




2020

HELPING UNINSURED MINNESOTANS AMID THE COVID-19 PANDEMIC

Access to Coverage Grantees:
Stories of Change and Adaptation



INTRODUCTION

Navigating the complex world of public and private health insurance can be difficult. Organizations in Minnesota employ certified assisters (known as navigators) to provide individuals and families with free support to enroll in health insurance coverage and raise awareness about the availability of these much-needed services.

Before the COVID-19 pandemic, there were persistent gaps in access to affordable coverage and care, especially for Minnesotans of color and other marginalized populations. The pandemic has exacerbated this problem.

In 2020, we saw a 25 percent drop in the number of Minnesotans who received assistance from navigators in accessing health care coverage. This downward trend was a result of state-mandated quarantine, virtual direct services and other strains on the status quo caused by COVID-19 adjustments.

This report highlights the community-led grantee partners who continue to nimbly adapt and change to bridge the persistent uninsured gaps in Minnesota.

AFRICAN COMMUNITY SENIOR SERVICES

Formed in 2014, **African Community Senior Services (ACSS)** has been assisting the East African immigrant community by providing customized, data-driven solutions that make a lasting difference in the lives of families.

MISSION

The mission of ACSS is to build viable services for African immigrants in the Twin Cities. ACSS fulfills its mission by providing clients with or connecting them to supportive and stabilizing services, including access to health care coverage, transportation and tax.

SERVICES

- Health care coverage navigation
- Transportation for seniors
- Tax preparation support

POPULATIONS SERVED

ACSS staff support individuals and families from East African communities who are newly arrived and/or established residents.

ACSS SERVICE DEMOGRAPHICS

People Served	Families	Individuals
1,300	70%	30%

BEFORE COVID-19

Before the pandemic, ACSS used its many years of navigation expertise to assist East African immigrant families complete the complex enrollment process required for obtaining and maintaining health care coverage for their families.

Helping families navigate a complex enrollment system. As one of the most experienced navigation organizations, ACSS has developed an effective process for guiding immigrant families through multi-step enrollment processes for accessing health care coverage. ACSS works with county agencies to provide verification of immigration, employment and income status. Many families served by ACSS have limited English, are low-income, and build trust by working in person with a navigator who speaks their language. Navigators help these individuals, who have a limited understanding of county systems, through a series of document exchanges, application submissions and follow-up. ACSS has developed a reputation in the community for having a process that results in families obtaining health insurance.



Before COVID, we did everything in one sitting while the client was sitting with us. The next thing the client could expect is to get their health insurance card in the mail.”

ACSS STAFF

SINCE COVID-19

ACSS has had to adjust how they support people and move away from in-person individualized sessions to working through smartphones and apps (e.g., WhatsApp) to complete enrollment tasks with families.

More time, steps and effort required for completing enrollments during COVID. Unlike the previous efficiency of in-person sessions, enrollment post-COVID requires significantly more effort and multiple phone sessions to complete the extensive required paperwork. Establishing trust remotely has also required more time from navigation staff. Many families don't have the needed technology — such as data plans on their phones — to effectively leverage it as an enrollment tool. As a result, the enrollment process takes three times longer than before to



We are a community organization that helps mainly immigrants; we are a starting point for them. Having health insurance is a critical starting point for people's independence, health and wealth creation — everything our community wants to achieve.”

ACSS STAFF

complete. Navigators are also reaching families at home in the midst of multiple distractions of caring for children and household activity, making it hard to complete tasks.

NEW OUTREACH STRATEGIES

Since the start of the pandemic, some county offices have added a secure document exchange option rather than just fax, which has helped with the flow of documents. Additionally, ACSS staff have one staff member designated to manage faxing duties for counties that don't provide an email as an option for exchanging documents. In rare cases, staff work with families unable to read and write by meeting them to obtain needed documents, being sure to uphold appropriate safety protocols.

Another feature that has helped reduce the volume of renewals is the three-month renewal cycle of publicly funded health care plans.



Most often we're speaking with mothers who are cooking and caring for their children as they work with us over the phone. They know us and trust us with their information.”

ACSS STAFF

INDIVIDUALS ASSISTED BY MNSURE NAVIGATORS

2019

2020 Trend

920

↓ 25%

COMUNIDADES LATINAS UNIDAS EN SERVICIO

Comunidades Latinas Unidas en Servicio (CLUES) is Minnesota’s largest Latino-led nonprofit organization, founded in 1981 by and for Latinos.

MISSION

CLUES advances social and economic equity and well-being for Latinos in Minnesota. We build upon the strengths of our cultures and communities to uplift individuals and families and activate leadership for systemic change.

SERVICES

- Educational Classes
- Health & Wellness
- Survivor Advocacy and Support
- Children & Parenting
- Economic Empowerment
- Art Gallery & Programming
- Advocacy & Community Engagement
- Youth Programs
- Latino Elders Program
- Immigration Resources

POPULATIONS SERVED

CLUES has offices on the East Side of Saint Paul, Lake Street in Minneapolis, Willmar and Austin, serving Latinos in those communities and surrounding areas.

CLUES DIRECT SERVICE DEMOGRAPHICS, 2019

Latino Arts Programming Participants	Adults Trained Through Workforce Programs	Adult Education (ESL, Citizenship, GED) Participants	Financial Literacy and Advocacy Programming Participants
7,000	105	575	400



BEFORE COVID-19

As a holistic organization, CLUES worked to meet a variety of needs for community members. The needs of each individual and family served is coordinated internally across several departments and programs, ensuring a robust and holistic response to presented needs.

A hub of constant activity and connection.

As a co-located neighbor to the Mexican Consulate, CLUES was a hub of activity with 200 people in the lobby at different times during the day. Additionally, navigators made connections with people at one of the many community events held during the warmer months. People often recognized staff at events, which fostered a sense of community and connection between community members and CLUES.

Deepening our understanding of barriers. Staff members noted instances where people got to the point of enrollment but didn't complete the process. A key project for staff is better understanding the specific barriers at play in these scenarios. Staff hope to engage community members to explore this question in spring 2021.



Our relational approach facilitates our ability to serve our families in other areas. Through conversation and trust we hear stories of hardship and additional needs. In a community-based setting, the navigation work becomes more palatable; we say 'yes, we can help you enroll in health care, but how else can we help you?'"

CLUES STAFF



We created a new tracking database that lets us track our clients a bit better and know when to follow up with them, so they don't fall through the cracks."

CLUES STAFF

SINCE COVID-19

Staff describe the post-COVID navigation environment as a boat shifted by ever-changing winds surrounding it. Unlike pre-COVID interactions with people that were organic, dynamic and holistic in nature, working with people by phone or virtually has made interactions more transactional, while at the same time requiring more effort to gather documentation and complete an enrollment. Additionally, CLUES staff notice an increased number of English-speaking, non-Latino people seeking support.

NEW OUTREACH STRATEGIES

CLUES invests in maintaining comprehensive information about the needs and resources provided to each individual and family. To strengthen their response during the pandemic and beyond, CLUES staff are refining existing tracking systems to support follow-through with clients.

Additionally, staff are finding ways to "double up" supports. For example, clients who come to the office for an application are often also sent home with food and other necessary resources.

INDIVIDUALS ASSISTED BY MNSURE NAVIGATORS	
2019	2020 Trend
904	↓ 25%

HMONG AMERICAN PARTNERSHIP

Founded in 1990 to serve Minnesota’s growing Hmong population, **Hmong American Partnership (HAP)** is a social service and community development nonprofit organization.

MISSION

HAP’s mission is to empower the community to embrace the strengths of our cultures while achieving our potential.

SERVICES

HAP is the largest Hmong-serving organization in the nation, connecting nearly 30,000 people annually and providing close to 40 programs across five impact areas:

- Workforce Development
- Economic & Community Development
- Social Enterprises
- Children & Family Services
- Health & Wellness

POPULATIONS SERVED

HAP provides culturally sensitive programs and addresses the needs of immigrants and refugees across the Twin Cities. Staff have a combined expertise to serve people from over 18 nationalities and help people of all races and backgrounds.

HAP HEALTH AND WELLNESS CLIENTS

2016	2017	2018	2019
3,867	7,250	10,457	6,343



BEFORE COVID-19

Being in a “one-stop shop” community setting is key.

HAP’s MNsure office was located at Hmong Village in St. Paul, MN, an accessible location that’s familiar to community members. Clients experiencing technology challenges were able to walk in for face-to-face assistance from navigators.

HAP had many programs to help families. Additionally, because its navigators were well connected in the community, they found resources outside of HAP when necessary. Of the clients seeking insurance assistance through HAP, 50 percent were returning clients and 50 percent were reaching out for the first time.

Being together at Hmong Village also helped the navigation team stay connected to each other. Coordination was strong, and the team was able to support an active workload of 30 to 40 clients per day before COVID-19.

SINCE COVID-19

Because of COVID-19, HAP had to close their offices at Hmong Village. They began seeing people by appointment at their offices on Arcade Street in St. Paul.



Transportation and time are crucial for these families. They may be taking time off work to come see us. We try to reduce barriers so they don’t have return again and again, maybe putting their job at risk to do so.”

HAP STAFF



Open enrollment is the busiest time — and not only on our end. Sometimes when we call MNsure or the county, they’re all backed up. We might be on the phone for 40 minutes to an hour for one client, and then the call gets dropped and we have to start all over.”

HAP STAFF

Learning how to adjust has been challenging.

Before COVID-19 the navigators could huddle and talk with each other to coordinate schedules and support one another.

Working from home has disrupted these connections. It also poses a challenge for distribution of work among the team, particularly when it comes to supporting the language needs of HAP’s clients. All HAP navigators can provide service in English, but some clients are only comfortable speaking Hmong or Karen, and only two navigators can offer services in each of those languages.

NEW OUTREACH STRATEGIES

During the pandemic, the navigation team created prerecorded videos and slideshows about signing up for health insurance that were incorporated into online events hosted by colleges and schools, and even as part of online Hmong concerts.

These new strategies have provided opportunities for the navigation team to learn new skills, which has been welcome.

Virtual meeting platforms have also been helpful for meeting and staying connected to community members and clients.

INDIVIDUALS ASSISTED BY MNSURE NAVIGATORS		
2018	2019	2020 Trend
7,007	3,777	↓ 25%

NATIVE AMERICAN COMMUNITY CLINIC

Native American Community Clinic (NACC) opened its doors in 2003 to address the health disparities within the urban Native American community of the Twin Cities.

MISSION

Our mission is to promote the health and wellness of mind, body, and spirit of Native American families.

SERVICES

We offer a full range of health care services that include:

- Medical Health
- Behavioral Health
- Dental Health
- Substance Abuse Programs

POPULATIONS SERVED

NACC approaches health care by addressing root causes of health disparities — including access to food, housing and health insurance — with services that include resource navigation, care coordination, outreach and community-based activities with our peer recovery coaches and community health workers. NACC strives to honor health and tradition by providing spiritual care.

NACC SERVICE AND POPULATION DEMOGRAPHICS

Total Clinic Visits 2018	Total Clinic Visits 2019	Indigenous/ Alaskan Native	More than One Race	Hispanic/ Latinx	Black
18.96%	5.58%	2.97%	4.83%	6.32%	55.58%

BEFORE COVID-19

Our MNSure navigators are a key part of the community health department's outreach team and are integrated across our various health clinics.

Outreach team synergy was vital. Before COVID-19, the outreach team attended various health fairs, spring open houses and partner events. Navigators, patient advocates and community health workers would pair up and attend events to assist community members with resource needs and insurance questions.

Navigation is about reducing barriers and increasing access to care. The NACC clinic serves anyone regardless of insurance coverage. NACC also wants to ensure that community members' needs are met beyond the NACC clinic walls. That's why supporting them with insurance navigation is critical to the services provided.

SINCE COVID-19

NACC has continued outreach amid the pandemic, directly supporting community members at encampment sites through insurance enrollment support and needle exchange programs, among other services.



I really have to commend [the outreach team] for their hard work, even with COVID. It's not the classic style of outreach, but they're still getting out there and meeting the highest-risk individuals."

NACC STAFF



One person living at the Powderhorn encampment had a really bad wound on her leg. She was afraid to talk to [the medics] and hesitant to go to the hospital because she wasn't sure if she had insurance.

I pulled out my computer to help her navigate the situation. Together we determined she already had insurance coverage, so she felt comfortable getting the care she needed."

NACC STAFF

Learning to live with COVID-19. The onset of the pandemic led to many adaptations from staff, with many working outside typical roles. By the summer of 2020, navigator staff settled into a "new normal," with some navigators returning to the clinic in-person when they felt comfortable. The team also determined the personal protective equipment (PPE) needed to serve patients safely. Similar adaptations were also made to outreach and insurance enrollment processes.

NEW OUTREACH STRATEGIES

COVID-19 made prevention challenging. Preventative care — such as cancer screening, diabetes prevention, etc. — was put on hold due to temporary office closures and the vigilance required to keep high-risk patients safe from potential exposure and infection. Telemedicine and the gradual reopening of spaces are helping put the preventative care strategies back on track.

INDIVIDUALS ASSISTED BY MNSURE NAVIGATORS

2019

2020 Trend

1,394

↓ 25%

NORTHPOINT HEALTH & WELLNESS CENTER, INC.

NorthPoint Health & Wellness Center, Inc. (NorthPoint, Inc.) is an independent 501(c)(3) nonprofit community services organization providing a broad array of social and human services designed to meet basic needs, promote health and move individuals toward self-sufficiency.

MISSION

NorthPoint, Inc. sets a standard of excellence in providing culturally responsive, integrated and holistic primary health and social services that strengthen our community and the lives of the people we serve. We are leaders and partners in a shared vision of a healthy, environmentally safe, economically stable and self-reliant community.

SERVICES

- Community Outreach
- Hunger Relief
- Client and Family Services

POPULATIONS SERVED

In 1968 NorthPoint, Inc. (formerly Pilot City) was started by and for the community because residents of the north side of Minneapolis wanted access to health, employment, education and housing in their neighborhood.

Fifty years later, NorthPoint, Inc. continues to be led by and for the community to address those same needs.



NORTHPOINT
Health & Wellness Center

BEFORE COVID-19

Before the pandemic, our navigators were available on-site to community members, many of whom would walk into NorthPoint seeking support from the clinic, pharmacy and food shelf. Having the navigation team available in those spaces created an efficient system for increasing insurance enrollment.

Our team was fluid and free to be a community resource. Our team acts as a connector to support the community in various ways that center on outreach. We're all cross-trained and multilingual, so our team can help people access resources related to food insecurity, medical supports, psychiatric needs, housing and insurance enrollment.

Our team attended events put on through NorthPoint, our partners and local libraries to find individuals and families who needed support and assistance.

SINCE COVID-19

At the onset of the pandemic, the navigation team and partners paused regular activities to assess ways to stay safe while still meeting the needs of the community.

The team was able to resume some outreach activities and enrollment appointments by August 2020.

The team relied heavily on NorthPoint Medical Clinic health care providers, who offered insights on safety measures and precautions that would keep the team safe and educate the broader community.



[The response to COVID] was a good reminder: We have professionals who provide education and resources to help us understand what's in front of us."

NAVIGATION STAFF

NEW OUTREACH STRATEGIES

Staff has settled into a "new normal," engaging with the community while practicing COVID-19 precautions and offering support amid the pandemic. Community conversations have drifted from formerly typical topics like insurance enrollment and food insecurity to things like the importance of mask wearing and social distancing to protect ourselves and those around us.

Leading by example. We're a community organization, and the needs of our community must be supported. We continue to meet people where they are — providing flexible options to those who need it due to their circumstances, while also meeting needs for in-person services that can't be provided online. NorthPoint staff continue to be supported to ensure they feel comfortable and confident serving the community safely and effectively.

MNSURE NEW ENROLLMENTS

2020

2020 Trend

5,441

↑ 12%

INDIVIDUALS ASSISTED BY MNSURE NAVIGATORS

2019

2020 Trend

22,543

↑ 18%

NORTHWEST INDIAN COMMUNITY DEVELOPMENT CENTER

Northwest Indian Community Development Center (NWCDC)

is a Native-controlled 501(c)(3) nonprofit in 1989 as an Occupation Industrialization Center. In 2011, the organization reorganized using a community development model, offering a wide range of Anishinaabe-informed services to more effectively meet the needs of Indigenous people, families and communities.

MISSION

The mission of NWCDC is to identify, coordinate and deliver resources that promote wellness and equity for American Indian families in northwest and north-central Minnesota.

SERVICES

- **Anokiiwin:** Career exploration and educational attainment
- **Ombishkaa:** Comprehensive services for people who have experienced incarceration
- **Bimaadiziwin:** Traditional healing and mental health supports
- **Waaziswan:** Strengths-based parenting program

POPULATIONS SERVED

NWCDC provides services to more than 2,400 individuals annually, serving a 60-mile radius that includes the Red Lake Nation, the White Earth Nation, the Leech Lake Band of Ojibwe, as well as the administrative headquarters of the Minnesota Chippewa Tribe.



BEFORE COVID-19

Before the pandemic, NWICDC staff supported community members with employment, health, parenting and reintegration for those who experienced incarceration.

Seamless support of the whole person.

Community members come to NWICDC primarily as walk-ins seeking support for a variety of needs. As a holistic organization with a variety of resources on-site, NWICDC staff work seamlessly to respond to individuals' needs by referring people to one another as needed. As such, the navigator would often receive referrals from other staff, as well as refer people throughout the organization.

Robust and responsive community outreach.

As an organization connected to multiple tribal communities in northwest Minnesota, NWICDC had robust outreach capacity and participated in large community events that drew hundreds of participants. As a relational and responsive organization, NWICDC provided the needed resources to each person during outreach encounters, which may or may not have included help accessing health care coverage.



If we're thinking about insurance as access to health care, it takes a lot longer to help people understand why they need insurance. Everyone deserves more than just access — they deserve quality care."

NWICDC STAFF

SINCE COVID-19

During March 2020, the early days of the COVID-19 pandemic, navigators were averaging about 25 enrollments per month. As COVID wore on, however, community needs shifted to more pressing matters, such as employment, housing and food insecurity.

Working with community members without the ability to meet in-person posed significant challenges. Many community members don't have Internet access,



People would call me but have no email address. It took a long time and required several follow-up calls to complete the necessary paperwork."

NWICDC STAFF

making technology a less useful tool for gathering, submitting and completing enrollment documents. Additionally, county support hasn't been as available, which means navigators sometimes spend hours trying to reach county staff by phone.

NEW OUTREACH STRATEGIES

NWICDC staff are focused on meeting the most pressing community needs — one of which is social isolation. Navigators reach out to community members over the phone and with home visits when it's necessary to deliver enrollment documents. NWICDC's network of elders has also been actively providing crisis counseling to community members during this challenging time.

Another significant community need has been food insecurity. Some new partnerships have emerged to support food distribution, and those efforts have included information about available support for accessing health care coverage.



Many people were concerned about access to health care and what COVID-19 meant for the community. We're still seeing a lot of isolation and mental health concerns, so we're making phone calls and letting people know we see them and care about them."

NWICDC STAFF

INDIVIDUALS ASSISTED BY MNSURE NAVIGATORS

2019

2020 Trend

2,540

↓ 25%

RAINBOW HEALTH

(formerly JustUs Health)

Rainbow Health was formed through the merging of the Minnesota AIDS Project and Rainbow Health Initiative, and later Training to Serve. Its diverse team is committed to advocating for and serving the LGBTQ+ community, those living with HIV, and all folks facing barriers to equitable health care.

MISSION

The mission of Rainbow Health is to work for equitable health care access and outcomes for people who experience injustice at the intersection of health status and identity.

SERVICES

- Advocacy
- HIV education
- Research into LGBTQ health disparities
- Tobacco policy work
- LGBTQ equity and inclusion training
- Behavioral health services

POPULATIONS SERVED

Individuals and communities at risk of and living with HIV or facing barriers to equitable health care access and outcomes based on their gender identity, sexual and/or racial minorities.

RAINBOW HEALTH MNSURE ASSISTANCE DEMOGRAPHICS, 2019–2020

Black	African Born	Indigenous	Asian	Hispanic/Latinx	White	Other	LGBTQ+
18.96%	5.58%	2.97%	4.83%	6.32%	55.58%	5.76%	35.49%



BEFORE COVID-19

The Rainbow Health navigation team had found success by doing outreach at health clinics and at county services locations, which provide social services, chemical and mental health services and crisis stabilization programs. This included a key partner at 1800 Chicago Avenue in Minneapolis.

Meeting in-person is key. Locations where interpersonal connections are freely made, in-person appointments are held, and spontaneous drop-ins are encouraged made the process of connecting with uninsured members of the community effective. Members of the navigation team also represented the cultural and racial backgrounds of the communities being served. As a result, trust was built and community members would share information about the services via word of mouth, expanding the awareness of the available insurance enrollment support.

One-stop shop. Spaces like 1800 Chicago Avenue were also dynamic. Being co-located with other service partners and being able to coordinate among staff and partners made the moving parts of enrollment services go smoothly. Coordinating questions, providing answers and working through document exchanges were common and made the enrollment workflow efficient.

SINCE COVID-19

Due to the pandemic, technology barriers have arisen and become a challenge in serving community members. Phone support has become the primary mode of communication for navigators.

Additionally, the qualities and characteristics of individuals who reach out via telephone for services are shifting. Individuals who are comfortable with technology and making calls to explore options for themselves and their families is now the norm.

However, individuals living in communities that are low-resourced and culturally and racially segregated are not calling for assistance — and therefore their needs are not being met.

The demographics of those reaching out for assistance now are a higher proportion of white individuals, older



Pre-COVID my clients looked a lot like me. And post-COVID . . . I’m seeing a lot more clients who are used to having a job, which also equals having health insurance.”

RAINBOW HEALTH NAVIGATOR

people, residents of Greater Minnesota, and people who qualify for private health insurance.

NEW OUTREACH STRATEGIES

The navigator team has experienced challenges resulting from office and outreach locations not being able to support in-person visits, changes in help-seeking behavior and being disconnected from other service partners.

They’ve had some success reaching individuals and maintaining in-person support by acquiring personal protective equipment (PPE), having a presence at outdoor events put on by service partners, and reaching community members at encampment sites during the summer months.

The challenge of staying connected to clients who don’t have cell phones or access to other technology persists. Giving individuals prepaid cell phones has helped, and may be a practice to carry into the future.

Inroads have also been made connecting with incarcerated populations by partnering with the Department of Corrections. Staying connected via telephone is also a challenge with this population so everything is coordinated through case managers. While not an ideal situation, it’s a first step in meeting the needs of this community.

INDIVIDUALS ASSISTED BY MNSURE NAVIGATORS	
2019	2020 Trend
1,002	↓ 25%

