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HEALTHCARE

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This chapter covers the healthcare system in the USA. You will find information on Health Insurance options as well as information on accessing emergency and non-emergency care.

How does the healthcare system work in the USA?

The USA does not have the same kind of state-provided public healthcare services found in Ireland and Europe. If possible try and get a job where all or part of your health insurance premium is paid as US employers, similarly to Irish employers, are not legally obliged to provide health insurance but some do.

The cost of medical attention and hospital treatment are very expensive, for example a visit to a Doctor (GP) can cost \$100 (2007 figure) or more.

Personal health insurance is essential. Although you may usually be in good health, no one can predict accidents. If you have to get your own health coverage you should shop around for the deal that best suits you, for example, if you need regular medication you may want a plan that helps with your medication costs. Health Insurance costs about \$400 (2007 figure) minimum per person per month. Health Maintenance Organisations (HMO's) tend to be cheaper than other insurance companies. Normally if you do not have a valid visa you will find it extremely difficult to obtain health insurance.

According to the US Census Bureau figures approximately 85% of Americans have health insurance. Approximately 60% obtain health insurance through their place of employment or as individuals, and various government agencies provide health insurance to over 29% of Americans. In 2005 there were 41.2 million people in the USA (14.2% of the population) who were without healthcare insurance for at least part of that year.

I am on low income, how do I stay healthy?

Good health is important to everyone. If you find yourself in the position that you cannot afford to pay for medical care, Medicaid (this is the State administered program for low-income individuals) could make it possible for you to get the care that you need so that you can stay healthy.

Medicaid is available only to certain low-income individuals and families who fit into an eligibility group that is recognised by federal and state law. Medicaid does not pay money to you; instead it sends payments directly to your healthcare providers.

Medicaid is a state administered program but each state in the USA sets its own guidelines regarding the eligibility criteria and the services provided under this scheme. As different states in the USA have different rules, depending on your state's rules, you may also be asked to pay a small part of the cost for some medical services.

Medicaid covers many groups of people and within these groups certain requirements must be met. The requirements may include:

- Your age
- Your health details for example whether you are pregnant
- Your previous medical history, for example are you a person with a disability or visual impairment
- Your income and resources (like bank accounts, property, or other items that can be sold for cash)
- Whether you are a US citizen or a lawfully admitted immigrant.

The rules for assessing your income and resources vary from state to state and from group to group. There are special rules for those who live in nursing homes and for children with disabilities living at home.

Your child/children may be eligible for coverage if they are US citizens or a lawfully admitted immigrant even if you are not (however there is a 5 year limit that applies to lawful permanent residents) as eligibility for a child/children is based on the child's status not the parent's.

You should consider applying for Medicaid if your income is low and you meet any of the requirements listed in the Eligibility Groups. For more information on this please refer to the website

www.cms.hhs.gov/medicaidgeninfo

Even if you are not sure whether you qualify you should apply for Medicaid and have a qualified caseworker in your state evaluate your situation. For more information on Medicaid and for information on a variety of government programmes please refer to the website

www.govbenefits.gov and www.benefitscheckup.org

What rights do I have to access emergency care?

All immigrants have the right to be treated if they have a medical emergency. Almost all hospital emergency rooms provide medical screening to patients regardless of their immigration status and regardless of their ability to pay.

Uninsured individuals, undocumented immigrants, as well as people who have non-immigrant visas have the same rights to emergency care as all other people residing in the USA.

Anyone with an emergency medical condition has the right to an ambulance regardless of immigration status or ability to pay.

You can get an ambulance by calling 911. A patient who arrives at the hospital emergency room has a right to be examined to determine if she or he has a medical emergency.

A patient is considered to have a medical emergency if:

- The patient's medical condition has severe symptoms, which include severe pain
- The patient does not get immediate medical attention, which could result in serious risk to the health of the patient, or damage to bodily functions (an organ or body part). This includes serious health risks to a pregnant woman or her unborn child
- A medical worker determines that a patient has a medical emergency, the hospital must treat and stabilise the patient
- The patient must be stabilised to ensure the emergency medical condition will not get worse if the patient leaves the hospital
- In unusual cases a patient with an emergency medical condition may be transferred to another hospital or center to receive special care.

What rights do I have to access non-emergency care?

All uninsured US residents including people who are undocumented can receive Healthcare from:

- Federally funded community health centres
- Public hospitals
- Diagnostic and treatment centres
- Long-term care facilities
- Clinics maintained by public agencies.

These medical providers are not permitted to turn away patients who cannot pay for care even if a patient's medical condition is not an emergency. You will still receive a bill for your treatment, so it is advisable to speak to them on the payment options available.

What Health Insurance options are available?

Public health insurance

- Many immigrants are allowed to use public (government) health insurance programs to pay for the cost of their medical care, depending on which state you reside in
- One example of this is New York State where all categories of immigrants, including undocumented immigrants, are permitted to use Child Health Plus (for those younger than 19 years) and Pre-natal Care Assistance Program (PCAP) for any woman who is pregnant
- Emergency Medicaid is available to cover medical emergencies for low-income, undocumented immigrants. Similarly all categories of low-income legal immigrants in New York State are permitted to use Medicaid and Family Health Plus
- All of these programs are now available regardless of how long a person has been in the country
- Each program has its own rules about income and resources

- Some immigrants are not eligible for any public health insurance other than Emergency Medicaid, even though they have little income. For more information on this please see the website www.cms.hhs.gov/medicaidgeninfo
- An adult immigrant who is undocumented is only eligible for public health insurance if they experience an emergency and also in the case of a woman if she is pregnant.

Reduced rate

Based on the patient's ability to pay federally funded health centres and HHC (Health and Hospital Corporation) facilities offer care at a reduced rate also referred to as "sliding scale" or "fee settlement". Federally funded health centres and HHC's hospitals and clinics must ensure that a patient's inability to pay for care does not create an obstacle to obtaining care or cause financial ruin for the patient. It is HHC's policy that no patient will be required to pay more than he/she can afford and no patient will be denied care because of his or her inability to pay. Medical care, however, is rarely free and all patients are asked to contribute a reasonable and fair amount toward their care.

Although many private and public hospitals and clinics offer sliding scale options, it is sometimes necessary to advocate on behalf of the patient by contacting a social worker, billing or financial staff, or an ombudsperson to ensure that the Healthcare provider makes these affordable payment options available. HHC facilities and many health centres and private hospitals will help patients to sign-up for free or low-cost public health insurance. Patients should talk with the financial counsellor or a social worker. Insurance programs are generally safe for immigrants to use.

What are the most common concerns for uninsured immigrants?

Will the emergency room report me to the immigration authorities?

No one is supposed to report you to the immigration service for using medical care, or for trying to obtain medical coverage including Medicaid, Family Health Plus, PCAP, ADAP (Aids Drug Assistance Program), CHIP (Children's Health Insurance Program) and emergency Medicaid. Hospital workers, Medicaid eligibility workers, and health department staff have no obligation or authority to share any information with Immigration services about you.

I am an undocumented adult who does not have insurance. What should I tell people at the hospital about my immigration status?

You are not required to document your immigration status before receiving care. You can say that you do not think you are eligible for Medicaid.

When I come to the hospital I'm asked for a social security number. What if I don't have one?

The hospital is trying to figure out whether or not you might be eligible for public insurance. You should not be turned away even if you do not have a social security number. Tell them that you would like to talk with someone about payment options.

Payment options can include public insurance, sliding scale, fee settlement, and HHC Plus (at HHC facilities).

Will I have to pay back the cost of Medicaid I used before I can adjust status (or become a citizen, or get work visa)?

No. You will only be asked to pay back public health insurance costs if you provided false information or false documents when you applied for coverage.

Are there laws that protect the rights of people who need emergency care?

Yes, individuals who are asked for insurance information and then turned away by an emergency room if they are uninsured or who are not screened by medical personnel, may have a legal claim under federal (Emergency Medical Treatment & Active Labour Act - EMTALA) and state (Emergency Medical Services Reform Act - EMSRA) laws. For more information on this please refer to the website www.cms.hhs.gov/regionaloffices

What should I do if I am turned away?

If you are turned away you should contact your nearest Irish Center as soon as possible. They should be able to give you information on the best options available to you. For more information on the contact details for the Irish Centers in the USA please refer to **Chapter 13 - Irish Contacts**.