

Understanding the Affordable Care Act: Rural networks answer questions, outline benefits

By Angela Lutz



Joyce Hospodar (far right) distributes Affordable Care Act brochures to University of Arizona faculty. The brochures were designed to inform rural residents of their rights under the new law. Photo by Jill Bullock.

Get informed. Stay informed.

The Office of Rural Health Policy leads weekly conference calls to inform rural stakeholders — from health care providers to patients — on how the Affordable Care Act can benefit rural communities.

When: 3-4 p.m. EST every Wednesday

Number: 1-800-857-3749

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Link: hrsconnectsolutions.com/orh1

As 2014 approaches, there's a deluge of information on the Affordable Care Act (ACA).

It can be challenging for patients and providers to determine what aspects of their health care coverage will change, as well as what services will become available for uninsured and underinsured individuals.

To help everyone from legal immigrants and rural patients to health care providers and small business owners understand their rights under the new law, the Center for Rural Health at the University of Arizona in Tucson developed a brochure, "Know Your Healthcare Rights," which explains "12 really important things you need to know about getting insured and staying healthy." In easy-to-understand terms, the brochure clearly outlines what will change or stay the same under ACA.

"The law benefits the rural community in so many ways. Rural residents can take advantage of these services and take care of their health to ... live longer, healthier and more productive lives."

Deepti Loharikar, Office of Rural Health Policy analyst

"There's a lot of confusion," says Joyce Hospodar, health systems development manager at the Center for Rural Health. "Everything is rolling out daily here. We have about 106 different insurance providers offering something. This brochure gives the rural resident or any resident an idea what should be included, and then they can navigate."

The Center for Rural Health is part of the Southwest Rural Policy Network, which is comprised of 14 organizations in Arizona, New Mexico and southern Colorado. The brochures were printed in late 2012 using funds from the Kellogg Foundation's Rural People, Rural Policy Initiative. With versions in both English and Spanish, Hospodar estimates they will have distributed about 14,000 brochures before the end of the year.

Brochures have gone to a wide variety of recipients, from churches and libraries to hospitals, doctors' offices and economic development organizations across Arizona and New Mexico. It provides answers to several frequently asked questions, including what preventive services are covered, who is eligible for Medicaid, who can receive tax credits and how to get coverage for pre-existing conditions.

Because the law is so complex and "fast moving," Hospodar says the brochures have been in demand. Many recipients request more once all have been distributed. To help spread the word, the Center for Rural

Health has also produced a series of 13 30-second public service announcements, which are being broadcast nationwide on the radio and are also available online. Hospodar would like to secure more funding to print an updated version of the brochure, as well as to follow up on their effectiveness. In the meantime, she considers the brochures' popularity a good measure of their success.

"If I can distribute all that we've printed, it's been a success," Hospodar says. "If [the recipients] distribute them and they want more, that's the testimony."

The Office of Rural Health Policy (ORHP) is also undertaking outreach efforts to educate community stakeholders and rural residents on health reform. According to Deepti Loharikar, ORHP health policy analyst, misunderstandings and misinformation surrounding ACA are common.

"There are studies showing that many do not know that it exists or they believe that it was repealed," she says. "And for those who do know about the law, many are unsure or misinformed about new opportunities for coverage to get the care they need."

To ensure rural residents are receiving benefits, ORHP has offered each of its 71 Rural Healthcare Services Outreach grantees a one-year supplement to assist with outreach, education and enrollment in the Health Insurance Marketplace. Of the 71 grantees, 52 applied for the supplement and were able to request up to \$25,000 each. In addition to online resources, ORHP has a 24-hour call center to help grantees inform the public about the benefits of the law.

Loharikar adds that targeting places where people go, such as churches, town halls and state fairs, has been an effective way to start conversations about the law and its benefits.

"Because we know that not everyone has access to the Internet, we're also taking an old-fashioned, low-tech approach, and that's using word of mouth," she says.

According to Loharikar, the benefits of ACA are especially vital in rural communities, where more residents are elderly and chronic pre-existing conditions more common than in urban areas.

"The law benefits the rural community in so many ways," Loharikar says. "For example, since chronic conditions such as diabetes and heart disease are more prevalent in rural communities, the provision that there can be no discrimination for a preexisting condition is especially important. Additionally, now that preventive care is free under the law, rural residents can take advantage of these services and take care of their health to prevent the onset of a chronic disease and live longer, healthier and more productive lives. Having affordable health care coverage not only makes individuals and families healthier, but strengthens our health care system as a whole." 

Rural resources

These Affordable Care Act resources can help answer questions about the new law:

- To view the Center for Rural Health's ACA brochures, visit southwestruralpolicynetwork.com.
- To listen to the Center for Rural Health's public service announcements (in English or Spanish), visit acaexplained.org.
- Call 1-800-318-2596 for the government's 24-hour ACA information line.
- To get your ACA questions answered via live webchat, visit healthcare.gov. For assistance in Spanish, visit ciudadodesalud.gov.
- For a list of ACA navigators, which are hospitals, local business leaders, faith leaders, universities and community groups (among others) that are helping enroll people, visit cms.gov/ccio/programs-and-initiatives/health-insurance-marketplaces/downloads/navigator-list-8-15-2013.pdf.
- Email questions to the Office of Rural Health Policy at orhp-acaquestions@hrsa.gov.

Rural relevance

A greater proportion of rural residents stand to benefit from the Affordable Care Act than their urban counterparts.

Demographic characteristics:

- The eligible uninsured in rural areas are older than their metro counterparts. The non-metro eligible are more likely to be between 35 and 64 and less likely to be younger than 35.
- The eligible uninsured in rural America are more likely to receive food stamps than their urban counterparts.

Distribution:

- Non-elderly U.S. citizens and legal residents in rural areas are 18 percent less likely to have insurance coverage than their urban counterparts. In all, more than 7.8 million non-elderly U.S. citizens and legal residents that live in rural areas are uninsured.
- More rural residents than urban dwellers (10.7 percent versus 9.6 percent) can receive tax subsidies under ACA to purchase private insurance, and more uninsured are eligible for an expanded Medicaid program (9.9 percent versus 8.5 percent).
- In rural parts of the southern census region, 21.5 percent of U.S. citizens and legal residents are uninsured, the highest rate in the country.