

http://www.heraldfimesonline.com/news/local/vim-s-mission-shifts-as-more-patients-get-insurance/article_48568122-626d-5b8c-9b67-49805adcfe14.html

FEATURED

VIM's mission shifts as more patients get insurance

Those with new coverage often need help navigating health care system

By Lauren Slavin 812-331-4376 | lsavin@heraldf.com Aug 17, 2015



More than half a year after the state expanded the Healthy Indiana Plan to low-income Hoosiers, the Volunteers in Medicine staff has learned a very important lesson — having insurance and having health care are two very different things.

Since the implementation of the Affordable Care Act, the number of uninsured Hoosiers has decreased from 15.3 percent in 2013 to 13.6 percent in 2014, according to Gallup. As of July 15, statewide enrollment in HIP 2.0 reached 297,000, according to the Family and Social Services Administration.

But when VIM staff visited families in the Crestmont neighborhood, they found that even those who had insurance were falling into old patterns of behavior.

“If people don’t understand how to use their insurance, they don’t understand how to make an appointment, they don’t know how all this works, they go to the emergency department,” said Nancy Richman, executive director of Volunteers in Medicine of Monroe County.

“People with insurance are not getting health care. And health care reform does not work if people don’t use their insurance.”

Because VIM only sees patients without health insurance, the free clinic’s client volume has decreased about 50 percent since 2013, Richman said. Now, VIM’s registered nurses, nurse practitioners, medical assistants and pharmacist can focus more of their efforts on ensuring their former patients properly use the local health care system to address their current medical needs and prevent future health crises.

“VIM is a bridge in many ways between people who are newly insured and the medical system,” Richman said. “We consider our obligation to help people access medical care.”

When patients come to VIM for care, a staff member can first determine if the patient has insurance, or if the patient is eligible for one of the insurance plans provided by the state. Patients who have enrolled in HIP 2.0 and don’t choose a primary care physician are assigned a doctor by the state.

But many patients don't know who to contact to find out who their new doctor is, or their doctor may be located in another county.

"I think that's the biggest myth right now probably in the community, that everyone's taken care of, they all have insurance," Richman said. "It's the assumption that people with insurance are all set. Well, they're only set if they go to a doctor, and many don't."

Patients who are eligible for insurance can work with the two staff members on VIM's eligibility and enrollment team to sign up for HIP 2.0. These professionals also can help clients make first appointments with new doctors, connect patients with transportation to their appointments and prepare the client for their visit.

"We know this population; we understand people living in poverty," Richman said. "We understand people who are newly insured and the confusion about that."

The VIM staff also know that many of their patients' medical concerns are only a part of their tumultuous lives. Many are unemployed and financially unstable. They may not have enough food to feed themselves or their families. Some are homeless, or living in crowded or substandard housing.

"All of those are social issues that affect their health," Richman said. "When people living in poverty become insured, they are still living in poverty. That doesn't change. And so their health is still affected by all of those issues."

Through partnerships with IU Health Bloomington Hospital, Southern Indiana Physicians and Premier Healthcare, Volunteers in Medicine is working to address obstacles patients face amid these social and economic factors. VIM staff also will be working to address the health of the county's homeless population and encourage residents to seek preventive primary care through HIP 2.0 instead of using the emergency room.

"Now, we have the capacity to address an unmet need that is so important, because people who are experiencing homelessness also have many serious chronic medical conditions that are made worse by being out in the elements," Richman said. "It's a medical disaster for people."

VIM physicians visit Shalom Community Center and the Crawford Apartments for formerly chronic homeless people to offer free health screenings, for such conditions as high blood pressure and high blood sugar, and to coordinate patient care and identify unmet needs and barriers to receiving care.

“It’s all about building trust, getting to know people, so that when they have an issue, they know where to come,” Richman said. “When you walk to the emergency department, walk a half a block further and come to us instead.”

Richman remembers one client with blocked carotid arteries who required life-saving surgery, but was uninsured and homeless. Although a VIM social worker was able to find a surgeon willing to donate the procedure, the woman would have no safe place to recuperate.

“There are no medical respite beds in this town,” Richman said. “The medical issues are unique and challenging for people experiencing homelessness.”

VIM staff knew that township trustees sometimes pay for short-term housing assistance for low-income residents. Once the woman had a motel room secured to rest after her surgery, the social worker was then able to help the client sign up for HIP and discuss how she would receive care in the future.

“We want to help people be successful using their insurance, make sure they have insurance, and promote people to be healthy by helping them be successful with their resources,” Richman said. “And we can do that in ways other places can’t, necessarily.”

Even with these new programs, VIM staff will continue to provide primary care to the uninsured, Richman said. Volunteers in Medicine’s medical professionals will care for those who fall through the cracks in the system, she said, such as undocumented immigrants or those working toward citizenship, as well as individuals who do not qualify for HIP 2.0 but who have not yet purchased a plan on the ACA marketplace.

“There are still huge gaps in medical care in this community, and VIM will serve as a bridge and a medical site for as long as there’s a need, and I don’t see the need going away,” Richman said. “As long as there’s poverty, as long as there’s homelessness, there’s going to be a need for health support services.”

You May Like

Sponsored Links by Taboola

Charlize Theron's Vogue Cover Drops Jaws

Vogue on The Scene

You're In For A Big Surprise in 2016 If You Own A Home in Indiana

Comparisons.org Quotes

23 Unreal Photos Taken Before Most Tragic Moments In History

Your Daily Dish

The Wedding Photographer Wasn't Expecting To Capture This

WorldLifestyle

3 Billionaires Say: Something Big Coming Soon In U.S.A.

Stansberry Research

Only 1 In 50 Americans Can Name These Iconic Women. Can You?

Topix Offbeat