gap as we celebrate the tremendous skills, strength, and resiliency of those who walk through our doors. CAPI's holistic programming seeks to enhance economic and social change opportunities that allow people of all ages and nationalities to lead successful lives.

Proposed Benefit Enrollment Center (BEC) Model

CAPI's unique role as a social service provider with an emphasis on serving Asian, African, Latinx immigrants, low-income, and U.S. born communities of color positions us to reach underserved and underinsured communities. The BEC allows us to target immigrant and refugee populations who may have significant language, financial, physical, and social barriers to access public benefit programs and help to develop a safety net for participants to lead healthy, independent lives.

CAPI established and trained a bilingual outreach (Hmong and English) team to provide culturally competent and responsive outreach and enrollment services. Outreach activities were conducted at CAPI's two community-based service centers to bring awareness to the wealth of services provided by the agency including basic needs, employment, training, wealth building, and civic engagement. CAPI runs two older adult programs working with largely low-income Hmong caregivers and seniors.

One-on-one support was provided to these Medicare-eligible seniors through culturally appropriate case management services. We also have an onsite food shelf program in which clients from Asian, African, and Latinx immigrant and refugee communities were provided information on BEC enrollment services during monthly food shelf orientations and during one-on-one meetings with participants. External outreach was conducted through adult day care centers, on ethnic media and through local cultural organizations.

Challenges and Best Practices

Challenge: CAPI serves a diverse participant group and there were cultural and language barriers that impacted service delivery. Many of the clients the agency serves are Limited English Proficiency (LEP) individuals who are unable to read, write, or speak in the English language. In addition, many immigrant seniors that CAPI serves do not read and write in their native language. This presented a challenge in delivering outreach, screenings, and enrollment services as the agency had to either rely on internal staff to provide language assistance or costly external resources for translation. It was difficult to communicate with seniors if their case managers did not speak their native languages. For example, when working with seniors in the Hmong community, CAPI's case managers found that communicating with these senior immigrants in writing was nearly impossible as most were unable to do so in both their native language and in English. Even though many of them had children who live with them that can speak English, they are not available to translate at every meeting. As is representative in many immigrant households, the children (such as high school students) of the older adults are often asked to translate. Case managers could not rely on translation and interpretation from clients' children because often the children were not fluent enough in their native languages to effectively translate and interpret complex public assistance programs, eligibility requirements, and information needed to complete a full application.

In addition to the language barrier, CAPI observed that there were often cultural barriers or stigma attached to accessing services within the immigrant communities. For example, when working with Southeast Asian senior immigrants, we found that many did not want to express their needs and personal problems to people they did not trust or have a prior working relationship. Southeast Asian seniors such as from the Hmong community did not express their concerns or needs unless they felt comfortable to do so. For example, many did not want their case managers to know that they were struggling with paying their energy bills until the case managers had built a strong relationship with them to ensure that their hardship would not be known to others in the community. Communities like the Hmong immigrant groups are built on a clan system and since communities are relatively interconnected, there is fear that their hardships will be shared with others, which prevents them from seeking help for basic needs and benefits they are eligible to receive.

Best Practices: CAPI hired primary benefits enrollment case managers who spoke the native languages of the clients and were able to directly assist the clients in that language. Furthermore, CAPI employs a diverse group of staff members who collectively speak 15 different languages. We were able to rely on internal staffing to provide translation assistance in

the event that the BEC case managers were unable to assist. CAPI serves a large population of Hmong immigrants and accordingly hired Hmong-speaking navigators to serve these clients.

In addition, the agency focused on hiring case managers that were orally fluent in the language because we had heard from many seniors we worked with in the past that they could not understand the dialect or had a difficult time understanding younger individuals who may not be fully fluent in the language. Hiring culturally competent staff who were able to understand the Hmong culture well enough to build a trusted relationship allowed us to conduct intake and assist individuals with benefits applications. It takes time to build relationships with immigrant seniors, and thus we worked first within our existing senior programming to expand BEC services to these seniors, and then worked to build relationships externally with other community members.

Challenge: CAPI is the first Benefits Enrollment Center in Minnesota. Building a network of referrals with a variety of local community agencies that provide diverse services to immigrant and refugee seniors is very challenging. CAPI reached out to local community-based clinics and Federally Qualified Health Centers but was unable to develop a strong pipeline of referrals to the organization. This was due both to staff turnover and without having a track record of running a BEC it was challenging to convey a value-add for the partnership. Staff also reached out to adult day care centers that serve immigrant communities as well other ethnic community-based organizations. Many of these organizations have smaller staffing capacity and were interested in partnering with CAPI to help enroll their seniors in benefit programs. The challenge came down to language barriers, as CAPI staff were not fluent in all the languages spoken by our diverse immigrant and refugee seniors.

Best Practices:

- CAPI developed informal partnerships with other ethnic and immigrant-led organizations serving the Lao, Bhutanese, South Asian, and Karen communities to reach specific immigrant and refugee seniors.
- Utilization of CAPI's current Client Track system to identify seniors that are already enrolled in CAPI's other programs to enroll in the BEC. This helps employ an outreach model that's already in place. It also helps streamline our intake process because these seniors are already in the Client Track system. This allows these seniors to receive faster services and supports in a timely manner.

- Created an internal referral system in Client Track and encouraged agency staff to use it for making referrals across CAPI's different programs such as Food Shelf, Seniors/Caregiver Support, MNsure, Civil Engagement, Career Pathway, and MFIP program.

Challenge: Many immigrant and refugee seniors are living by themselves in public housing. They cannot drive and have no access to transportation. This creates a barrier for them to seek help and apply for eligible benefits. Although transportation is a major barrier for all seniors, immigrant and refugee seniors find it the most difficult to overcome. They are afraid to use public transportation or take the bus by themselves without other family members. Many seniors expressed that they are unable to come to CAPI's offices to complete benefits applications or they have no one to take them to the interviews often required as a step in the application process. They also have difficulty obtaining the required documents to submit with the benefit applications. To get all the required documents, they would have to go to different places such as the bank, a medical clinic, or local government offices. Therefore, many immigrant refugee seniors are discouraged to seek help and apply for benefits.

Best Practices: To effectively help immigrant and refugee seniors, CAPI has established the following practices:

- Meet seniors at their homes and help them completing applications instead of asking them to come to CAPI.
- Provide transportation for seniors to get all the required documents which need to be submitted with the applications. Also accompany seniors and help them with gathering all the required documents.
- Provide transportation for seniors to the interviews. Accompany seniors to the interview and help them with translation.
- Coordinate services and application filing with other local community agencies such as adult daycare centers, local government offices, and charter schools.
- Set up several application fillings for each individual senior on the same date and time to reduce travel times for both CAPI's staff and seniors.

Challenge: Obtaining proper and a wide breadth of benefits enrollment trainings was difficult for CAPI.

Best Practices: For the five core benefits, CAPI utilized different tools to train our multilingual staff. To gain knowledge on the SNAP program and how to complete applications, for example, staff were provided with online webinars from Minnesota’s Department of Human Services as well as in-house peer to peer trainings.

CAPI integrated the BEC services into its client relationship management system, Client Track. This system is utilized by all CAPI staff including case managers, navigators, and data and evaluation staff.

Client Stories

The following case study exemplifies the impact that CAPI’s BEC services provide to immigrant and refugee communities.

A Hmong caregiver and food shelf client who just turned 65 and who receives \$590 per month found herself in dire need. Due to her early retirement and lack of understanding of Medicare, she didn’t know why Social Security Administration took \$144.60 from her monthly Social Security payment. At the end of the month she had \$445.50 remaining to pay for rent, prescriptions, food, and utility bills. She depended on her children to help pay for some of her monthly expenses. She didn’t know where to go for help until we had a support group meeting at CAPI. CAPI’s Benefits Enrollment Advocate spoke to the group and assured the participants that we are here to help them in addressing their needs including the ones that she was facing. After hearing the presentation, the client was still not sure whether she should share her story with us or if CAPI would be able to help her. As a former refugee, she has a language barrier and doesn’t know much about public assistance. She was very depressed and stressed. Moreover, she didn’t want to share her personal problems with anyone she didn’t trust.

A CAPI staff member encouraged her to meet one-on-one to go over her problem. After they met, CAPI’s Benefits Enrollment Advocate took her to the Social Security office and learned that the \$144.60 was deducted each month to pay for her Medicare Part B premium. Since she is low income, she was eligible for Social Security Supplemental Income and the Medicare Savings Program to help pay for her Medicare Part B premium. CAPI’s Benefit Enrollment Advocate helped her complete applications for both programs. He also helped her gather all the required proofs and replace her lost citizenship certificate with the US Citizenship and Immigration Services. She now has more money to spend on food and other household expenses. She is very happy, and her condition has improved.