Improving Language Access in Health and Social Services: Research to Action

Introduction
The Illinois Department of Human Services is legally obligated to provide equal access to the Medicaid redetermination process for individuals with Limited English Proficiency (LEP) under Title VI of the Civil Rights Act of 1964. Despite this, immigrants attempting to access public services often experience LEP as a barrier. The research team undertook a three-year project in collaboration with the Illinois Coalition for Immigrant and Refugee Rights.

The project sought to identify associations between LEP and Medicaid cancellation by conducting surveys and interviews with Medicaid beneficiaries representing four prevalent immigrant groups in Illinois: Chinese, Vietnamese, Korean, and Arab. Based on these findings, the project is currently focusing on translating the research evidence into advocacy and action in order to address language barriers in health and social services for immigrants and refugees with LEP.

Findings
• Illinois has the 6th largest immigrant population in the US. From 1990-2014, the population of foreign-born individuals in Illinois grew by 87%. Over 1 million, or 9% of the population in Illinois, have LEP.
• Individuals with LEP are 5.3 times more likely to lose Medicaid benefits during the process of Medicaid redetermination than English proficient beneficiaries, even after accounting for age, educational status, and time in the U.S.
• 85% of LEP beneficiaries in Illinois speak one of seven languages: Spanish, Arabic, Polish, Russian, Chinese, Korean and Hindi. This finding has implications for the translation of relevant materials and the availability of in-person interpreters.
• Community-based organizations require more resources to understand the needs of individuals who experience LEP and understand how better to advocate for them with elected officials.

Recommendations
Limited English Proficiency is a significant barrier for access to health and social services. Unfortunately, the present political climate is not only intensifying this barrier, but also forcing some to withdraw from public services altogether, including vital services such as healthcare. To support increased access to resources for LEP communities, it is recommended that policy makers at the Department of Human Services (DHS) implement the following changes to the Medicaid annual renewal process in Illinois:

1) Translate the notification letter and renewal form to user languages; 2) Simplify the paperwork; 3) Create an online submission process; 4) Mail the notification letter at the same time each year; 5) Stamp the DHS logo on all mail for ease of identification by non-literate individuals; 6) Eliminate the follow-up interview currently required under the renewal process and replace it with reminders sent to beneficiaries via mail, text, and phone.

In addition, although language services are currently made available at DHS offices in the form of bilingual staff and/or language interpreters, in-person interpreters are highly recommended for assistance in completing forms.