Towards an Asian American, Native Hawaiian and Pacific Islander Health Agenda

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APIAHF
ASIAN & PACIFIC ISLANDER AMERICAN HEALTH FORUM

Overview

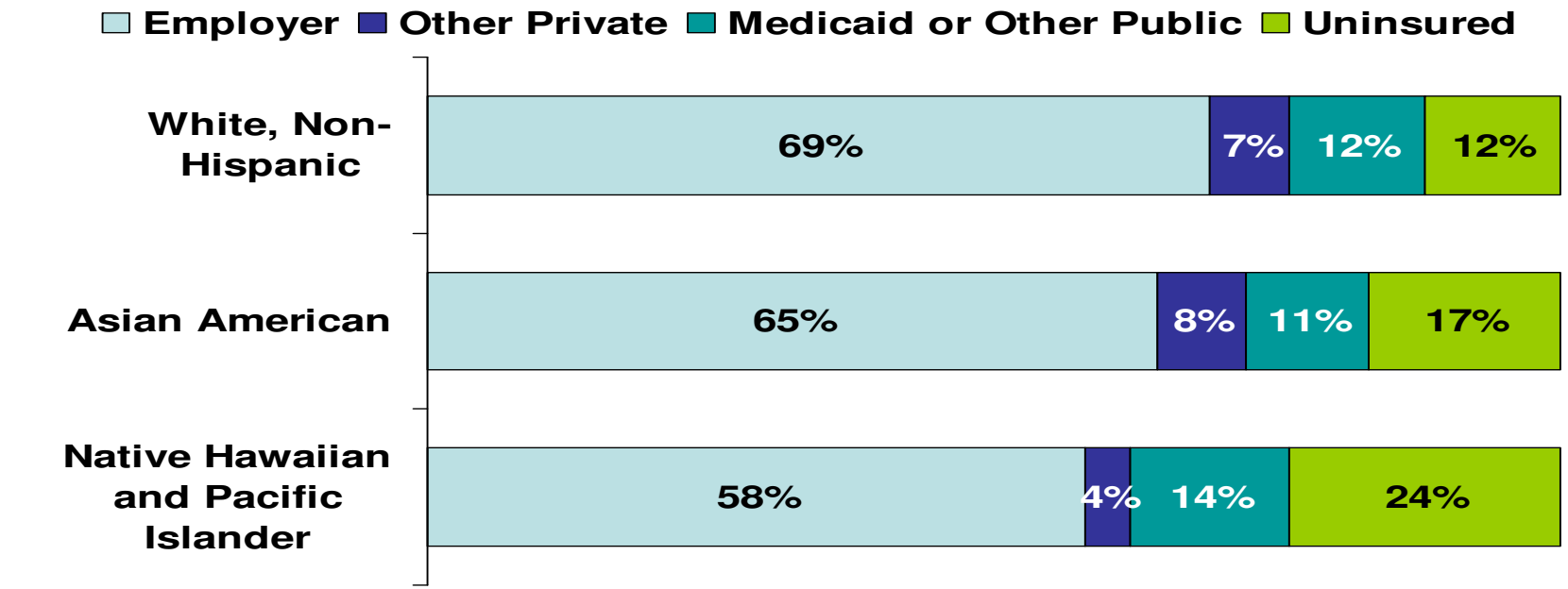
- Expansion of Health Care Coverage
- Language Access
- Improving Data on AA and NHPI Health

Access to Health Care

- Insurance coverage
- Immigrant status

Figure 2

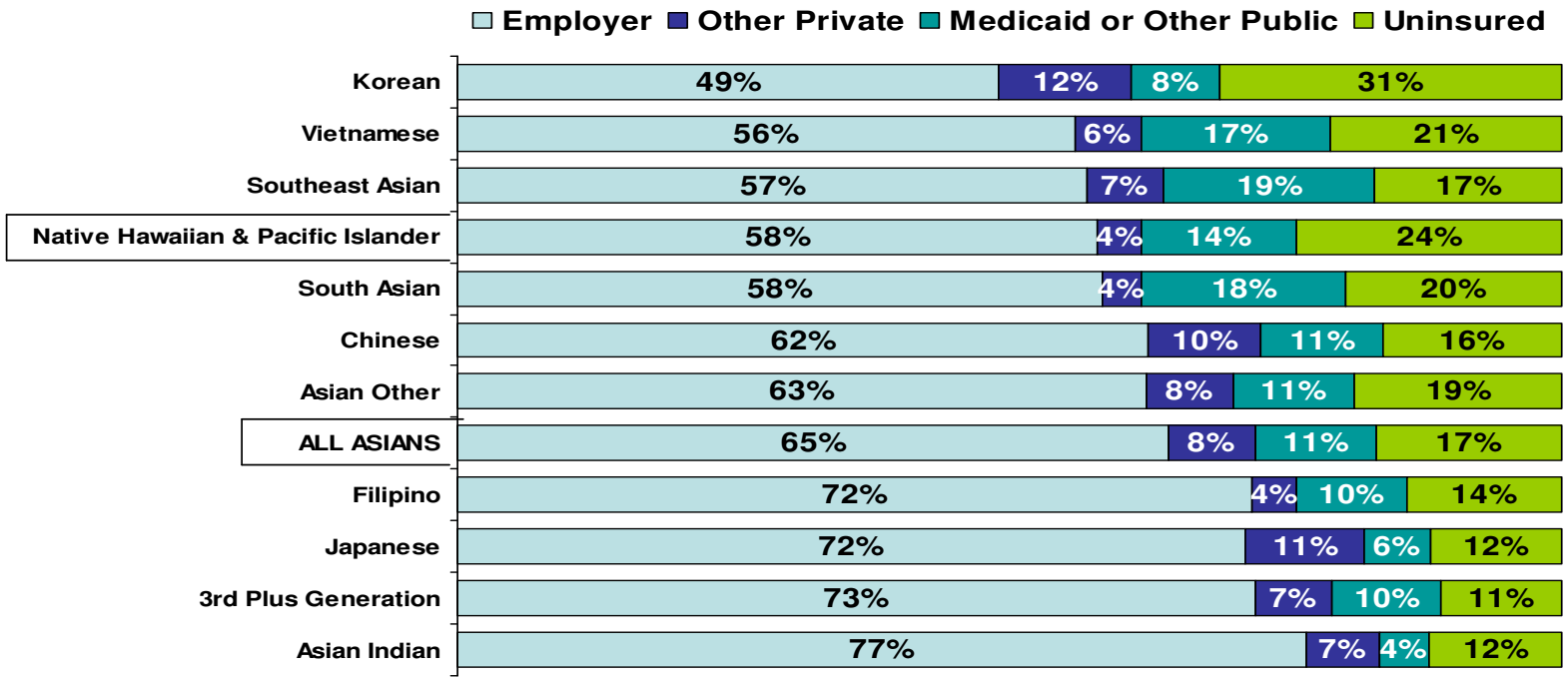
Health Insurance Coverage of Nonelderly Asian Americans, Native Hawaiians and Pacific Islanders vs. Non-Hispanic Whites, 2004-2006



DATA: March Current population Survey, 2004, 2005 and 2006, three-year pooled data.
SOURCE: KFF and Urban Institute estimates

Figure 4

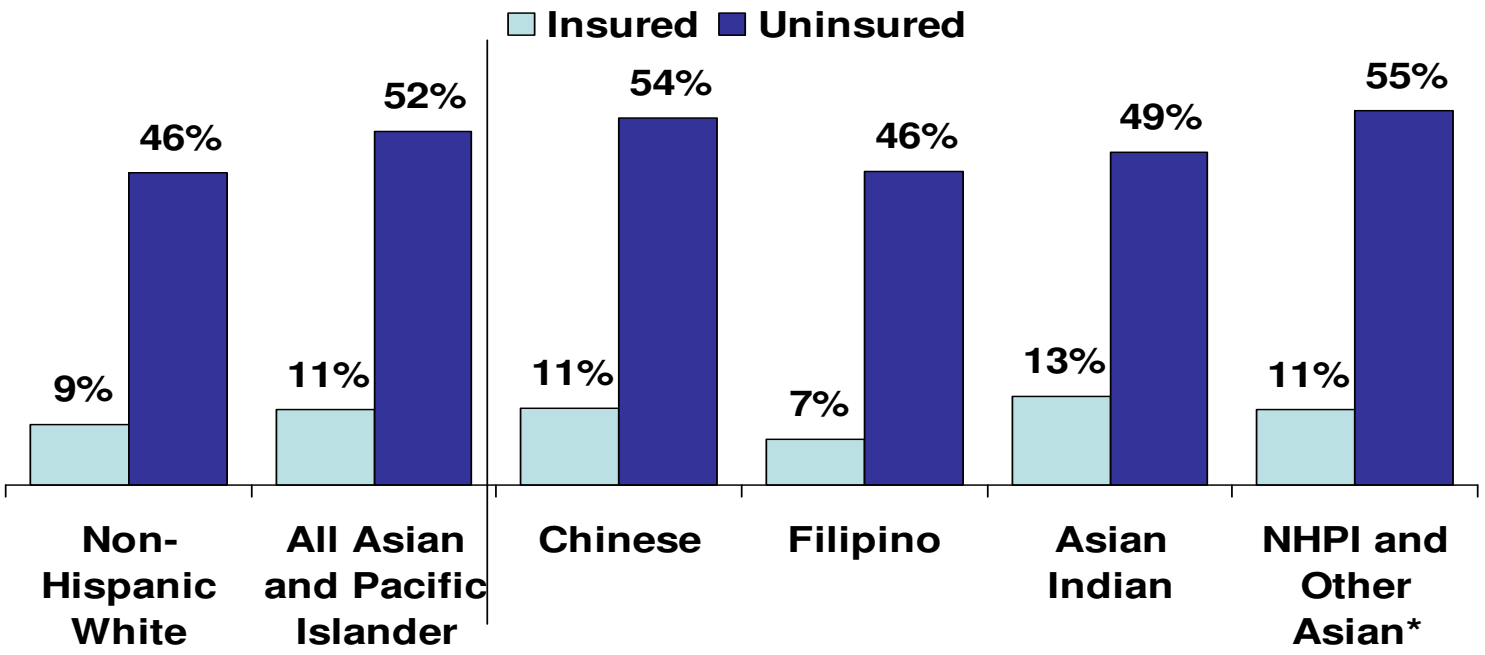
Health Coverage of Nonelderly Asian Americans, Native Hawaiians and Pacific Islanders, 2004-2006



NOTE: "3rd Plus Generation" includes Individuals who reported their and their parents' country of birth as the US.
DATA: March Current population Survey, 2004, 2005 and 2006, three-year pooled data.
SOURCE: KFF and Urban Institute estimates

Figure 5

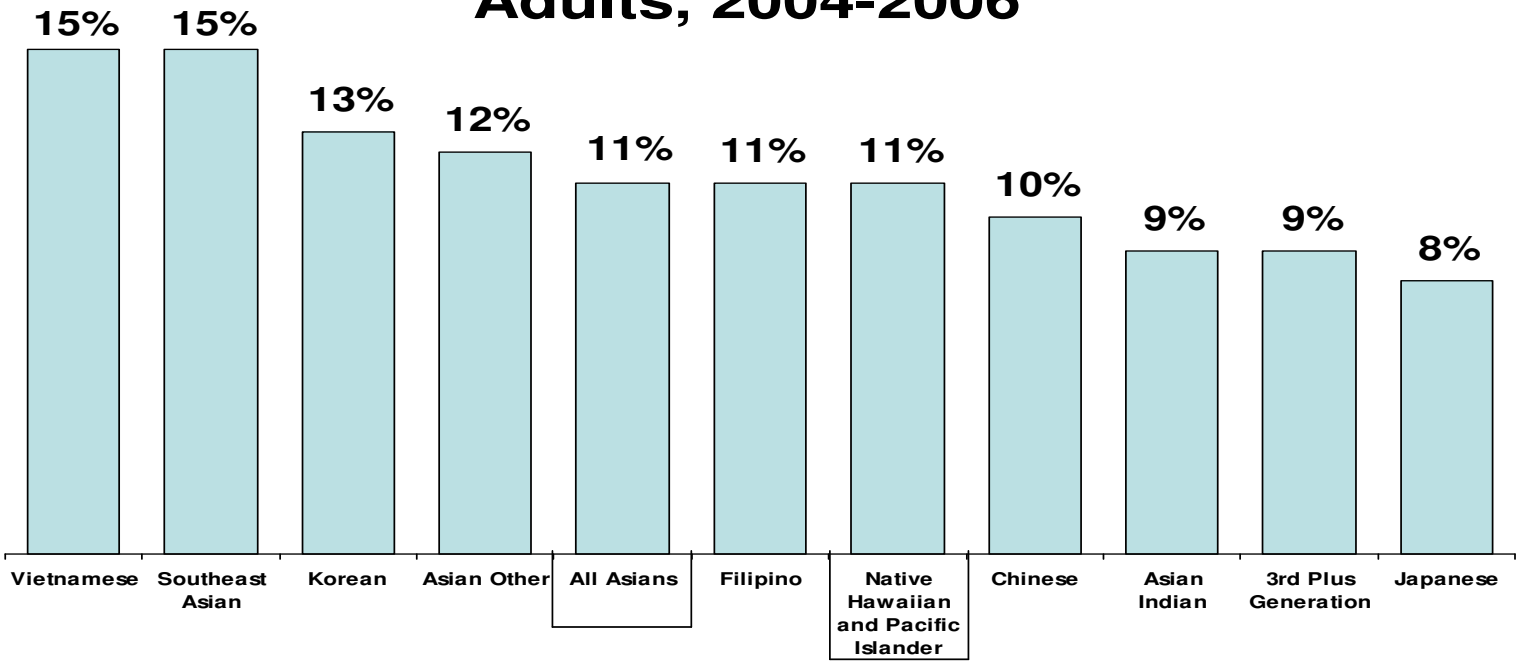
Percent of Nonelderly Adults with No Usual Source of Care by Health Insurance Status, Asian and Pacific Islander vs. White Non-Hispanic 2004-2006



DATA: National Health Interview Survey, 2004, 2005 and 2006, three-year pooled data.
SOURCE: KFF and Urban Institute estimates

Figure 2

Fair and Poor Health Status Among Asian American, Native Hawaiian and Pacific Islander Adults, 2004-2006



NOTE: "3rd Plus Generation" includes Individuals who reported their and their parents' country of birth as the US. Estimate for Other South Asian not stable. "All Asians" includes only those individuals who self-identified as Asian.
DATA: March Current population Survey, 2004, 2005 and 2006, three-year pooled data.
SOURCE: KFF and Urban Institute estimates

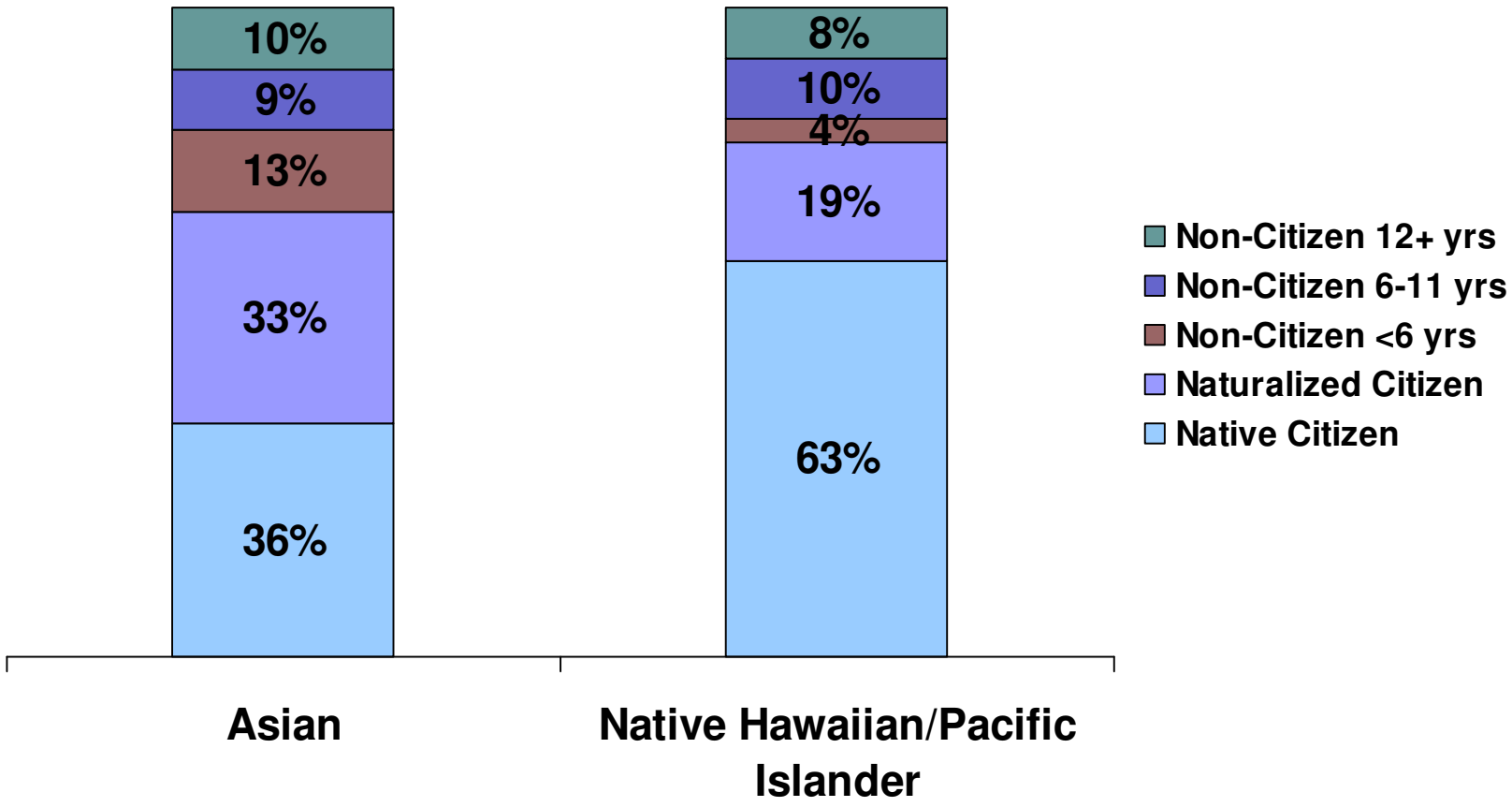
Limited English Proficiency

- More than a third of the Asian American population speaks English less than very well;
- A majority of six Asian American subgroups are LEP: Vietnamese (61%), Hmong (58%), Cambodian (53%), Laotian (52%), Bangladeshi (52%) and Taiwanese (51%); and
- More than one out of three Koreans, Chinese, Thai, Indonesians, and Malaysians speak English less than very well.

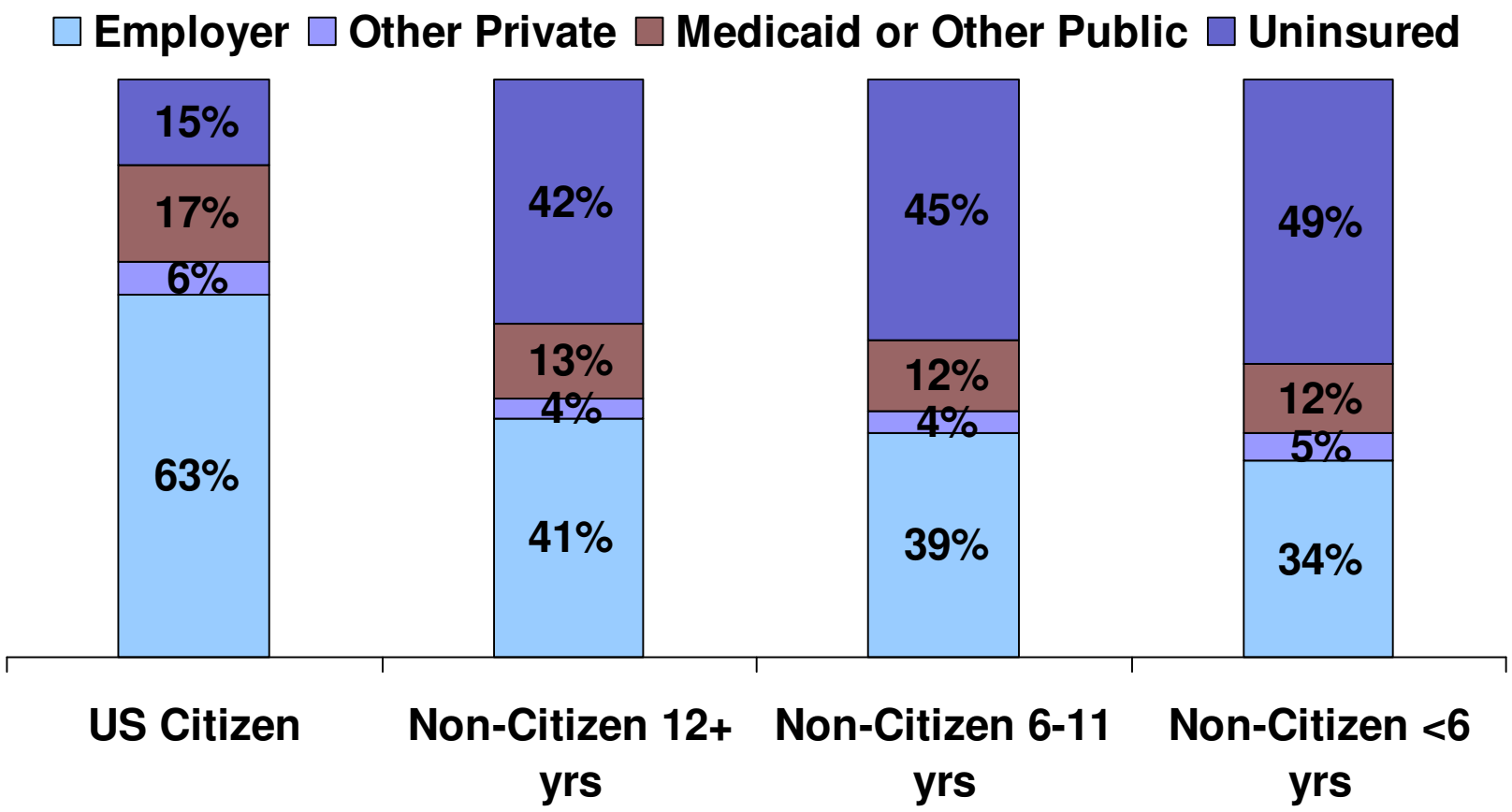
Language access issues

- Enforcement of civil rights laws
- Resources to pay for interpreters
- Interpreter certification
- Supply of qualified interpreters for AA and NHPI languages
- Supply of bilingual health professionals

Citizenship Status, 2004-2006



Nonelderly Health Coverage by Citizenship Status, 2004-2006



Immigrant status issues

- Eliminating the 5 year waiting period for lawfully residing immigrants for Medicaid
- Citizenship Documentation
- Undocumented
- Pacific Islanders

Lack of data

- Data is not collected
- Data statistically unreliable
- Data not analyzed due to small sample size

Data Policy Recommendations

- Collect data minimally disaggregated by 1997 OMB revised standard, also include data on primary language spoken
- Surveys need translation into languages spoken by AA and NHPI
- Methods need to be developed to address sample size issues, e.g. oversampling, pooling, bridging datasets
- Support increased appropriations for the National Center for Health Statistics

What's happened so far?

- Children's health insurance reauthorization
- American Recovery and Reinvestment Act (stimulus)
- President's budget

Children's Health Insurance Program

- Covered 4 million additional children
- Included Immigrant Children's Health Improvement Act
- Included enhanced federal matching rate for language services
- Included funds for outreach for enrollment including community health workers
- Extended citizenship documentation to CHIP

American Recovery and Reinvestment Act

- Includes funds for HIT: data standards will include race, ethnicity, gender and language
- Temporary enhanced federal match for Medicaid
- COBRA subsidies
- Funds for Comparative Effectiveness Research
- Prevention and wellness fund

President's budget

- Budget lays out the President's priorities for federal programs, education, health care and energy efficiency
- Includes a reserve fund of over $630 billion to fund health care reform
  - Changes to tax law
  - Changes to Medicare and Medicaid to improve efficiency, accountability and quality

Health Disparities legislation

- *Tri-Caucus Health Equity Bill*

Other opportunities

- National and state health care reform efforts
- Disease specific
- Appropriations including increased funding for community health centers and for new health centers in areas with significant AA and NHPI populations
- Administrative opportunities

Questions?

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