Medical Xpress

Study: Over 100,000 Californians likely to miss out on health care due to language barriers

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Language barriers could deter more than 100,000 Californians from enrolling in the Health Benefit Exchange, according to a study released today by the California Pan-Ethnic Health Network, the UCLA Center for Health Policy Research, and the UC Berkeley Center for Labor Research and Education.

The study presents findings from a UC Berkeley–UCLA micro-simulation that estimates the likely enrollment in health care reform programs in California. Specifically, the study projects that more than 1 million limited–English proficient (LEP) adults will be eligible to receive tax credits to purchase affordable coverage in the state's Health Benefit Exchange, which expands access to affordable health coverage as part of the Patient Protection and Affordable Care Act.

However, only 42 percent of eligible LEP adults are expected to enroll in the program.

"The evidence suggests that Californians who do not speak English very well are at a disadvantage in terms of accessing health care reform programs," said Daphna Gans, a research scientist at the UCLA Center for Health Policy Research and the lead author of the study.

The UC model shows that if language is not a barrier, participation by LEP adults could increase to 53 percent, a difference of approximately

110,000 individuals.

"These are difficult times for California families, and ensuring every Californian has access to quality, affordable health care is vital for our economic recovery," said California Assembly Speaker John A. Pérez, who authored legislation (AB 1602) in 2010 establishing the exchange. "The Health Benefit Exchange will help lower the cost of health insurance for every Californian, but it's vital for every eligible Californian to enroll to ensure we bring health care costs down as much as possible for California's working families."

In California, more than 15 million residents speak a language other than English at home and nearly half (7 million) of them have limited proficiency in English. The study shows the importance of adopting a diverse strategy for outreach and education.

"The exchange is a key opportunity to make Californians healthier," said Ellen Wu, executive director of the California Pan-Ethnic Health Network. "We have to do this right. Our success in implementing this new program will be measured not just by the number of people enrolled but by the state's ability to reach those who are most often left behind. We have to target resources through multicultural and multilingual outreach to ensure that communities of color who are eligible, particularly people who speak English less than very well, enroll in coverage."

The study was conducted based on analyses using the California Simulation of Insurance Markets model, a micro-simulation developed by UCLA and UC Berkeley researchers, which uses a range of official data sources (including the California Health Interview Survey) to estimate the impact of various elements of the Patient Protection and Affordable Care Act on employer decisions to offer insurance coverage and on individual decisions to obtain coverage in California.

The development of the model was supported through funding by The California Endowment, the California [Health Benefit](#) Exchange and the California Pan-Ethnic [Health](#) Network.

More information: "Achieving Equity by Building a Bridge From Eligible to Insured." - [www.healthpolicy.ucla.edu/pubs … nrolledpbfeb2012.pdf](#)

Provided by University of California - Los Angeles