

FLORIDA REFUGEE HEALTH SERVICES

Guide for County Health Departments

January 2006

PROGRAM VISION

The vision of the Florida Refugee Health Program (RHP) is to be a leader in providing culturally sensitive health services to persons who have fled their home country due to persecution (political, religious, or economic) in search for a better life and self-sufficiency in America. Within this vision is the protection of public health from communicable disease through the review of overseas medical examination records and the provision of health screenings and immunizations.¹

¹ The post migration health screening is another opportunity to identify and treat communicable disease, particularly for irregular maritime arrivals and certain asylees since they do not receive an exam overseas.

Program Eligibility

Persons with the following immigration statuses are eligible for refugee health services.

Refugee	Someone who has fled his/her country of origin due to a well-founded fear of persecution for reasons of race, religion, nationality, social group or political opinion; applies for refugee status <u>before coming to the U.S.</u>
Asylee	Must meet the legal definition of a refugee; applies for asylum <u>after</u> fleeing from the country or may come to the U.S. to join a family member who has been granted asylum.
Cuban/Haitian Entrant	Parolees and others who have not yet received a final non-appealable, and legally enforceable order of deportation or removal.
Cuban/Haitian Asylum Applicant	Person who is awaiting the determination of his/her asylum application.
Amerasian	A child born in Vietnam between 1/1/62 and 1/1/76, who was fathered by an American citizen; a spouse, child, parent, or guardian accompanying or following an Amerasian may be eligible under this program.
Victim of Human Trafficking	Someone who has been subjected to involuntary servitude, peonage, debt bondage, or slavery.
Irregular Arrival (Cuban)	Person who comes to the U.S. outside of the established channels (land or maritime).

Immigration status documentation from the Bureau of Citizenship and Immigration (BCIS) is required to determine eligibility for refugee services. **A copy of the client's I-94 card, employment authorization form, or other proof of eligibility must be included in the client record, as well as photo identification.**²

² Victims of trafficking will have a letter issued by the Office of Refugee Resettlement certifying eligibility for refugee services.

Summary of Refugee Health Services

The RHP offers, in cooperation with the county health departments, voluntary post-arrival health screenings and immunization services to eligible new arrivals. A high priority is placed on communicable disease screening, although chronic disease screening and health education services may also be offered.

The post arrival health screening must be **performed by a licensed provider** such as a physician, nurse practitioner, physician assistant, public health nurse, or extended role nurse. Maximal use of trained assistants (e.g., for blood pressure measurements, vision screening) is recommended. **Qualified interpretation services** should be used as necessary and required by law.

The services are offered at **no charge** to the clients, including vaccinations required for their adjustment of immigration status, provided they receive the health screening within 90 days of arrival and the immunizations are started within eight months of arrival.

Class A and/or B Conditions

Refugees and entrants are required to have a pre-migration overseas medical examination to identify Class A or B conditions that pose a risk to public health or impede the attainment of post-migration self-sufficiency.³

Class A	Excludable condition (Class A: infectious tuberculosis, HIV infection, physical or mental disorder that may pose a threat, and drug abuse or addiction); waiver may be granted for admission. The waiver process includes assurance from a health care provider that necessary medical or psychological follow-up services will be provided upon arrival.
Class B	Class B conditions do not require a waiver, but the alien will need follow-up medical care upon arrival in the United States. The Bureau of TB and Refugee Health will follow class B1 and B2 tuberculosis cases. ⁴

³ Irregular maritime arrivals and asylees will not have had an overseas medical exam due to their mode of entry into the country (did not go through formal process).

⁴ The Class B designation is also used for a wide range of health conditions in addition to tuberculosis, including hypertension, diabetes, and physical disabilities due to trauma or disease.

Table 3: Frequently Asked Questions	
<i>Who are our clients?</i>	The majority of Florida’s refugee health clients originated from Cuba, Colombia, or Haiti. ⁵ Cuban entrants are the largest group, although the state is experiencing a greater influx of asylees, particularly from Colombia and Haiti.
<i>Which counties receive the most new arrivals?</i>	Geographically, new arrivals tend to resettle in one of eight Florida counties: Miami-Dade, Hillsborough, Palm Beach, Broward, Orange, Duval, Collier, or Pinellas.
<i>How do I know if there is a new arrival in my county?</i>	The RHP notifies the CHD that a refugee/entrant is settling in a particular county. You are then responsible for setting up an initial health assessment appointment with that person.
<i>What are VOLAGS?</i>	VOLAGS (voluntary agencies) provide reception and placement services for <u>some</u> new arrivals. The VOLAG will coordinate with the CHD to schedule the health screening for their clients.
<i>What if an outside referral is necessary?</i>	<p>Referrals to community providers may be necessary for treatment and follow-up of conditions identified during the health assessment. Refugee health clients are typically eligible for Medicaid.</p> <p>Class A, B1, and B2 tuberculosis conditions require a referral to county health department TB clinics.</p>
<i>What should I do if the new arrival has moved from my county?</i>	<p>If you find a new arrival is residing in another county (or state), Notify the RHP by phone or mail (confidential)</p> <p>Florida Department of Health, Bureau of TB & Refugee Health 2585 Merchants Row Boulevard, Suite 240 Tallahassee, FL 32399-0700 Phone: (850-245-4350, SC 205-4350)</p> <p>Forward contact and medical information to the person’s new county. If you do not know the other county contacts, please refer to Appendix A for the listing, or go to the refugee health web site at: http://www.doh.state.fl.us/disease_ctrl/refugee/index.html .</p>

⁵ 2004 data (Florida Refugee Domestic Health Assessment System)

Table 4: Responsibilities of the County Health Department

Demonstrate clinical capacity and cultural competence in providing health assessments to all eligible refugees according to protocols.
When possible, employ bi-lingual, bi-cultural health aides recruited from the predominant refugee ethnic groups in Florida.
Provide interpreter services for limited English proficient clients to overcome bi-lingual or bi-cultural barriers to care.
Make appointments when necessary, and have a protocol to follow-up refugees who do not keep their appointments.
Prescribe or supply medications for infectious diseases identified during the initial health assessment or make appropriate referrals.
Develop linkages to appropriate primary care or specialty care providers for referrals and follow-up services.
Assure that referrals for general and specialty follow-up are appropriate and timely, and when possible, in proximity to the client's home.
Maintain patient records in accordance with the rules and regulations that govern record keeping in county health departments.
Provide information to orient refugees to the U.S. health care system.

Table 5: Responsibilities of the State Office

Identify and control communicable diseases among new refugee arrivals.
Provide administration and oversight of a health assessment program.
Work with voluntary organizations (VOLAGS) and other agencies that provide case management and ancillary services.
Provide technical assistance to enhance the effectiveness of the program, including: Regular summaries of arrival and health assessment information on refugees/entrants who resettled in Florida, Development of policies, procedures, and protocols with regard to health assessments, referral processes, and follow-up services, and Work with health departments, state agencies, and others to develop bilingual and bi-cultural educational materials.

Reimbursement

Refugee Medical Assistance (RMA) funds, administered by the federal Office of Refugee Resettlement (ORR), provide reimbursement for the provision of refugee health services. The Florida Department of Children and Families administers the funds at the state level.

The refugee health services fee schedule is revised every few years to reflect fluctuations in CHD costs to provide the services and in response to CHD requests for additions or deletions to the services offered. After each client encounter, county health department staff must enter the data into the Refugee Domestic Health Assessment System (RDHAS) (electronic invoice) or complete a paper invoice for submission to headquarters. Once these invoices (electronic or paper) are received the data is reviewed for approval.

Approved reimbursement requests are forwarded to the Department of Children and Families who will transfer funds to the Department of Health for distribution to the respective county health departments. Unapproved invoices are returned to the submitting county for revisions (except for ineligible reimbursement items). County health department **reporting errors** account for the majority of discrepancies in final reimbursement amounts.⁶

The reimbursement system is set up to provide one reimbursement for the initial assessment and possibly multiple invoices for immunizations. There is no time limit for follow-up immunizations as long as the initial health assessment was performed within 90 days of arrival and immunizations are begun within eight months of arrival. The RDHAS system will accept a secondary assessment if submitted for test results that were not available at the time of the initial assessment submission due to a delay in receiving lab results.

⁶ For example, a claim may be submitted for payment of a test for which results are not indicated on the invoice.

Paper invoices must be signed by the designated refugee health contact person or designee and must be submitted with a cover sheet identifying each client by alien number, name, and amount to be reimbursed.

Electronic invoices are entered directly into the online, secure, RDHAS. At the end of each month a list identifying each client by alien number, name, and amount to be reimbursed must be submitted with a cover sheet signed by the designated refugee health contact person or designee.

All invoices and other documents with client information must be double enveloped and sent by traceable mail.

Florida Department of Health
Bureau of TB & Refugee Health
2585 Merchants Row Blvd., Suite 240
Tallahassee, FL 32399-0700
(850) 245-4350

Interpretation and Translation Services

Refugee health providers are required (federal law) to communicate with limited English proficiency clients through the use of qualified interpreters. The Department of Health has a contract with the Institute for Cultural Competency (ICC) for telephonic interpretation services if you do not have a qualified interpreter available.

Reimbursement is available to county health departments for the costs of telephone interpretation services used during refugee health assessments and the administration of immunizations. The Refugee Health Program reimburses the negotiated ICC rates. Rates at the time of printing this manual are: Spanish-\$0.79 per minute, Haitian Creole-\$0.89 per minute, and all other languages-\$1.06 per minute. To establish access to ICC's services, contact Jim Manczak at (800) 654-6231.

For reimbursement, you will need to send a copy of your invoice from ICC along with the "Telephonic Interpreter Services Invoice Form" to the Refugee Health Program office. The form is included in Appendix A of this manual.

RHP Special Projects

The Refugee Health Program offers enablers to assist clients in scheduling their health assessment and immunization appointments. The program has also partnered with the State Epilepsy Program and Injury Prevention Program to distribute bicycle helmets to refugee children. Immunization reminder posters have also been distributed as a special project of the Refugee Health Program.