

# Health Care Resources For Rhode Island Immigrants

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**Immigrants and refugees who enter Rhode Island (RI)** bring acute needs for medical, social and legal services. The **Department of Homeland Security (DHS)** formally processes refugees and immigrants. This process includes a medical evaluation (Health Screenings) and assistance with housing, legal status, and employment. Often the medical field is a point of entry into a set of social, health, and legal services.

This article will describe some of the health resources that are available to immigrants and refugees in RI.

## **ARRIVAL, SCREENING, AND CARE**

DHS determines a person's refugee status before resettlement in the US. If classified as a refugee, an immigrant will arrive with legal resident status. The Refugee Resettlement program contracts with **voluntary agencies (VOLAGS)**. In RI, the established VOLAGS are the International Institute and the Diocese of Providence, which assist the refugees with reception, placement, employment, **English as a Second Language (ESL)**, and case management.

Refugees who enter the US at one of eighteen ports of entry with quarantine abilities undergo health screening prior to departure from their home country. Once approved to travel to RI, the RI Department of Health accepts refugees into the RI Refugee Health Program. Since its inception in 2004, the Refugee Health Program has monitored and assisted immigrants in almost every aspect of their lives, from facilitating access to healthcare to providing opportunities for education and training.<sup>1</sup>

Refugees are initially covered through RIte Care, made available through Bluecross Bluechip, United Ritecare, or Neighborhood Health. Unless the refugee is disabled or has young children, RIte Care will end after eight months. Within that period refugees are expected to find employment that provides health benefits. Although case workers bring refugees to the Department of Human Ser-

vices shortly after arrival to apply for benefits, many refugees experience a delay of weeks to months to obtain proof of the benefits. This delay results in retrospective payment for many health care providers.

The initial medical screening for incoming refugee immigrants ideally serves as an entrance point into a primary care practice. RIte Care covers in-person or telephone interpreter services for healthcare appointments, but these services must be arranged in advance. The providers who make a commitment to the refugee community and conduct screening visits are Hasbro Children's Hospital, The Miriam Hospital, Saint Joseph's Hospital, and **Providence Community Health Centers (PCHC)**. At the screening exam, the physician makes referrals to specialty services.

Documented immigrants who are not classified as refugees face the same challenges as Americans: some may have employer-provided insurance, but many, particularly those who work at low-wage jobs, will be uninsured. Documented immigrants undergo a screening program prior to arrival in the US, though they are expected to establish their own primary care without the support of agencies that assist refugees. Children of uninsured patients are eligible for Kid Care, a state-funded insurance program, irrespective of citizenship status.

Undocumented immigrants experience a patchy network of social services, long waits, poor access to specialists and expensive pharmaceuticals. However, the **Women, Infants and Children Program (WIC)**, **COBRA Health Insurance**, and **Federal Emergency Management Agency Program (FEMA)** are available to immigrants<sup>3</sup> who meet eligibility requirements.

The **Personal Work and Responsibility Act (PWRA)** applies to immigrants arriving after August 1996. The PWRA rules that documented immigrants are ineligible for federal services until they have legally lived here for five

years. This creates a subset of documented immigrants who require services and do not have access to them. Despite the PWRA's enactment, few immigrants access the services for which they are eligible, after the five years have passed, often due to fear or misinformation.<sup>4</sup>

Many immigrants use hospital **emergency departments (ED)s** for all their healthcare needs. The Emergency Medical Treatment and Active Labor Act requires hospitals to evaluate patients regardless of their legal status or ability to pay, but does not require hospitals to provide care free of charge.<sup>5</sup> This leaves patients with large hospital bills they cannot pay. Many hospitals in RI offer financial assistance and counseling, but access is often through a difficult-to-navigate application process that patients and/or providers may not know about, or understand. Fortunately the state has an extensive although overburdened free clinic system including the Providence Community Health Centers, the Rhode Island Free Clinic, and the Women & Infants Wellness Van.

## **RESOURCE FACILITIES FOR IMMIGRANTS**

### **Lifespan Hospitals**

Lifespan Hospital System's Free Care Program charges uninsured persons fees based on a sliding-scale regardless of citizenship. If income is below a cutoff, which varies between facilities, the care is administered free of charge. In 2008 Lifespan provided just under \$72 million of uncompensated care.<sup>6</sup> The ED serves as the gateway to a sliding-scale program. The program requires the patient to accept responsibility for at least a copay, prior to a referral to the clinic and a Patient Financial Advocate. Not surprisingly, patients with language barriers often do not understand the referral process and the role of the Patient Financial Advocate, and those patients sometimes do not receive the financial benefits and miss scheduled appointments. Immigrants are ultimately referred to the

Medical Primary Care Clinic and the Medical-Pediatrics Clinic. Specialty services include cardiology, gastroenterology, ophthalmology, dermatology and immunology subspecialties. Surgical services include general, orthopedics, trauma, plastic, and neurosurgery.

Memorial Hospital of Rhode Island, Our Lady of Fatima Hospital and Kent County Hospital, have similar, albeit smaller programs.

### **Providence Community Health Centers (PCHC)**

With five locations, the PCHC serve 31,000 patients annually. The PCHC accepts all insurance providers from Rhode Island although most of their patients are uninsured.<sup>7</sup> The clinic is funded with a combination of Federal financing, insurance reimbursement, and patients payments (co-pays for insured payments, sliding scale fees for patients without insurance), and Neighborhood Health Plan funds.

The practices at the PCHC include adult, pediatric, obstetric and gynecologic care with select specialties offered weekly in the evenings. Patients requiring specialties not offered must seek care through one of the local hospital Free Care systems, most often Rhode Island Hospital. Laboratory tests are available at low cost from on-site laboratories, and clinicians preferentially prescribe medications from \$4 prescription programs (offered at Walmart, Stop and Shop, and Target pharmacies) or free samples provided by pharmaceutical companies.<sup>8</sup> Express Care offers urgent care seven days a week with extended hours. In addition, different locations specialize in multiple languages featuring bilingual staff and clinicians.

Crossroads Health Center, a subsidiary of PCHC and attached to the Crossroads RI facility (a multiservice facility for the homeless) offers health care services to the homeless population in Rhode Island, including on-site psychiatric services.

### **Rhode Island Free Clinic**

The Rhode Island Free Clinic (RIFC) offers adult internal medicine and gynecology. There are currently 350 uninsured patients in the practice; approximately 60-70% are immigrants. Medical staff, including on-site specialists in behav-

ioral health, psychiatry, surgery, orthopedics and ophthalmology, provide voluntary services. Funding is through private donations and grants. The RIFC has relationships with the ENT, GI, and Surgery clinics at Rhode Island Hospital and can facilitate appointments and the paperwork for free care.

Enrolling as a patient at RIFC involves a monthly lottery. Approximately 70-100 patients apply monthly for 20-30 available spots. Clinic visits are free and the on-site pharmacy has common medicines. When the RIFC is unable to supply the medications necessary, they encourage patients to utilize local \$4 programs.

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### **SPECIAL HEALTH CIRCUMSTANCES**

HIV-infected refugees and documented immigrants have access to treatment even after eight months of state-sponsored care because of The Ryan White Act. Sites providing HIV care with case management and housing assistance include: AIDSCare Ocean State, Family Service of RI, AIDS Project RI, Agape, and Family Resources of RI. In addition, antiretrovirals are provided at discounted costs under the AIDS Drug Assistance Program to legal immigrants without insurance coverage. Undocumented immigrants must rely on the sliding-scale payment resources available through places such as Lifespan's Immunology Clinic.

### **Mental Health Services**

Mental health is one of the largest unfulfilled needs facing undocumented immigrants and the uninsured in general. Mental Health needs are mostly filled in the ED, leaving most mental health patients to receive care only in extreme cases. The Allen Berry Clinic, one

of the PCHC centers, provides doctoral candidates in psychology as a free resource to patients for mental health care.

Many refugees, particularly those arriving from hostile, impoverished countries, need mental health services. Access though, proves difficult for refugees due to cultural and language barriers. Family Service, a non-profit mental health center for insured persons, has several sites in the state. Family Service offers interpreting services in several languages.

Most healthcare providers refer uninsured or poorly insured patients to the The Providence Center, although non-crisis appointments may take weeks to be scheduled. Emergency psychiatric care can be found at local hospital EDs. However, this service is less than ideal, given the limited availability for follow-up care once the acute crisis has abated.

### **DENTAL HEALTH SERVICES**

With RItcare benefits, refugees receive dental services from dental professionals who accept Medicaid.<sup>2</sup>

For the uninsured, there is a patchy network of low-cost options. The Samuels Dental Clinic provides care for pediatric, prenatal and adults with special needs.

At Rhode Island Hospital ED, one of the 73 patient care rooms is a dedicated dental workstation with dental chair and dental instruments. The Samuels Dental Clinic Dentists occasionally use this for consults. However, ED clinicians handle the vast majority of emergency dental cases; and especially for daytime consults, Samuels Dental Clinic prefers that we send patients to them for evaluation and consultation.

The PCHC Dentistry Clinic provides care to its medical patients but focuses on prenatal and obstetric patients without attention to insurance status.

Some private dentists offer free services through the Donated Dental Program. The openings are few and generally require personal knowledge of a dentist offering such services as well as a lengthy application process.

The Travelers Aid Dental Clinic provides free care to homeless adults and adolescents living on the streets, in shelters, or in transitional living programs.

A number of other low cost or free dental care sites, such as Thundermist, offer services for domestic and immigrant populations.

## HEALTH EDUCATION

For immigrants, health education is often limited to a basic review of medications and the reaffirmation of the need for primary care. Education on diabetes, sexually transmitted diseases, cancer awareness, and socially complex issues such as domestic violence and substance abuse, are the mainstay of health education.

Resources for basic health education include International Institute, Progreso Latino, Center for Hispanic Policy and Advocacy, Capital City Community Centers, and African Alliance of Rhode Island. Progreso Latino offers public health resources for HIV prevention, cancer awareness, diabetes, domestic violence and substance abuse.

The Women & Infants Wellness Van offers mobile health outreach and education, as well as simple health screening.<sup>9</sup> The van is available state-wide with a schedule accessible online. The primary focus of the Van is to bring health care to the underserved community, including immigrants. Individuals present to the site of the day, at which point they receive health education and personalized advice.

The Wellness Van also offers information on insurance and the availability of primary care. While staff do not provide direct health care, they refer patients to agencies offering care to the uninsured, as well as assist in the application process. They work closely with churches, community centers, and institutions such as the International Institute.

In 1998, Rhode Island Hospital launched its Injury Prevention Center. The Center, based at Rhode Island Hospital and Hasbro Children's Hospital, has developed more than 20 programs in alcohol and injury, motor vehicle safety, medical student and resident education, bicycle safety, fire safety, and home safety. The immigrant and refugee population in RI have been included in a number of these initiatives.<sup>10</sup>

## CONCLUSION

Immigrants often arrive with limited English skills or financial resources and may have acute or chronic medical needs.

Rhode Island has agencies and organizations that can provide care for this population. Primary care clinicians, who are often the entry point into the health care system, should be aware of the resources available for this population.

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