

## Health Care Services Offered to Immigrants and Refugees

### Minnesota Health Care Programs (MHCP)

New, naturalized American citizens may qualify for Medical Assistance (MA), MinnesotaCare or General Assistance Medical Care (GAMC) if they meet all eligibility criteria.

Noncitizen immigrants may qualify for MA, Emergency MA, MinnesotaCare or GAMC if they meet all eligibility criteria. Their immigration status determines if they qualify for a federally funded health care program or a state-only funded health care program.

Noncitizen refugees may qualify for MA, MinnesotaCare or GAMC (either federally funded or state-only funded) if they meet all eligibility criteria. They may qualify for Refugee Medical Assistance (RMA) in their first eight months in the United States if they do not have a basis of eligibility for MA.

### Minnesota Community Application Agent (MNCAA) Program

MNCAA is an incentive program for organizations that directly identify and assist potential MHCP enrollees in filling out and submitting a MHCP application. While all MNCAAs may work with new immigrants, several organizations focus on immigrant populations. The chart provides several examples.

MNCAA	Population Focus
CANA-Center for Africans New to America	Africans
Hmong American Partnership	Asians
Lao Assistance Center of Minnesota	Asians
Lao Family community of Minnesota	Asians
SE Asian Refugee Community Home (SEARCH)	Asians
United Cambodian Association of Minnesota	Asians
Vietnamese Social Services of MN	Asians
Centro, Inc.	Latinos
CLUES - Grantee	Latinos
Intercultural Mutual Assistance Association (IMAA)	Latinos
La Clinica (West Side Community Health Services)	Latinos
Migrant Health Services	Latinos
Liberia Build Project	Liberians

### Outreach Grants

Outreach grants assist public and private organizations in providing information and application assistance to potential MHCP enrollees. Two grants were awarded in FY 2010 to organizations working with immigrant populations. One grantee was Portico Healthnet who focused on the Latino population in partnership with Comunidades Latinas Unidas En Services (CLUES). The second grantee was Community Resource Connections, Inc. also focused on the Latino population (as well as Native Americans).

### Health Care Application (HCAPP) and Renewal Translation

In the past year we posted new translations of the HCAPP and renewal on our website through eDocs in Spanish, Hmong, Vietnamese, Somali and Russian.

### Coverage of Spoken Language Interpretation

Minnesota Health Care Programs cover spoken language interpretation for enrollees who require such services. As part of an initiative to improve the access to health care language interpreter services throughout the state, the MN Department of Health created a statewide roster of spoken language health care interpreters. Health care providers can use the roster to locate interpreters and link them by language, health care subject areas, and specialty settings. Effective January 1, 2011, MHCP will cover face-to-face language interpreter services only if the interpreter is listed on the roster.

## Chemical and Mental Health Services Offered to Immigrants and Refugees

The Children's Mental Health Division offers no services specific or limited to immigrants and refugees. However, most children's mental health programs are designed with the capability of meeting the mental health needs of immigrants, refugees, and culturally diverse populations.

- The **Trauma-Focused Cognitive Behavioral Therapy Grants** provide intensive training and case consultation to clinical staff groups in evidence-based treatment for children and adolescents who have suffered the trauma of war, refugee experience, or family violence.
- The **Services for Cultural and Ethnic Minorities Grants**: (1) provide direct mental health assessment and treatment to children of cultural and ethnic minority families and (2) expand the number of mental health providers-of-color by covering their costs for completing mental health professional licensure and costs for mental health practitioner training. Grants are awarded to community providers, including several culturally specific agencies.
- The **Early Childhood Mental Health Grants** are building capacity across Minnesota to identify and treat the mental health and development needs of the youngest children, from birth to age 5. A particular focus of the program is to find and treat the needs of children who have experienced trauma—including the trauma usually suffered by refugees.
- The **School-based Services Grants** offer mental health assessment and intervention in school settings. In addition to vastly increasing access to services in a natural setting, locating mental health capacity in schools "normalizes" mental health care and reduces stigma often associated with having a need for mental health care. These factors, alone, expand accessibility for cultural groups with either no concept of mental illness or a negative concept of those needing mental health care.
- The **Evidence-Based Mental Health Treatment Grants** train statewide clinicians in the use of the Minnesota Evidence-Based Practices Database, which guides clinicians and parents in choosing treatments that are supported by scientific evidence as being effective for each child's combination of diagnosis and demographic characteristics (race, ethnicity, age, gender, etc.).
- The certification and quality monitoring of children's mental health providers by the Department's culturally-diverse clinical experts encompasses a review of each provider's cultural competence and its ability to serve the needs of children from diverse cultural backgrounds. The lead clinical consultant on the site-visiting team is, herself, an immigrant from Colombia.

# Children & Family Services Offered to Immigrants and Refugees

## Refugee assistance

The refugee resettlement program coordinates services to assist refugees in making the transition to life in the United States. These services include resettlement and placement, cash and medical assistance, and employment and social services.

## Background

Refugees are people who have had to flee their country of origin and are unable to return because of a well-founded fear of persecution. There are millions of refugees today in camps under the protection of the United Nations. When no other options exist, the United States, as well as most Western nations, provides refugees an opportunity for permanent resettlement. Most refugees resettled over the last two decades have been Southeast Asians, but more recently the population has become more diverse with people from countries in strife, such as Bosnia, Somalia, Sudan, Liberia, Iraq and the former Soviet Union.

The Refugee Assistance Program, authorized by the federal Refugee Act of 1980, provides federal funding from the U.S. Department of Health and Human Services' Office of Refugee Resettlement to the states for refugee assistance.

About 13,500 people have resettled in Minnesota from 1999 to 2003 from about 30 different countries of origin. This represents just over 2 percent of the total admitted to the United States. Though the number of refugee admissions to the United States per year may change, but the percentage coming to Minnesota is expected to be stable.

The current number of refugees in Minnesota is estimated at more than 70,500 people although the number is difficult to verify because people move to and from other states. Minnesota gains at least 500 persons each year from other states; the number lost is unknown.

## Initial resettlement services

Voluntary resettlement agencies, or volags, specialize in providing initial resettlement services to refugees during their first three months in the United States. This includes working with relatives to ensure that refugees have food, shelter, medical screening and access to social services.

## Cash and Medical Assistance

Most of the refugees who are resettled in Minnesota are members of families with minor children who qualify for the same cash and medical assistance programs available to other low-income state residents through [county human service agencies \(PDF\)](#). They are predominately two-parent families.

Refugee Cash Assistance (RCA) and Refugee Medical Assistance (RMA) are provided to needy refugees who do not have minor children in the home. These benefits, which are federally funded, are available for the first eight months after a refugee arrives in the country. These benefits are provided through county human service agencies and voluntary resettlement agencies (for refugees in the Twin Cities metro area and Olmstead County.)

Services are also provided to assist unaccompanied minors without a responsible adult relative resettle into a foster home placement. The federal government reimburses the state for these services, which are provided until the minors are emancipated or reunited with their parents.

## Refugee social services

Eligibility for services is limited to refugees during their first five years in this country except for some programs, which are funded by discretionary grants. Priority for services is given to new arrivals within their first year.

Culturally appropriate and bilingual employment services are provided to refugees through contracts with community organizations. Services include orientation to work in the United States, job-seeking skills, job development, on-the-job training, job placement and follow up to facilitate job retention.

Though enrollment in the program is voluntary, contract outcomes for the vendors are based on enabling families and individuals to achieve economic self-sufficiency.

Non-employment services may also be provided to refugees who encounter difficulties in adjusting to life in the United States. These services include information and referral, home management, parenting skills, education, immigration and naturalization, and translation and interpretation assistance.

Refugee social services are provided entirely through federal funding from several sources. Federal grants are awarded based on the percentage of refugees that resettled in the state over the three previous fiscal years. Targeted assistance grants provide for services in impacted counties (for which Hennepin and Ramsey counties currently qualify.) Minnesota has also successfully competed for discretionary grants.

Source: [www.dhs.state.mn.us](http://www.dhs.state.mn.us)