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ISSUE BRIEF: Johns Hopkins Medicine's Latino Community Support Strategy

INTRODUCTION

Over the last two decades, immigrants from Latin America have increasingly moved to cities that traditionally had few Latinos, such as Baltimore. Latinos are now the fastest growing ethnic group in the city. Rapidly changing demographics, however, have outpaced the capacity to provide culturally and linguistically appropriate services. In addition, deeply rooted social inequalities and exclusionary policies curtail access to healthcare and other benefits for many immigrants and their families, especially those who are undocumented.

A Hispanic Community Support Strategy Work Group was assembled in June 2022 to support development of a JHM strategy to address the healthcare and economic needs of our health system's growing Latino population. The purpose of this group is to:

- Identify the barriers to healthcare in the Hispanic community, particularly among undocumented immigrants
- Serve as advocates to identify strategic partnerships across JHM and externally to address equity barriers through reforming processes and policies
- Promote workforce equity

Executive Sponsors:

- Inez Stewart, Senior Vice President of Human Resources
- Sherita Golden, Vice President, Chief Diversity Officer, Office of Diversity, Inclusion, and Health Equity

Work Group Members:



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TAP	Kathleen Page
Centro SOL	Sara Polk, Kathleen Page, Monica Guerrero Vazquez
Office of Diversity, Inclusion, and Health Equity	Sherita Golden, Alaysia Phillips
Government and Community Affairs	Maria Tildon, Jeanne Hitchcock
Marketing and Communications	Carla Chase

About This Brief

The following equity concerns have been identified as strategic priority areas to support our Hispanic/Latinx community. Data from interviews, focus groups, and surveys conducted by community partners and by Johns Hopkins teams at local venues were used to prioritize this list.

Priority Issues and Key Interventions

1 - Healthcare Access

Medicaid Eligible Marylanders remain uninsured and with limited access to care despite insurance eligibility due to system-level challenges to enrollment. Low-income individuals with non-English preference and the children of ineligible immigrant adults face additional challenges due to language barriers, lack of familiarity with the health system, and institutional mistrust. This not only exacerbates healthcare inequities, but also leads to measurable lost revenue to the health system. For example, at the Harriett Lane Pediatric Practice, lack of support to enroll CMS-eligible children results in \$2 million in revenue loss annually. The Healthy Babies Equity Act, which expanded coverage to pregnant women in Maryland, regardless of immigration status, provides an important opportunity to improve maternal and child health, but will require proper implementation to maximize benefit for patients and minimize lost hospital revenue.

Priority Issues	Key Interventions	
	Health System	Policy
<p><i>Medicaid Redetermination</i> Missed re-enrollment opportunities</p> <p><i>Emergency Medicaid Enrollment</i> Missed opportunities to enroll hospitalized immigrant patients who meet eligibility</p>	<p>Bilingual insurance enrollment experts/navigators to facilitate enrollment and help navigate complex application and follow up. This team could complement the services</p>	<p>Advocacy to state and local agencies to address enrollment barriers specific to immigrants</p> <p>Advocacy to increase state-level staffing to process applications from immigrant families</p>



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<p><i>CHIP Enrollment</i> Challenges in enrolling the US-born children of immigrant mothers and disproportionate denial of immigrant families</p> <p><i>Healthy Babies Equity Act:</i> Unclear implementation strategy to maximize enrollment of eligible immigrant pregnant women</p>	<p>provided by outside vendors and improve trust in the community</p> <p>Partners: <i>Lakmini Kidder and JHM Revenue Cycle</i></p>	<p>Advocacy to establish and fund community-based enrollment systems</p> <p>Partners: <i>Government and Community Affairs (Local and State Affairs)</i></p>
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2 – Coverage Equity

Johns Hopkins Bayview Medical Center and Johns Hopkins Hospital are two of the main providers for the state in the provision of charity care in the Greater Baltimore Area. The Johns Hopkins Access Partnership provides access to care to Medicaid ineligible individuals with financial need who live East Baltimore community surrounding Johns Hopkins Bayview Medical Center and Johns Hopkins Hospital. Approximately 2,500 patients, majority Latino immigrants, receive care annually through this charity program, which waives hospital and physician fees.

Priority Issues	Key Interventions	
	Health System	Policy
<p>There is ongoing increase in TAP patient volume and complexity, in part due to aging immigrant population.</p> <p>No coverage for medications, durable medical equipment, and other items of medical necessity.</p>	<p>Pilot TAP-like programs at other JHHS and non-JHHS hospitals (Medium-Term)</p>	<p>Evaluate legislative strategies and explore Maryland Hospital Association support to create incentives for other hospital systems to care for these patients including a willingness to set up TAP-like programs.</p> <p>Advocate for Medicaid enrollment and emergency Medicaid authorization for current TAP patients.</p>

Economic Development



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An identified barrier to small, Hispanic-owned businesses participating in our Hopkins Local program is the length of time it takes for Hopkins to process payments to the business. Many small businesses cannot afford payment delays and decline future business if payment delays are too great with initial contracts.

The Hopkins Local BUY Team has undertaken and focused on the efficient (30-60-90 day) processing of payments for small businesses. The team staffed and hosted several workshops on how small businesses can invoice matters to accomplish pre-payment. The significant work that the team is undertaking is on a campaign to help divisions and offices prioritize the payment of small businesses within their particular offices. The payment of small businesses within many offices is left to the discretion of individual administrators. The Hopkins Local BUY Team hopes to encourage advancing payment and utilizing deposits for work to expedite payment to small businesses. This process needs to be prioritized across the organization and communicated to internal stakeholders who engage with small businesses as well as to the business owners.

CALL TO ACTION

In order to reduce health care disparities among Latinos in the surrounding communities, JHM must take action to eliminate barriers and improve access to care. Once employed, the proposed JHM strategies in this brief would increase enrollment for eligible Marylanders, provide a wider net of hospitals to receive care, and improve trust within the communities. Partnership between Office of Diversity Inclusion and Health Equity, Government and Community Affairs, Centro SOL, as well as additional support from Hopkins Local, Revenue Cycle, and each JHM entity is needed for these strategies to be effective and have the intended outcome.

Next Steps

- Draft policies at the state and local level to address inequities in the Medicaid enrollment process
- Partner with Hopkins Local BUY Team to improve payments for small Latino-owned businesses
- Identify other entities to pilot TAP programs, which would increase health care coverage
- Outreach to Maryland Hospital Association to facilitate conversation around making the process easier for hospitals to apply for charity care