## Impact of Insuring Good Health

A multi-media intervention to increase health insurance navigation in racially and ethnically diverse communities

#### Minal R. Patel, PhD, MPH

John G. Searle Assistant Professor Department of Health Behavior & Health Education University of Michigan School of Public Health

#### Madiha Tariq, MPH

Deputy Director Arab Community Center for Economic and Social Services Community Health & Research Center



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# No Conflicts of Interest to Disclose

## Affordable Care Act: Michigan

2014

Health insurance marketplaces

Medicaid Expansion- Healthy Michigan Plan



**After 2014** 

Sharp decreases in uninsured, especially in Wayne County

## Gaps

## Instability in coverage

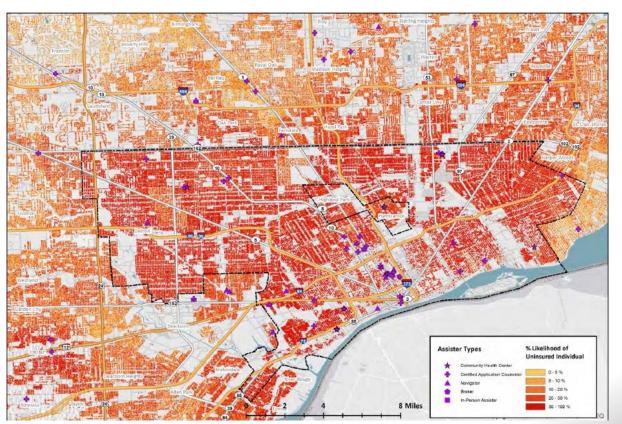
## Remaining uninsured

Low-income working families
Historically marginalized racial/ethnic groups
Adults

## Cost of coverage

\*Existing interventions do not emphasize skills training in navigating coverage

## Detroit: Uninsured Population & Enrollment Assisters













## 2015 **Insure Detroit Partnership**











### **Intervention Goals**

Improve knowledge, beliefs, confidence, behavioral intention with health insurance navigation

Lead community members to enrollment assisters



HEALTH INSURANCE ▼

GETTING ENROLLED ▼

USING YOUR INSURANCE ▼

GETTING MEDICAL CARE ▼

LANGUAGE ▼



## Characters



Captain Quick: If seeing your current doctor is not working for you, an enrollment assister can help you find a new one.

Marvelous Man: Even recent immigrants to the United States can get health insurance.



Ms. Chill: If you already have an illness or injury, health insurance can help you cover the cost.

## Characters

Kid Cartwheel: Getting health insurance can help prevent trips to the emergency room and protect you from large bills.



Mr. Move-It: If you lose your job, you might also lose your health insurance. Luckily, there are many options to get health insurance outside of your job.

Ms. Magnificent: You may qualify for Medicaid coverage even if you did not in the past.

## **Evaluation**

Data Collection

Baseline
6 month follow-up
9 month follow-up



86% 9-month retention rate

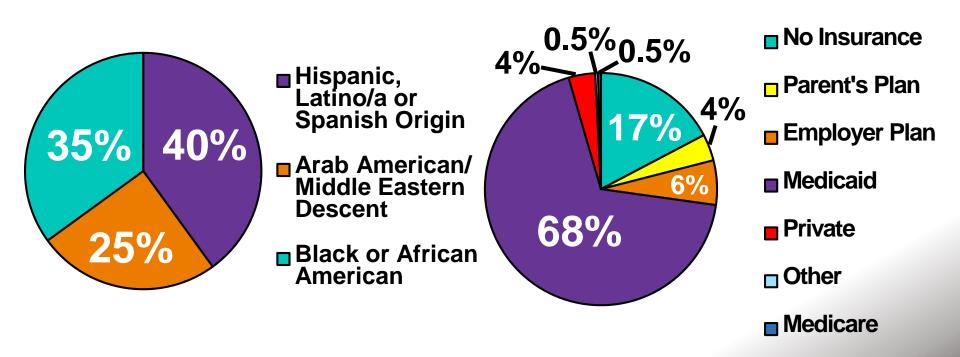
## **Hypotheses**

- 1. Engaging with Insuring Good Health will result in improved self-efficacy, knowledge, beliefs and intention with health insurance navigation behaviors compared to existing resources
- 2. Behavioral outcomes from Insuring Good Health will be more pronounced for those who engaged with the web resource for 9 months
- 3. No racial differences will be observed in behavioral outcomes resulting from Insuring Good Health

## **Participant Demographics**

**RACE** 

#### **INSURANCE STATUS**



## **Other Characteristics**

- **43.4** Years
- 73% Female
- 73% Diagnosed chronic disease
- 65% Income <\$20,000/year
- 63% U.S. citizen

## Differences in Outcomes at Baseline by Racial/Ethnic Group

#### Latino/Hispanic vs. African American and Arab American

-lower baseline knowledge on eligibility (p<0.01), confidence in both understanding their insurance plan (p<0.03) and navigating coverage (p<0.01), and intention to seek help with insurance navigation and care (p<0.01)

#### Arab American vs. Latino/Hispanic and African American

-lower beliefs on care seeking (p<0.001)

## Intervention Effects on Behavioral Outcomes at 6 and 9-Month Follow-Up

#### 6- month follow-up

-no differences in behavioral outcomes between intervention and lagged-control

#### 9- month follow-up

-intervention group demonstrated stronger beliefs about preventive care (p<0.001), and greater intention to seek help with health insurance navigation and care (p<0.01), compared to the lagged-control group

## Differences in Outcomes by Racial/Ethnic Group at 9-Month Follow-Up

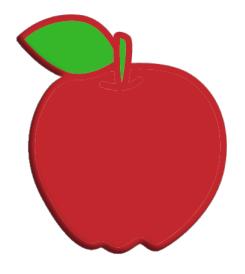
Latino/Hispanic participants reported greater gains in:

- -Knowledge of eligibility requirements
- -Confidence in navigating provision of insurance
- -confidence in understanding their insurance plan

# What did people think of Insuring Good Health?







Some stated a health behavior they wanted to change



### **Animation and characters**

- found them relatable



Design and format of the website



### **Testimonials**

"The information that you get out of the video is stuff that you really need to know. Making it cartoon characters is very easy to learn."

"It's a really helpful resource for better understanding for myself or pass along to others.
Since it's in multiple languages more people can take advantage of it."





## Limitations

Intervention dose

Reliance on behavioral and psychosocial self-report outcomes

Missed opportunity to ask about follow-up with enrollment assisters

Lack of balanced groups precluded some racial/ethnic comparisons in outcomes

Sample derived from clinics for low-income people in one geographic location

## **Implications**

Useful tool to augment outreach efforts

Bring people to services



# Insuring Good Health Outreach Toolkit

## **Uptake of Insuring Good Health**

#### Massachusetts

Community Catalyst/In the Loop

#### **Colorado**

**Patient Navigator Training** 

#### Michigan

Collaborative Michigan Asian Pacifica American Affairs Commission

Healthy Flint Research Coordinating Center Greater Detroit Area Health Council



See the next page for how to share Insuring Good Health!

## **Materials**









Social Media Posts

**Stickers** 

Informational Handouts

## **Toolkit Organization**

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### bit.ly/InsuringGoodHealth

## Acknowledgements

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**Insure Detroit Steering Committee Members** 

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**Research Participants** 

