



ORR State Letter

11-01

Date: December 02, 2010

TO: STATE REFUGEE COORDINATORS
REFUGEE HEALTH COORDINATORS
NATIONAL VOLUNTARY AGENCIES
OTHER INTERESTED PARTIES

FROM: Eskinder Negash
Director
Office of Refugee Resettlement

SUBJECT: Refugees, Health Reform and Other Health & Mental Health Resources

The purpose of this State Letter is to call your attention to the emerging information on healthcare reform and to inform you of several health and mental health activities currently underway at ORR.

Healthcare Reform: Like Refugee Status, Health Care Reform is Protection

In March 2010, Congress passed and the President signed into law the Affordable Care Act (ACA), which puts in place comprehensive health insurance reforms that will hold insurance companies more accountable, lower health care costs, guarantee more health care choices, and enhance the quality of health care for all Americans. Under the new law, refugees and other vulnerable populations, as lawfully present immigrants, will qualify for the same protections and benefits as U.S. citizens.

Below are a few examples of ACA provisions that will benefit refugees beginning in 2014:

- Effective 2014, states must extend Medicaid coverage up to age 26 for young adults who have aged out of the foster care system, including those aging out of the Unaccompanied Refugee Minors program.
- Medicaid coverage will be available to anyone under 65 with incomes up to 133% of the federal poverty level, including refugees. Because even poor adults often are ineligible for Medicaid, many adult refugees become uninsured after their eight months of Refugee Medical Assistance is exhausted. Starting in 2014, Medicaid will be available to anyone – including parents and childless adults – who meet the income criteria.
- Refugees whose incomes are above 133% of the poverty line but who lack employer-based or private health insurance will be able to purchase affordable coverage through Health Insurance Exchanges. Premium and cost-sharing tax credits will be available for refugees and others with incomes between 133% and 400% of the federal poverty level to make the purchase of quality insurance affordable.

ORR encourages the resettlement network to stay informed about healthcare reform. For a brief overview, please visit ORR's website at <http://www.acf.hhs.gov/programs/orr/> and click on *Health Reform for Refugees*. To stay up to date on the details of implementing health care reform, please visit the following site: <http://www.healthcare.gov/>.

Training and Technical Assistance

The Refugee and Immigrant Health Program, Massachusetts Department of Public Health (MDPH) was awarded a \$500,000 grant to provide technical assistance (TA) activities that improve refugee health and well-being. MDPH will partner with The Center for Refugee Trauma and Resilience at Children's Hospital Boston, The Bellevue/NYU Program for Survivors of Torture, Sauti Yetu Center for African Women, JSI Research and Training Institute, and the Cultural Orientation Resource Center, Center for Applied Linguistics.

TA services will be directed to refugee service providers and mainstream public health providers. The project is currently in the start-up phase. ORR anticipates that the project website will be available in 2011 and will be the source for refugee health and mental health information and resources. MDPH will also administer a listserv dedicated to refugee health and mental health issues and produces refugee health backgrounders that focus on new populations. MDPH may also provide other types of TA such as: webinars, case studies, knowledge briefs, literature reviews, discussion forums, training and conference presentations, one-on-one consultation and materials on public health in major refugee languages.

Interagency Partnerships

- **Webinars on HIV**

In the next few months, ORR will schedule regional webinars on HIV. Refugee service providers (e.g., local resettlement agencies and clinics that conduct medical screenings for refugees) are the target audience. Participants in the webinars will receive information on the new regulations and technical assistance on resources and partnerships in carrying out medical screening, information on HIV and referral for treatment.

- **CDC Medical Officer**

CDC Division for Global Migration & Quarantine has agreed to enter into an intra-agency agreement with ORR to arrange for a medical officer from CDC to provide on-site support to ORR for 12 months. The medical officer will provide support for the medical screening and treatment programs funded through ORR. It will also serve as a liaison between ORR and CDC, providing CDC with greater information on the refugee resettlement program and available services.

- **Collaboration with the Association of Refugee Health Coordinators (ARHC)**

Seeking to build closer collaboration, ORR has scheduled quarterly conference calls with the Association of Refugee Health Coordinators. These meetings will promote coordination and collaboration between ORR and the health coordinators around medical screening, health care reform and overall refugee health and well-being.

- **Office for Civil Rights Training Video**
ORR has pursued a partnership with the Office for Civil Rights (OCR) to develop training materials for the field on meaningful language access according to Title VI of the Civil Rights Act of 1964. This partnership has resulted in the production of a training video which will soon be posted on the ACF YouTube channel, with links from the ORR website.

- **Updated Manual on Working with Refugees with Disabilities**
The Office on Disability (OD) has been a valuable resource as ORR develops resources for providers who are increasingly working with larger numbers of disabled refugees with more serious disabilities. Several years ago the U.S. Committee for Refugees and Immigrants (USCRI) produced a manual on working with refugees with disabilities. Due to changes in the Americans with Disabilities Act, certain chapters of the manual were outdated. OD provided expertise on how to update these chapters. ORR is working with USCRI to revise the manual.

- **Suicide Prevention**
SAMHSA has offered to assist ORR with the increase of suicides in certain refugee communities by inviting ORR to join the federal working group sponsored by The National Center for Suicide Prevention. Through this relationship ORR will be equipped to bring technical assistance to communities and families and connect them with local resources.

By preparing for healthcare reform and engaging in the above interagency efforts, ORR aims to empower refugees and the resettlement network with information and opportunities to build bridges with mainstream social and health services. ORR is committed to bringing a health and mental health care emphasis to refugee services and welcomes your partnership in doing so.