Health Care: Remove Barriers To Health Coverage for Immigrants, Improve Mental Health Services, and Support Families with Young Children

The District should use the fiscal year (FY) 2020 budget to address racial and economic inequities in health care. This includes removing barriers to health care coverage faced by immigrant families, strengthening mental health services—especially for youth—and strengthening home visiting programs that support the healthy development of young children.

Remove Barriers to Health Coverage for Immigrants

With one of the lowest uninsured rates in the nation the District is a leader in providing access to health insurance. But this success is marred by DC’s poor record on providing care to immigrants. For almost a decade, DC has failed to remove barriers to accessing care through the DC Healthcare Alliance, a program for residents with low incomes who aren’t eligible for Medicaid, many of whom are immigrants. In 2011, DC implemented restrictive procedures residents had to follow to maintain their Alliance eligibility, including in-person interviews every six months, which immediately led to a sharp drop in participation. Today, thousands of residents who should have health insurance do not, and the uninsured rate is much higher among Latinx DC residents than others. Beyond that, the restrictive rules contribute to a high rate of turnover in the Alliance, as residents join the program but then drop off, due to the time-intensive requirements. This lack of continuous coverage contributes to poor health outcomes and high costs per-person in the Alliance.

The District should invest $17 million to eliminate access barriers in the Healthcare Alliance. The added costs reflect the fact that more residents would have health insurance once the barriers are removed. The DC Council passed legislation in 2017 to make it easier for eligible residents to maintain Alliance coverage, but it cannot go into effect until it is funded. Eliminating these barriers will help ensure that all DC residents have access to health insurance, regardless of their income or immigration status.

Expand Mental Health Services in Schools

A 2018 report from the DC Task Force on School Mental Health noted that access to mental health services within schools is critical to student success, and it recommended a substantial increase in mental health professionals in DC Public Schools and public charter schools. As a start, the FY 2019 budget included $3 million to hire roughly 30 clinicians to serve students and their families in DC’s highest-need schools.
An investment of $11 million would allow an additional 95 mental health professionals to be placed in DC schools, greatly expanding the number of schools where students have direct access to mental health care.

**Sustain Behavioral Health Rehabilitation Services**

Behavioral Health Rehabilitation Services (BHRS) are community-based mental health and addiction treatment services. These include community support services, which help connect people with the resources and skills they need to live with a mental illness.

An investment of $5 million would maintain rehabilitation services and build on community support services for District residents with behavioral health needs. It would support an inflation adjustment in BHRS reimbursement rates for behavioral health providers to cover the rising costs of providing treatment. This would also help ensure that there is an adequate supply of behavioral health providers in DC for residents needing care. In addition, this investment would support updating payments to housing providers serving residents with mental illness.

**Support Parents and Children Through Home Visiting Programs**

Home visiting programs support families of young children as they transition from pregnancy to parenting, getting mothers and babies off to a stronger, healthier start. Many pregnant women and young families need help understanding and supporting their child’s development and may not know how to find the resources they need to care for themselves and their children. Home visiting programs can serve as a bridge to these critical resources.

Home visiting programs help ensure children enter school ready to learn, improve early mental and physical development, and increase use of needed health services and immunizations. High quality home visiting programs can also contribute to the prevention of child abuse and family violence.

Existing home visiting services in the District are not reaching all the families who could most benefit from them, and the District’s local investment in home visiting is too low to adequately support the programs and attract and retain a qualified home visiting workforce. (High turnover can interfere with program uptake and effectiveness).

**The District should increase funding for home visiting by $6 million for families experiencing homelessness, programs for immigrant children, and more general home visiting services and supports.** This investment would improve the health and well-being of women and their babies and raise the quality of programs by adding resources to attract and retain qualified staff, expand access to services for families needing support, and advance equity by improving health outcomes for families facing the biggest barriers.