



## **Seasons of Care: Assisting American Indian Elders with Health Care Access, Part 2**

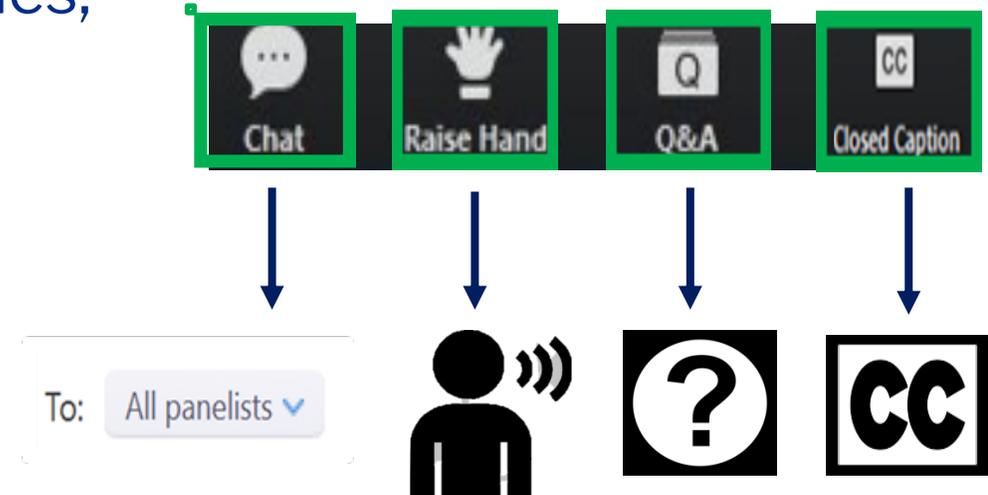
March 22, 2023

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# Today's Presenters



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# Seasons of Care: Assisting American Indian Elders with Health Care Access Part 2

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*Pacific Institute for Research and Evaluation*

March 22, 2023

National Institute on Minority Health and Health Disparities (R01 MD010292)



# What We'll Talk About Today

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- Role of navigation services in helping American Indian Elders manage their health
- Types of support Elders can expect to find in tribal senior centers and their communities
- Navigation as a culturally congruent approach for assisting American Indian Elders who are seeking health care

# **Overview of the Seasons of Care Study**

“Improving Native American Elders’ Access to and Use of Health Care and Health Insurance”

# Our Research Partners

- Seasons of Care Community Action Board and Elder consultants
- Pacific Institute for Research and Evaluation – Southwest Center
- New Mexico Indian Council on Aging Health Committee
- University of New Mexico
- University of California, San Diego
- Western Sky Community Care

# Key Research Questions

- What are American Indian Elders' experiences with health care?
- What are their experiences with insurance?
- How do health professionals and tribal leaders understand factors affecting insurance and health care for Elders?
- How do national and state policies impact care for Elders?



# Research Settings

- Study presented to 20 tribal communities
  - Eight agreed to take part
  - Some relied largely on Indian Health Service (IHS)
  - Others exerted control of health care
- Non-reservation urban communities

# Study Methods

- Elders, tribal leaders, and health professionals
- Quantitative (numbers) + Qualitative (words/stories)
  - Surveys
  - Semi-structured interviews
  - Concept mapping
- Development of navigation guide
- Community Action Board + Elder consultants

# **Perspectives from Elders and Health Professionals**

# We Asked ...

What makes it easy or hard for American Indian Elders to get good health care and health insurance?



# Challenges for Elders

- **Not knowing** where to find reliable information
- **Inconsistent information** from places and providers
- Need for **support that is local and available**
  - “They’ve had to come upon this knowledge [about health care and insurance] through experience, so we’re trying to change that culture and supplement it with somebody who can help .... They have not had somebody help them at no cost, somebody who can get them support services that they didn’t know existed .... I don’t like to feel helpless, and I don’t like others to feel that they’re helpless.” (Outreach worker)

# Challenges for Elders

- **Uncertainty** about what health care services and medications are available or covered by insurance
- **Unease communicating** with providers and insurers
- Concern about **burdening families**
  - “How comfortable are [Elders] in talking to other people about their health issues? A lot of them will just say, ‘No, I’m okay, I’m alright,’ or they don’t want to be a burden to their families, so they won’t say exactly what has been ailing them for a while.” (66-year-old woman)

# Challenges for Elders

- **Fear** of unexpected medical bills
- Not knowing how to **advocate for themselves**
  - “A lot of times when my client has an appointment, and they’re not confident to tell them [health care providers] what’s going on with them, I ask the client, ‘If you don’t mind, can I go with you so I can explain to the doctor what you’re saying?’” (Community health worker)

# People Available to Assist Elders

- **Multiple roles** for supporting Elders
  - Public health nurses
  - Social workers
  - Community-based professionals
    - ✓ Community health workers
    - ✓ Tribal community health representatives
    - ✓ Patient navigators
    - ✓ Outreach workers
- Benefits coordinators

# Types of Assistance Provided to Elders

- **Formal tasks** based on level training and certification
  - Monitoring blood sugar
  - Nutrition guidance
  - Patient education
  - Diabetes education
  - Health promotion
  - Transportation
  - Help with paperwork

# Types of Assistance Provided to Elders

- **Informal tasks** are wide-ranging
  - Responding to Elders' needs and questions
  - Paying for health care
  - Scheduling appointments
  - Obtaining essentials for daily living (e.g., firewood, cell phone service)
  - Providing support to care for grandchildren or other family members



# De Facto Go-To Supports

- Will often **go the extra mile**
  - “If I can’t provide the answer, I find the resource that they can approach and then I always give the option, ‘If these resources don’t work, come back to me or contact me .... Then I’ll help you some more.’” (Community health worker)

# De Facto Go-To Supports Are ...

- Motivated by value of **respect for Elders**
  - “I have a certain responsibility to uphold our senior population. They are our key component to who we are. They are the ones who taught us the old ways .... To be able to take care of them and prolong their life, that’s a great responsibility for anybody. (Community health worker)

# On-the-Ground Realities

- Reliance on **relationships** and **staff knowledge**
  - “I always tell them [Elders], ‘If you ever need anything or if you ever want to find out more about your health issue, I’m here to help you.’ If I can’t, if I don’t know the answer, I tell them, ‘I will find out, or I’ll bring somebody that knows.’”  
(Outreach worker)

# On-the-Ground Realities

- Knowledge often comes from **personal experience**
  - “In any Native culture you respect your Elders, and you do anything you can to help them so ... because I took care of my grandma for so long, dealing with the health care system, whether setting up her appointments, picking up her medications to actually going to her appointments. That was kind of my thing .... But then again like that girl with the Social Security, she brought up fraud and I felt uncomfortable because I haven’t experienced that personally.” (Health insurance tribal liaison)

# Trust and Communication

- **Communicating** with health care providers can be **challenging** for Elders
  - Language barrier
  - Medical terminology and jargon
- Community-based professionals fulfill **interpretation** and **translation needs**

# Trust and Communication

- **Filling in details** about Elders' health circumstances
  - “Sometimes they’ll ask us [their questions], like if the patient wants to say something but not [have] the doctor in the room. And they’re scared to ask [the doctor]. Then they’ll ask [us] in our language, and then we’ll go ahead and ask the doctor for what they’re asking .... In English, they won’t know how to put the words into what they want to say. That’s how I translate for them. They’ll talk to me, and then they won’t feel uncomfortable, and then I’ll explain that to them [the doctor].” (Tribal community health representative)

# Trust and Communication

- Importance of communicating **cultural knowledge**
  - “I could speak for our community like, ‘You know what, this might not be a really good thing because in our culture or whatever,’ or ‘You might want to be sensitive to this part,’ or just knowing our cultural background is what makes it a little bit easier.” (Tribal community health representative)

# Trust and Communication

- Assist in **bridging gaps** between an Elder and their family
  - Share health information with family, particularly for Elders who live alone
  - Help convey the scope of an Elder's health condition

# Developing Trust

- Proficiency in Native language
- Having cultural knowledge
  - Knowledge about cultural taboos, traditional healing activities, and body language cues
- Dedicating time to know the Elders
  - Listen to stories
  - Spend time in community
- Relying on Elders to make their own decisions

# Complexities of Supporting Elders

- Understanding payment for health care services
- Isolation
- Elders who refuse or hesitate to use health care services
- Interpreting complex health care terminology
- Elders' discomfort with technology

# Tribal Senior Centers

- **Serve as a key hub** for resources in many tribal communities
  - Nutrition services
  - Social programming and support
  - Transportation
  - Offices for:
    - ✓ Tribal resources for Elders (e.g., housing support, legal assistance, home care and personal care support, other caregiving programs)
    - ✓ Community health workers and community health representatives
    - ✓ Caseworkers

# Need for Information and Tools

- To help Elders and their families:
  - Learn about health care and insurance options
  - Overcome barriers
  - Manage decisions

# **What is Navigation?**

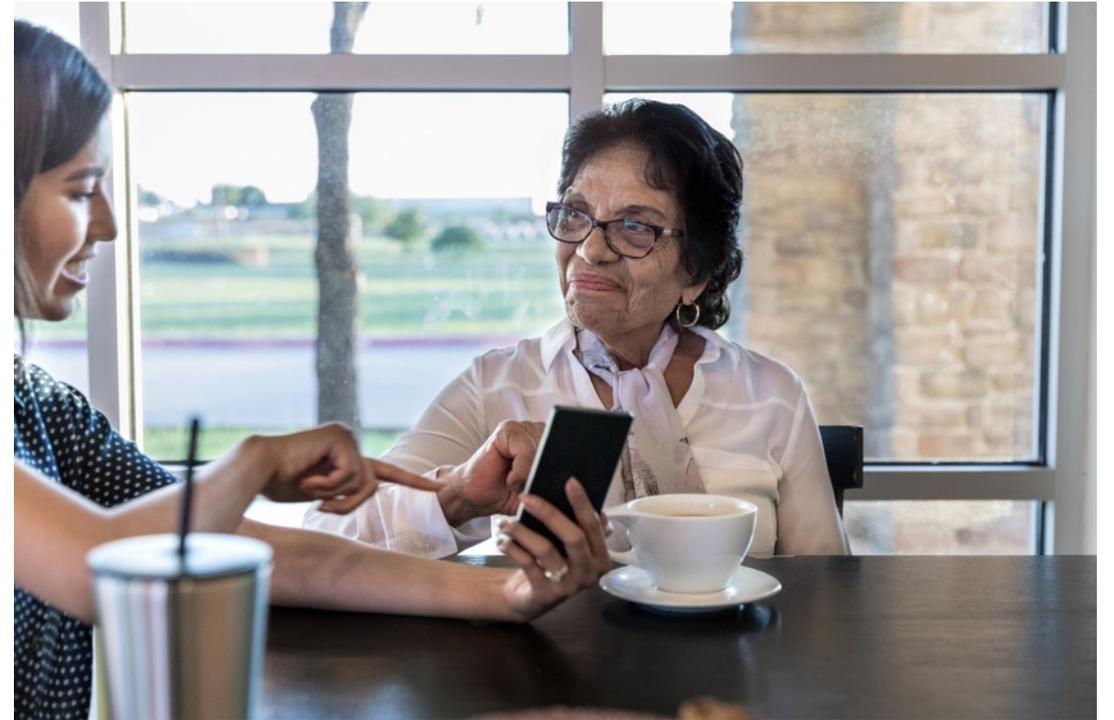
And how can it help Elders?

# Navigation ...

- Community-based and patient-centered
- Involves people and resources that Elders trust
- Honors Elders' values and desires
- Stops development of serious health conditions
- Enables timely diagnosis and treatment
- Increases individual, family, and community knowledge
- Eliminates barriers to care

# Navigation Can Include Help with ...

- Scheduling
- Transporting
- Doing paperwork
- Informing decisions
- Communicating



# **The Seasons of Care**

## **Native Elder Health Guide**

[www.NativeElderHealthGuide.com](http://www.NativeElderHealthGuide.com)

# Seasons of Care Native Elder Health Guide



Home Winter ▾ Spring ▾ Summer ▾ Fall ▾ Find A Clinic Talk To Someone About Contacts

## Welcome to Seasons of Care

Information and tools about **health insurance** and health care for Native American elders, caregivers, and health professionals.



### Winter

#### Reflecting and Preparing

Finding Transportation  
Disability Benefits & Health Insurance  
Help with Medical Bills  
Advocate & Caregiver Support

Financial Resources for Elders  
Help with Legal Documents  
Legal Resources  
Durable Medical Equipment



### Spring

#### Cultivating Wellness

Senior Centers & Services  
Monitor Your Health  
COVID-19 & Elders

Social & Cultural Life  
Nutrition & Exercise



### Fall

#### Harvesting Knowledge



### Summer

#### Maintaining Health

Health Insurance Marketplace Common Health Terms Healthcare Provider Issues Your Rights as a Patient  
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# Spring

Spring is a time to plant new seeds. Topics in this season will help elders cultivate wellness.

## Staying Active

To stay well as you age, it's very helpful to be social and active in your community.

Your local **Senior Center** provides opportunities for you to socialize with other seniors by doing activities, playing games, having meals together, volunteering in your community, going on trips, and taking classes. Many Senior Centers offer transportation services if you need help getting there. If you need help finding the closest center, visit the New Mexico Aging and Long-term Services Department (ALTSD) [Senior Services](#) page to download a directory of all Tribal senior centers in the state, or call them at (800) 432-2080.

Your Tribal community offers many **traditional and community activities** that you can take part in. Contact your local Senior Center or Tribal government to find out if your community has a social calendar.



## Health Diary

Illness/Injury:	Date:
Hospitalizations:	Date:
Surgeries:	Date:
Medications/Supplements:	Dosage & Notes:

Medications/Supplements:

Dosage & Notes:



# Summer

Summer is a time for growing and maintenance. Topics in this season will help elders access and use health care resources.

## How to Manage Your Medications

In order to stay safe and healthy, make sure all your healthcare providers and pharmacists know all the medications you are taking, including vitamins, supplements, over-the-counter drugs like Tylenol or cold medicine, and herbal remedies or traditional medicines. Have a list of medications handy when you talk to them.

### Questions to Ask your Provider or Pharmacist:

- What does this medication do and how will this medication make me feel?
- What side effects might I experience and how will this medication interact with other medications?
- Is there any food, drink, other medication, or activity that I should avoid when taking this medication?
- How long do I take this medication? Sometimes you can stop taking a medication as soon as you feel better, others you take until the bottle is empty, and some you need to



## Where to Go for Health Care

### Indian Health Service (IHS)

If you are member of a federally-recognized Tribe, you can receive some primary care and selected other services at the IHS at no cost. Your IHS provider can also refer you to care that is not available at an IHS facility through **Purchased/Referred Care** program (PRC, formerly known as Contract Health). Visit the IHS [Find Health Care](#) page to locate the nearest IHS or Tribal facility.

### Tribal Clinics and Community Health Centers (non-IHS)

The [Albuquerque Area Indian Health Board](#) (AAIHB) provides some health services and prevention programs, including **audiology** (hearing aids and repair) to its member tribes (Ramah Band of Navajos, Mescalero Apache, Jicarilla Apache, Ute Mountain Ute, and Southern Ute). The AAIHB also serves Native Americans in the Albuquerque area. See their website or call (800) 658-6717.

[First Nations Community HealthSource](#) in Albuquerque offers a variety of healthcare services, such primary care services, dental, behavioral health, alternative therapies, diabetes prevention, homeless outreach, and **Medicaid** enrollment. Visit their [Services](#) page for more information. They also provide other support and social





# Fall

Fall is a time for harvesting and getting ready for winter. Topics in this season will help elders learn and make decisions about health insurance.

## How to Choose a Health Insurance Provider

When choosing a health provider, there are some factors you will want to consider. Most health plans are provided by a **Managed Care Organization** (MCO), such as Presbyterian or United Health. The exceptions are **Medicaid** Fee-for-Service, **Original Medicare**, and Veterans' Benefits.

Each MCO may offer several different health plans. It's a good idea to compare health plans from multiple **health insurance** providers to find one that meets your needs.



## How to Compare Coverage and Benefits

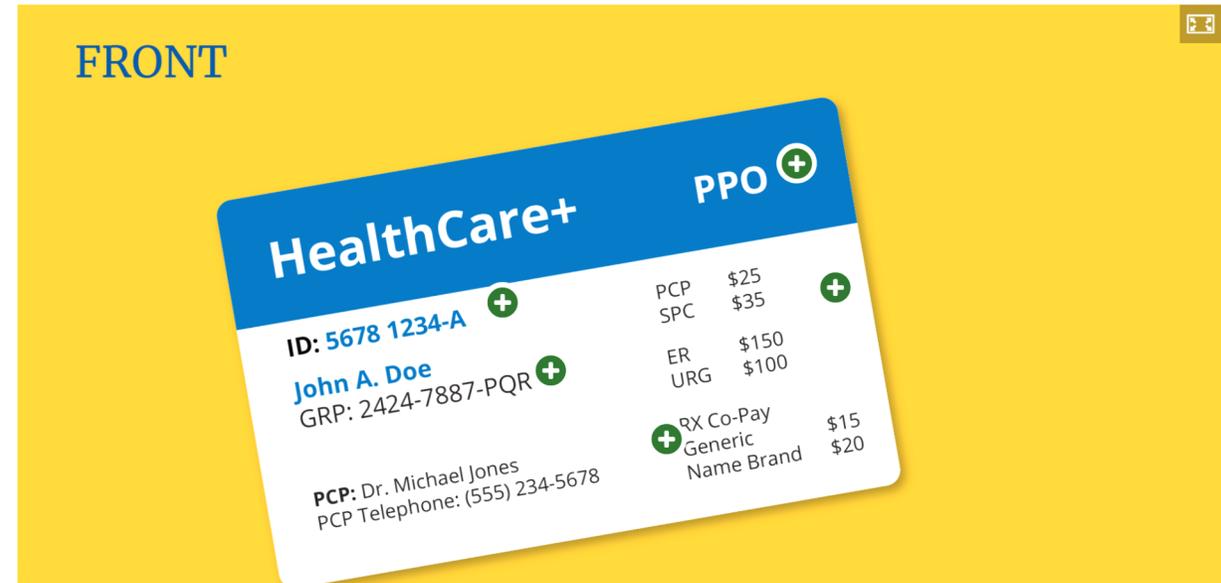
When comparing health plans, review each plan for the Summary of Benefits, the Type of Health Plan and Provider Directory, and the **Formulary**.

Summary of Benefits

## Your Health Insurance Card

When you sign up for **health insurance**, you will receive a health insurance card in the mail from your health insurance provider. Your insurance card proves that you have health insurance, so make sure to bring it with you whenever you go to see a healthcare provider.

Click the green plus signs on the images below to learn about the different kinds of information on your health insurance card.



Summary of Benefits  
the formulary  
When comparing health plans, review each plan for the Summary of Benefits, the Type of Health Plan and Provider Directory, and the Formulary.  
HOW TO COMPARE COVERAGE AND BENEFITS



# Winter

Winter is a time for reflection and preparing for the future. Topics in this season will help elders and caregivers plan for their long-term health and financial needs.

## Who is an Advocate?

An **advocate** is a respected person who understands an elder's words, values, and wishes. An advocate inspires trust and confidence, and can communicate with elders, family, community, and medical professionals. An advocate is a translator between an elder's traditional language and English, and of an elder's desires for their medical and **health insurance** situation.

## How to Advocate for Elders

The most important thing is to respect the elder's independence and honor their wishes to the best of your ability. If an elder does not see the need for an **advocate**, don't force your help on the elder, but explain how you can assist them navigating the healthcare system.

Your relationship to the elder as an advocate will develop over time, but don't expect to be involved in all their decisions. Most elders don't want the whole community to know about their health, so respect the elder's privacy.

- Don't make decisions or share information without consulting with the elder.
- Present the elder with all their choices and options.
- Don't try to trick them into making decisions.
- Honor the elder and their decisions, even when you do not agree with their choices. Elders who can make decisions need to ask for services themselves.

Be mindful that if you are acting as an elder's advocate, you might face resistance and criticism from friends, family, or community members who aren't happy with the elder's decisions. Explain clearly and calmly that the elder is in charge and you are carrying out and respecting their wishes.

## Advance Directives

An **advance directive** is a legal arrangement that establishes your preferences regarding your own medical care. The **advance directive** is to be followed by your caregivers and healthcare providers if you are unable to make decisions for yourself. Visit the AARP's [Advance Directive Forms](#) page and click on your state to download an advance directive form and instructions.

A **living will** is a legal document that describes your preferences for your medical care, including the types of medical treatments that you would or would not like to be used, such as resuscitation if your heart stops beating or ventilation if you can't breathe on your own, and how you would like your comfort and pain to be managed.

**Power of attorney** legally designates a person to make medical decisions for you if you are not able to. Called "durable power of attorney" or "medical power of attorney," the person is your healthcare proxy, agent, surrogate, or representative. It's a good idea to have someone to be your healthcare proxy even if you have a living will, in case something unexpected happens. Your healthcare proxy is someone that you trust to make decisions and do what you want, even if others disagree.



**Do not resuscitate (DNR)** and **do not intubate (DNI)** orders should be included in your medical records, even if you do not have a living will. They tell your healthcare providers that you do not want to be resuscitated, meaning have your heart re-started, if it stops beating, or intubated by having a breathing tube inserted if you can't breathe on your own. If you do have a living will, it should include whether or not you want to be resuscitated or intubated.

# Why a Website?

- Accessible
- Private
- Up-to-date
- Shareable



## Social & Cultural Life

Home » Spring » Social & Cultural Life

### Staying Active

To stay well as you age, it's very helpful to be social and active in your community.

Your local **Senior Center** provides opportunities for you to socialize with other seniors by doing activities, playing games, having meals together, volunteering in your community, going on trips, and taking classes. Many Senior Centers offer transportation services if you need help getting there. If you need help finding the closest center, visit the New Mexico Aging and Long-term Services Department (ALTSD) [Senior Services](#) page to download a directory of all Tribal senior centers in the state, or call them at (800) 432-2080.

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**Questions?**



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