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Health Insurance Education and Advocacy

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Abstract

This capstone aims to highlight the benefits of health insurance for individuals and communities. Currently, at my internship at Salinas Valley Health Orthopedics, we face a large number of uninsured patients. As a result, these patients are left with extensive medical bills that may be difficult to pay since they do not have adequate health insurance to assist with some of the costs. The project's purpose is to educate the community about the importance of health insurance coverage, provide information on available options and resources, and increase enrollment in healthcare plans. The project was implemented through an outreach and educational effort. Much of this can include an informational brochure to highlight the benefits of being insured, comparing costs with and without insurance, and providing health insurance companies that are available in Monterey County. Only 9 out of the 30 people who were provided with the information successfully applied for some type of health insurance. Although I fell short of my anticipated amount, nevertheless, it still impacted a few individuals. Although it wasn't a huge change, I would still recommend this project to my agency. Especially coming from Monterey County where there is a significant amount of underprivileged communities, everyone should have the same opportunity or patient care no matter their circumstances. Through more outreach and patient advocacy, many lives can be impacted for the greater good.

Keywords: Health insurance, healthcare, medical bills, benefits, patients

Agency & Communities Served

As one of the larger medical facilities in the area, Salinas Valley Medical Clinics (SVMC) see over 200 patients a day and receive over 100 referrals quotidian. “It is the mission of Salinas Valley Health to provide quality healthcare to our patients and to improve the health and well-being of our community.” (Salinas Valley Health, 2023).

SVMC Orthopedics, Podiatry, and Sports Medicine specialize in musculoskeletal injuries, sports-related accidents, and foot problems. SVMC Orthopedics currently supports 12 orthopedic surgeons, all specializing in different body parts. This clinic treats injuries including knee pain, elbow dislocations, sprained ankles, and broken bones. Since this is one of the few Orthopedic clinics in Monterey County, we see patients from all sorts of backgrounds. Although we strive to help our community, there are still barriers that patients face to access adequate healthcare.

Problem Model Background and Literature Review

Contributing Factors	Problem	Consequences
Lack of Healthcare Education	High Rates of Uninsured Patients in Monterey County	Expensive Medical bills
Unemployed or low-income patients		Long-term health risks
Marginalized Communities		Not attending appointments

Problem Statement

In the United States, health care has always been a controversial topic. The expensive cost that comes with health care has always been a huge debate. However, this does not mean that everyone can afford to have it. In fact, there are still many people who cannot afford to get the medical care they need because they do not have health insurance. For them, getting sick or injured can be very dangerous and even life-threatening. Health insurance covers essential health

benefits critical to maintaining your health and treating illness and accidents (U.S. Centers for Medicare and Medicaid Services, n.d.). This is why it is so important for people to find some way to get affordable healthcare coverage so that they will be able to take care of themselves when any health risks arise.

Monterey County consists of a diverse population serving around 437,300 people. Within this county, we have a wide range of ethnicities as well as socioeconomic classes. Amongst those groups, there is a significant number of residents who may not be covered through health insurance. In Monterey County, an estimated 68,000 people lack health insurance, according to researchers at the UCLA School of Public Health (Urevich, 2011). That is roughly around 15% of the population which is uninsured. There are many reasons why this specific population may not be insured but through advocacy and educational interventions these numbers can change significantly.

Contributing Factors

Lack of Healthcare Education

The lack of healthcare education can significantly affect people who are uninsured in several ways. Firstly, uninsured individuals may lack knowledge about preventative health measures, such as proper nutrition, regular exercise, and routine medical screenings. Without this knowledge, they may be more susceptible to developing chronic conditions such as obesity, diabetes, and hypertension. Additionally, uninsured individuals may not understand the importance of seeking medical care when they are sick or injured and may delay seeking care until their condition worsens. This can lead to more serious health complications and higher healthcare costs in the long run. According to Virginia Commonwealth University (VCU) Center on Society and Health (2015) An applicant with more education is more likely to be employed

and land a job that provides health-promoting benefits such as health insurance, paid leave, and retirement. Conversely, people with less education are more likely to work in high-risk occupations with few benefits.

Secondly, the lack of healthcare education can also impact uninsured individuals' ability to navigate the healthcare system. Many uninsured individuals may not know how to access healthcare services or understand the healthcare billing process. This can lead to confusion and frustration, causing them to avoid seeking medical care altogether. Additionally, uninsured individuals may not be aware of community health clinics or other low-cost healthcare options that are available to them. The lack of healthcare education can also make it difficult for uninsured individuals to understand their healthcare options, such as Medicaid or other government-funded programs that may be available to them.

In summary, the lack of healthcare education can have significant impacts on uninsured individuals, including a lack of knowledge about preventative health measures, delays in seeking medical care, and difficulty navigating the healthcare system. Addressing these educational gaps through community outreach programs and increasing access to affordable healthcare options can help to improve the health outcomes of uninsured individuals.

Unemployment or low-income patients

Patients who are unemployed or are low-income may find it difficult to pay medical expenses. When the pandemic hit, it affected millions of uninsured Americans. “The uninsurance rate among unemployed persons who had lost or left a job was 26.3% versus 10.7% among those with jobs” (Woolhandler et al., 2020, [para. 3]). This affected millions of people across the country and also a large number of people in Monterey County.

Although years have gone by it is still having an effect on the patients SVMC sees in the current day. No one was ready for this to happen, and those who did not have health insurance were affected the most. Those who were uninsured were stuck with expensive bills, and for those without a job, it seemed impossible to pay off. This is something SVMC is facing and is something that needs to be addressed.

Every area always has a population that falls under the poverty line. Poverty leads to poor health outcomes like disease, substance abuse, and mental health disorders. With these risks, comes the need for some type of healthcare depending on the situation. A majority but not all do not have the adequate health coverage needed to help aid the cost of their medical expenses. Less than one-third of low-income workers obtain health insurance through their employer, compared to nearly 60 percent of higher-income workers (Khullar et al., 2018). Unfortunately, this is how it is in a lot of communities, and these people are the ones who need healthcare the most. With the lack of health insurance, they fear going to the hospital because of how expensive it is. They may not know of affordable sources that can assist with some expenses.

Marginalized Communities

Environment plays a huge role in the decision-making of people. Those who live close together or share the same values tend to make the same decisions when they are influenced by others. Having health insurance can be a touchy subject. Some may be all in for it, and some people despise it depending on the experiences they have had and how it was handled. This can affect people's decisions if it is really for them or not. This is one of the leading contributing factors to why someone's environment can affect healthcare and healthcare outcomes. Many but not all of the patients that are seen at SVMC Orthopedics find themselves in a financial situation due to their medical bills. This is a result of no health coverage based on a lack of healthcare

knowledge, not being financially stable, and/or their choice not to have coverage due to personal reasons. Regardless of the situation, when someone needs help financially, there should always be sources to help with the issue. One group that seems to be affected the most is the Hispanic population. According to an article published by the Pew Research Center (Funk et al., 2022), Latinx adults are less likely than other Americans to have health insurance and receive preventative medical care.

Not only are adults affected by this issue but children also face the same disparity. Health Insurance is always provided by the parents. If your parents are not insured, unfortunately, you are not covered by health insurance either. The demographic of children that are affected is the Hispanic population. Health insurance coverage is lower among Latinx youths (92%) than among non-Latino White (96%), African American (95%), and Asian (95%) youths. Parental immigration and citizenship status have been associated with a lack of insurance coverage for Latino youths (Young et al., 2017).

Consequences

Expensive Medical Bills

Affordable healthcare in the United States has been an ongoing issue. Millions of Americans face a huge debt with their medical expenses. Doctor visits can be in the thousands and more. It can be hard for those who are uninsured to pay off their medical bills. Not only are they dealing with medical bills but also paying for their living expenses. On average, uninsured individuals pay only 20% of their overall healthcare utilization out-of-pocket (Brevoort et al., 2020). With so many factors coming into play, this can also develop more health risks for those who stay away from the doctor in fear of another expensive bill. Not only does it affect them

financially but also affects their credit if their bills are sent to collections. As a result, the patient is stuck with this burden until the debt has been paid off and they can also face medical bankruptcy. If they can apply for some insurance, they can retroactively apply the insurance to some of their medical bills as far back as a certain period. This means that the health insurance company can pay for previous doctor's appointments that were not initially covered through health insurance. If this is advocated for by uninsured patients this can reduce some of their expensive medical bills.

With any high-priced bills comes a sense of questioning or concern especially if you do not know what you are specifically being charged for. That also goes with uninsured patients whenever they see their healthcare provider or seek any type of medical attention. That is why some people tend to stay away from doctors so that they essentially do not have to deal with high-cost healthcare. From (Rakshit et al., 2023) In 2021, 27% of uninsured adults reported delaying or not getting care due to cost reasons compared to 7% of insured adults. So why is this happening? Well, without insurance, people have to pay for their healthcare out-of-pocket, and this can be really expensive. If you don't have the money to pay for medical care, you might put off going to the doctor or getting treatment, even if you really need it.

On the other hand, if you have insurance, you have access to a wider range of healthcare services, and you're protected from having to pay the full cost of medical care. Insurance companies negotiate rates with healthcare providers, which can make care more affordable for people with insurance. Additionally, insurance plans often have ways to help people manage their healthcare costs, like co-pays and deductibles.

So, in a nutshell, not having insurance can mean that people delay or don't get the care they need because it's too expensive. On the other hand, having insurance can make healthcare more accessible and affordable, so people are more likely to get the care they need.

Long-term health risks

Health and longevity are something that everyone wishes for themselves. In order to achieve those goals people need to maintain a healthy lifestyle and have accessible healthcare. Those who may not live that lifestyle or may not be insured may find long-term health risks along the way. People who may suffer from a prolonged injury or maybe even an unnoticeable disease won't go to the doctor because they are not willing to see an expensive medical bill. Having this thought process can most likely affect the person's well-being and way of life. According to research published in the *Annals of Family Medicine*, (Kaplan et al., 2019) the results converge to suggest that restricted access to medical care accounts for about 10% of premature death or other undesirable health outcomes. Although 10% may not sound like a lot if apply that 10% to the millions of Americans, there is still a significant number of people who may encounter this issue. Thus making it a concern within our healthcare system.

When people do not have access to adequate healthcare due to being uninsured, it can also lead to a significant amount of stress on an individual. This can lead to a series of unfortunate events for a person by having them worry about how they can afford to pay their bill, they may think about how not attending doctor's appointments can prolong their medical conditions, and the list can go on and on. According to the American Psychological Association (2018), Uninsured adults reported an average stress level of 5.6 in the previous month (on a 10-point scale, where 1 is "little or no stress" and 10 is "a great deal of stress"), while those with health insurance reported a significantly lower average stress level (4.7). As we may know,

dealing with stress can also lead to other illnesses that ultimately affect your mental health. In addition to these physical health risks, chronic stress can also impact mental health. It can lead to symptoms of anxiety and depression, and may also contribute to substance abuse and other unhealthy coping mechanisms. Over time, chronic stress can have a cumulative effect on overall health and well-being, increasing the risk of chronic diseases and other health problems. Therefore, it is important to manage stress levels and develop healthy coping mechanisms to prevent the negative effects of chronic stress on long-term health.

Not attending appointments

Not attending a doctor's appointment can ultimately affect a person's health. They are vital for someone to be knowledgeable about their current health status and what ways they can maintain or improve their overall health and well-being. Not only does it provide benefits but it also shows accountability and awareness. These traits can hopefully be recognized by others influencing them to do the same. Although attending a doctor's appointment is beneficial, there are still a certain number of people who no-show their appointments or never see a doctor. Missed appointments can lead to unresolved medical problems, leaving patients vulnerable and presenting later, or living with untreated or worsening health (Parsons et al., 2021).

Not only is the individual affected but sometimes the clinic loses out on some money by not being paid for the services they rendered where it could've been used for a patient that would actually show up. Doctors are prepping to see you and that takes time out of their day. According to research published in Risk Management and Healthcare Policy (Marbough et al., 2020) it was demonstrated that reducing the no-show rate to 5% would result in increasing the revenue by \$51,769.00. When patients do not show up for their appointments, it can create gaps in the schedule that cannot be filled, leading to wasted resources, such as equipment and staff time.

Moreover, missed appointments can cause a delay in the provision of care to other patients, resulting in the need for additional follow-up visits and increased healthcare costs.

In conclusion, missing doctors' appointments can have a significant impact on healthcare clinics in the long run. It not only affects the financial stability of clinics but also leads to inefficiencies in the healthcare system and decreased patient satisfaction. It is essential for patients to understand the importance of showing up for scheduled appointments to promote better health outcomes, efficient use of healthcare resources, and the long-term sustainability of the healthcare system.

Project Description and Implementation Process

Project Proposal

The objectives of my project were to provide uninsured patients with information about local healthcare resources and services, increase the number of uninsured patients who seek healthcare services, and improve the health outcomes of uninsured patients by increasing access to healthcare services.

To achieve these objectives, I developed an informational brochure that provides information about local healthcare resources and services available to uninsured patients. The brochure was designed in a user-friendly format and would include information about local clinics and health centers, free or low-cost healthcare services, prescription assistance programs, preventive healthcare services, mental health services, and emergency healthcare services. I will include contact information and a rough estimate of costs. Hopefully, by providing these patients with this information they can use it to help them decide if they would like to register. In all, healthcare should be accessible to anyone. There are programs out there that are willing to assist

patients who are in need of financial assistance. All they need is some direction to get them there.

Project Justification & Benefits

The purpose of this project is to help assist those who may find it challenging to pay medical bills. The goal is to achieve overall patient satisfaction and the health and longevity of the patients. It is hard to pay medical bills without insurance but guiding and educating those who may not know can ultimately improve their lives. From experience through my internship, I have seen a large number of families affected by this issue. In hopes to resolve this issue families are provided with a brochure with information on how they can acquire health insurance that may fit their needs and budget. Monterey County is one of the counties with the highest number of people who are uninsured. Many of these people will need some type of medical help throughout their life. Unemployed or low-income patients face a unique set of challenges when it comes to accessing healthcare services. However, having health insurance can provide these patients with a range of benefits that can help improve their health outcomes and financial well-being.

One of the most significant benefits of having health insurance is access to healthcare services. Patients with health insurance can visit doctors and specialists without worrying about the cost of the visit. This means they can receive preventive care, diagnostic tests, and treatment for illnesses or injuries. Regular check-ups and screenings can help detect health problems early, which can lead to better outcomes and lower healthcare costs in the long run.

Healthcare education is not heavily taught here in Monterey County. Through effort and advocacy, we can educate the communities that are most affected. As a CHHS major, my goal is to help those in need and spread knowledge back to the community. With this project, I hope

others can receive the right healthcare they need without the fear of paying medical bills. For those who found the brochure beneficial, I hope they share that information with other people who may benefit from it as well. Information like this can be passed down to others and they might find it beneficial.

Expected Outcomes & Assessment Plan

My expected outcome for this project is an educational intervention. I believe that everyone should have access to or be educated within our healthcare system, especially when it comes to health insurance. Unfortunately, there is a huge population that is affected by this issue. My goal in this project is to present information to those who may not know the benefits of being insured. With this project, I will create a brochure that contains useful information on the benefits of having health insurance. The brochure will list the available insurances to apply for within their area. It will contain contact information, various prices, what that specific insurance offers, and include the pros and cons of having health insurance. From there the prospective patient will weigh out their options and decide if applying for health insurance is right for them.

Patients who pay cash do not have insurance. I plan to give out at least 15 to 30 brochures to patients whom I have identified as paying cash through our electronic medical system. This will allow me to track their progress and identify if they have applied for insurance or not. After distributing the brochures I will monitor the ones who took the brochure and who may apply for health insurance. By the end of March, I will see how many people applied for health insurance and determine the success rate. Regardless of the outcome, I hope to make an impact within the community I serve by bringing awareness and healthcare coverage information. Those who benefit from the education interventional brochure have a better understanding of the benefits of health insurance. Making a small impact within the community is a huge accomplishment.

Implementation Process

To start my capstone project I brainstormed my ideas with various people. I had to figure out what could be feasible and what can make a difference within my clinic. Was the information provided beneficial for them to proceed? Does applying for health insurance benefit them financially or would it be another financial burden. Originally, I wanted to create a system that would assist patients who have trouble paying their medical bills. After a lot of discussion with my mentor as well as my instructor, we veered off in a different direction. I have identified that there will be a lot of privacy issues regarding sensitive financial information. We asked questions like, Are patients willing to provide this information? Do they feel comfortable sharing their finances? I felt it was more respectful to provide the pros and cons that come with being insured and ultimately having the patient decide. This will be an educational intervention that introduces options for those who are not covered by health insurance.

After we decided on the capstone idea, I started brainstorming on how to get this done. I will determine the most cost-effective insurance that Monterey County has to offer. There were two specific insurances I have listed that would benefit the particular demographic in my capstone project. Those two insurances go by the name of Medi-Cal as well as Central California Alliance for Health (CCAH). Since many of my targeted population were non-English speaking, with little to no experience with health insurance, it was only ethical to provide these patients with little to no cost insurance. This would benefit them especially since it was more affordable and much easier to apply for. I will gather all of the information regarding what the insurances have to offer, what the application process is like, what is specifically needed from the patient, and any beneficial information that would help them apply. I will figure out how to lay out the brochure, what to include, and how many to print out. After figuring out how to complete the

brochure, I will send it over to my mentor for approval. Once approved, I will dedicate one week to distributing the brochures to prospective patients. I will monitor how many were distributed and follow up with our billing department to see if they have applied or not. Once I have monitored these people for about a month, I will see who was able to apply for health insurance, who was not accepted, and who did not move forward with the information given. After I have gathered all my information, I will include my data in graphs or charts to quantify my findings. (See Appendix A for the detailed implementation plan).

Project Results

The initial goal for my capstone project was to get at least 50% of the people actually applying for some type of health insurance that is available here in Monterey County. With my research methods, I was able to disperse a total of 30 informative brochures that explained health insurance benefits to prospective patients who did not claim that had any type of healthcare coverage. Out of the 30 people receiving brochures only nine people were able to apply for health insurance. With this information, only 30% of the population followed through. I fell short by six people unfortunately not reaching my intended goal of 50%.

As far as methods go, I dedicated two weeks to identifying patients who are considered “self-pay” or uninsured. Once I found the patients who would benefit from this information, I would discuss the benefits and cost-effectiveness it would have on the patient's medical bills. From there, I gave them all the information they needed to proceed with applying. That included contact information, where to apply, how to apply, and the information that the insurance needed. After I was able to get this information out, I worked with my billing department to track the 30 individuals within a month's span to see if they had reported that they are now fully insured.

After tracking for a month, I was able to determine that nine out of the 30 patients did follow through with the information that was provided.

As a result, my project fell short of what I had initially anticipated. There could have been many reasons why it fell short. One example is maybe initially when I started the conversation with the patient, they were never really interested in the first place and thought that they could benefit without insurance. Another speculation was that maybe they faced some barriers when applying for insurance. Either they had issues with contacting the correct person or they started the application and never followed through. There may also be issues with undocumented patients and they may not benefit due to the fact that it can interfere with their immigration process. My last assumption as to why I did not achieve my expected outcome is the possibility that they may have discussed the options of applying with their family but due to financial reasons they did not want to proceed.

Conclusion & Recommendations

Patient advocacy, as well as patient satisfaction, should always be put into consideration when working in healthcare. Especially in areas where healthcare education is not avidly expressed, there should always be options for individuals to seek some type of beneficial resource. Although I fell short of my intended goal, I was still able to manage to get some type of turnaround. With my low application rate, I still made a difference to a good amount of individuals who thought applying for health insurance would benefit them. I think especially working in underprivileged areas like Salinas, there should be more advocacy for those underprivileged communities. Providing alternatives to those who may not know where to go in the first place can ultimately change their life for the better. Knowing that I can make a small difference in my community is a huge success. After reflecting on my project, I do believe that

there should be more efforts or advocacy for uninsured patients that enter my agency similar to my project. Providing useful information to patients allows them to explore more suitable financial options. This shows empathy and overall patient care for these patients.

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Appendix A

Project Implementation Plan

Tasks	Timeline/Deadlines	Supporting Staff	Materials/Services Needed	Deliverables completed projected
Meet with my mentor to go over Capstone project, ideas, and implementations.	January 23rd	Mackinley Hunter (mentor)	Computer	Meeting
Go over proposed new capstone idea with Professor	January 30th	Mackinley Hunter, Professor Barbara Silverthorne	Computer	Zoom Meeting
Start brainstorming ideas, examples, and	February 6th	Mackinley Hunter	Paper, computer	Brainstorming

steps in order to start the capstone project				
Complete the brochure and await approval by mentor	February 9th	Mackinley Hunter	Brochure, Computer	Approval of brochure to proceed with Capstone
Start collecting data and information for the brochure	February 13th	Mackinley Hunter	Computer	Data collected to help support my capstone.
Collect the data and findings	February 20th	Mackinley Hunter	Computer	Collected the data.
Acquire location where I can distribute the brochure to prospective patients	February 23rd	Mackinley Hunter	Desk, Computer, Brochure	Location setting
First day of identifying prospective patients who are uninsured.	March 1st	Mackinley Hunter	Computer	Gathering data
Follow up with the prospective people who took brochure information.	March 31st	Mackinley Hunter	Computer	Research methods
Identified who was able to apply and who did not apply	April 3rd	Mackinley Hunter	Computer	Gather insight
Enter in essential information with my capstone report.	April 10th	Mackinley Hunter	Computer	Data entry
Finalize all of my data. Researched through our system to verify insurance status in our EMR system	April 14th	Mackinley Hunter	Computer	Research methods
Went over project with mentor for approval.	April 17th	Mackinley Hunter	Computer	Meeting

Appendix B

Project Results

Patient results

