Examining Racialized Burdens: COVID-19 Pandemic Medicaid Changes in Indiana

Year 2 Sharing Session - March 23, 2024

Introductions

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Ethicist

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Ethnographer

Community Leadership Board

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East Chicago

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Pastor, St. Mark A.M.E. Zion Church

Fort Wayne

Bill McGill

Pastor, Imani Temple Baptist Church

Indianapolis

Jerry E. Davis, III

Pastor, Crossroads AME Church

South Bend

Andre' McGhee

Pastor, Greater St. John Baptist Church

Project Managers and Community Connectors

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AfricaLogical Institute / First Baptist Church North Indianapolis

Delanie Marks

Project Manager, The Irsay Institute Indiana University

Dr. Gwendolyn Kelley, PhD

Project Manager

Agenda

1.   Project Overview (5 mins)

1.   2 Challenges and Solutions/Successes (15 mins)

1.   Question 1 for the group (5 mins - Deziree and Dr. Hernandez)
     a.   Breakout groups (25 mins)

1.   Question 2 for the group (5 mins -Dr. David Craig and Dr. Hicks)
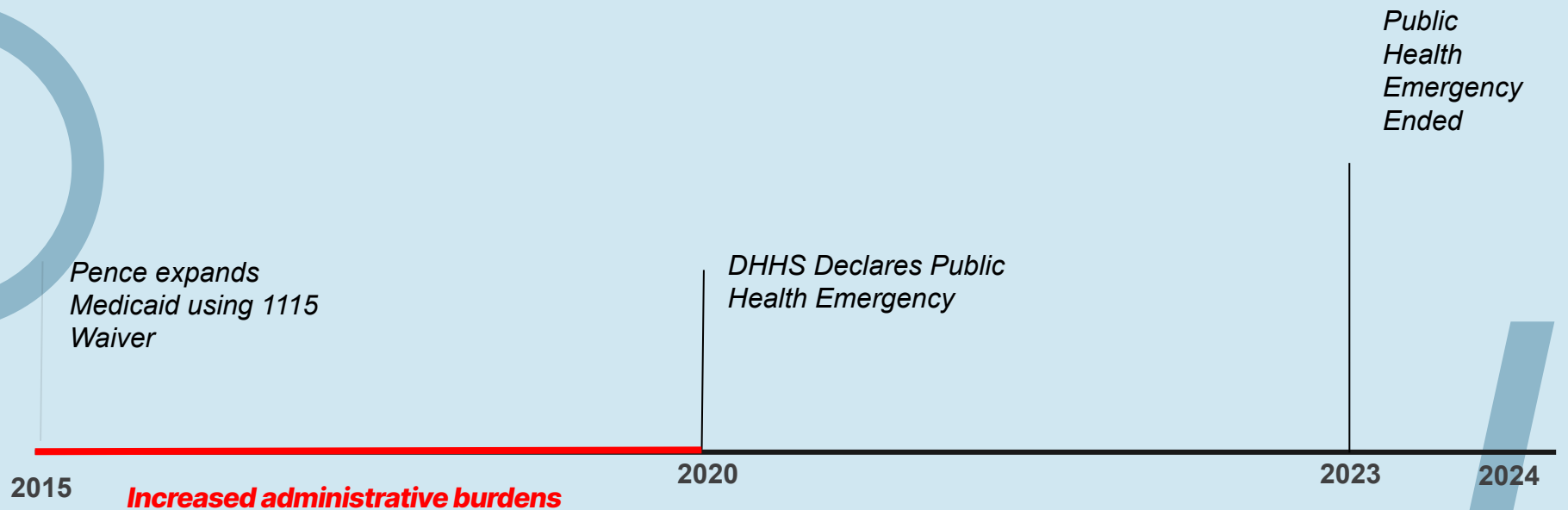   b.   Breakout groups (25 mins)

Purpose

To understand <u>whether</u> and <u>how</u> administrative burdens are racialized
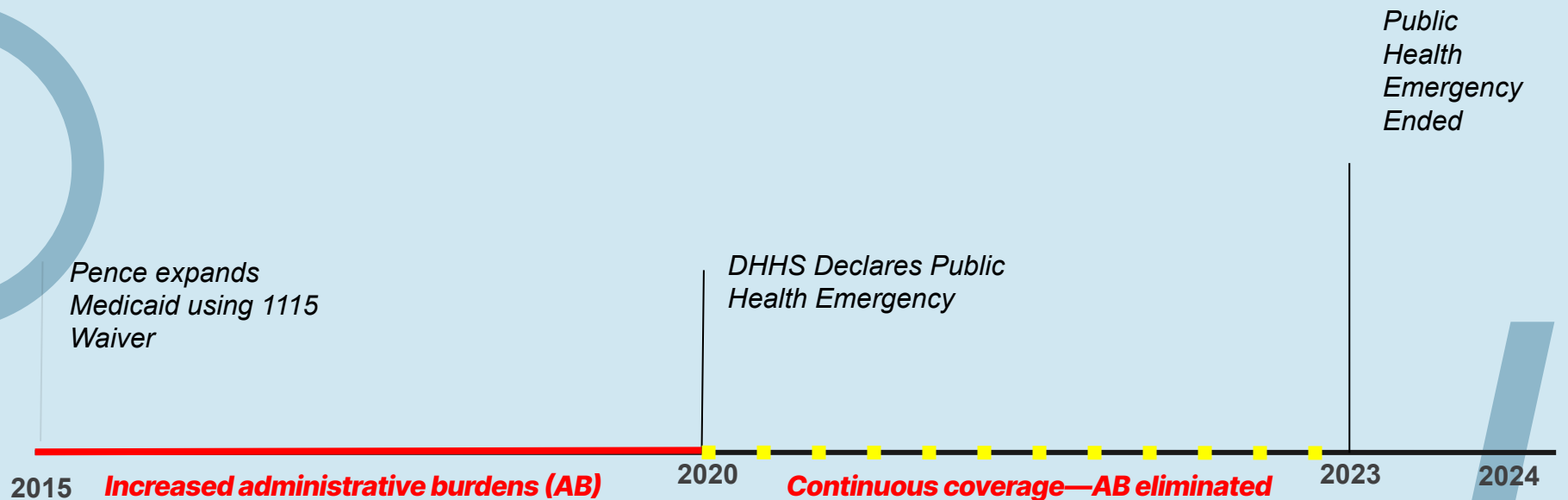
Racialized Administrative Burdens

Racialized burdens are administrative practices that combine ideas and materials in ways that disadvantage racially minority groups.

These burdens are *added labor and frustrations* that disproportionately take *time and resources* away from racially minority groups.
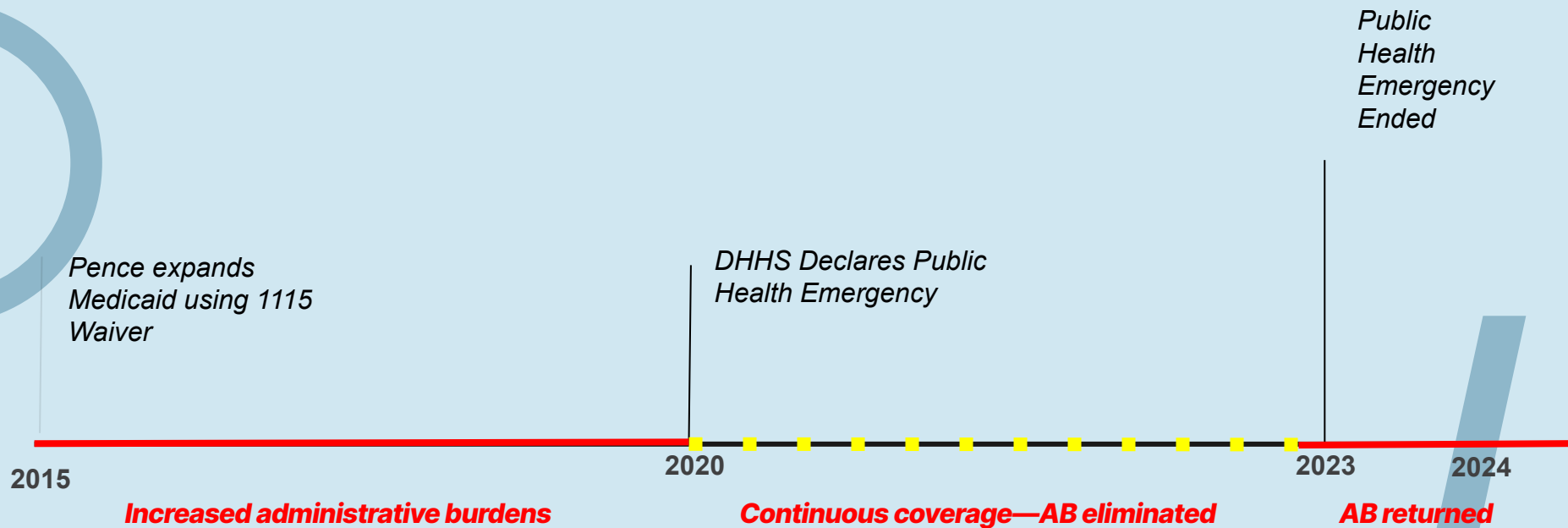
Project Overview

2015

Pence expands
Medicaid using 1115
Waiver

Increased administrative burdens

2020

DHHS Declares Public
Health Emergency

2023

Public
Health
Emergency
Ended

2024

Project Overview

2015 — Pence expands Medicaid using 1115 Waiver

Increased administrative burdens (AB)

2020 — DHHS Declares Public Health Emergency

Continuous coverage—AB eliminated

2023 — Public Health Emergency Ended

2024

Project Overview

Pence expands
Medicaid using 1115
Waiver

DHHS Declares Public
Health Emergency

Public
Health
Emergency
Ended

2015

2020

2023

2024

Increased administrative burdens

*Continuous coverage—AB eliminated*

AB returned

Research Questions

1. **To explore Black, White, and Latine Medicaid beneficiaries experiences when administrative burdens were paused.**

1. When these administrative burdens returned, were experiences of structural racism among Black and Latine beneficiaries catalyzed or thwarted?
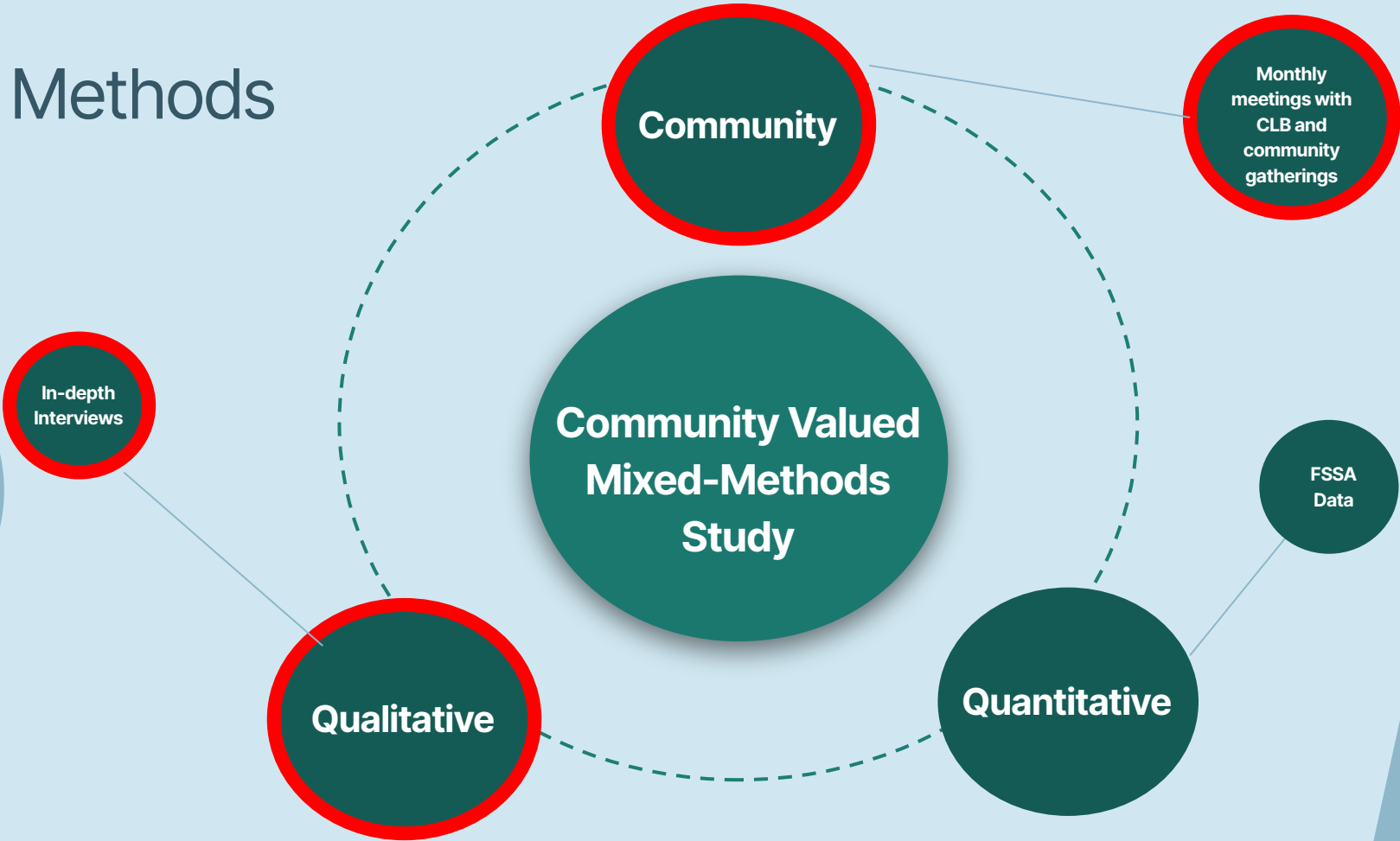
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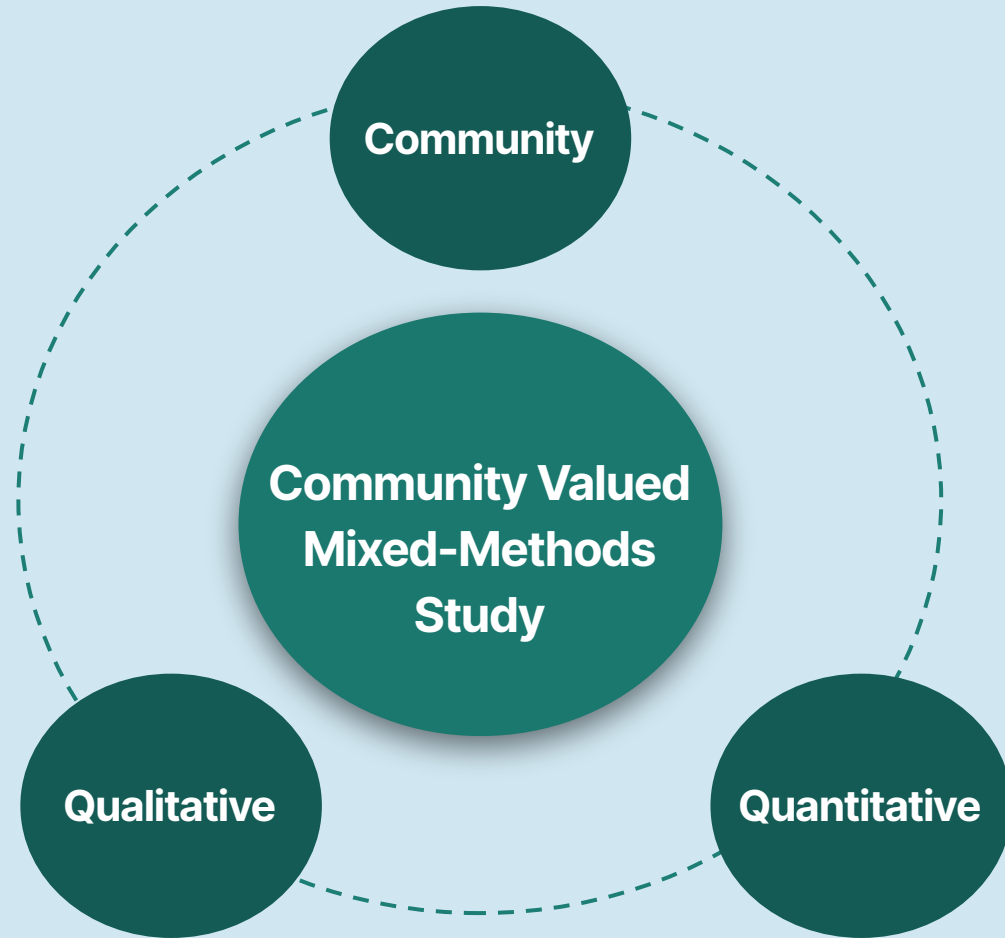
Methods

01

Challenge

Gaining participation

Challenge #1

Goal: 24 i...

Methods...
- ➔ Post...
- ➔ Ema...
- ➔ Colo...

Postcard sent

3 weeks before arrival

Calls were made

days before arrival

Reminder texts and calls

Outlook — Search

[External] Undeliverable: [EXTERNAL]Healthy Indiana Plan Study

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P

To: hipstudy   Mon 7/17/2023 3:35 PM

[External] Undeliverable: [EXT...
Outlook Item

This message was sent from a non-IU address. Please exercise caution when clicking links or opening attachments from external sources.

↩ Reply   → Forward

Healthy Indiana Plan Study   7/17/2023
Delivery has failed to these recipients or groups: GOMEZ...

Healthy Indiana Plan
HIP Study

The Healthy Indiana Plan Study (HIP Study) will be visiting South Bend, IN between August 3-5, 2023.

You may be contacted by email or phone to participate in a 1-hour in-person interview in return for a $75 gift card.

If you are interested in participating, email or call us at hipstudy@iu.edu or 812-340-7458.

Visit our web site at hipstudy.iu.edu for more information.

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Learning Opportunities

1) No-shows
2) No answers
3) People thought we were associated with state
4) Preference for phone interviews

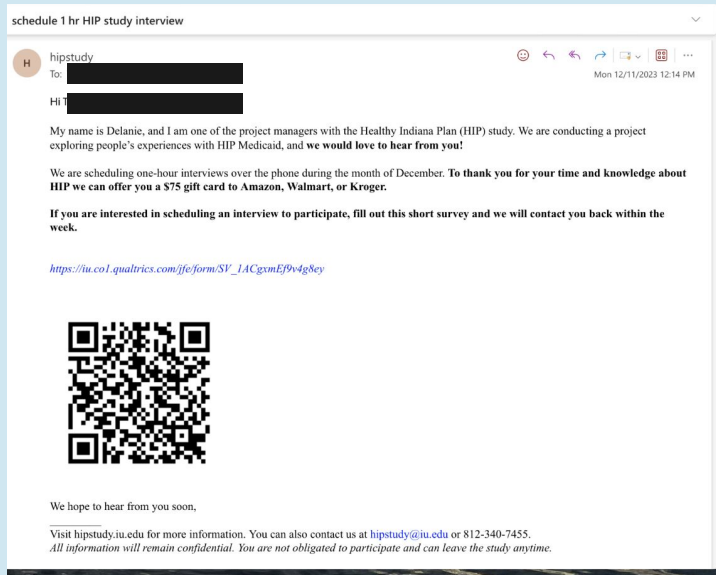Ex: South Bend, Indiana

01

Success / Solution

Adaptations

Success #1

The Healthy Indiana Plan (HIP) Study will be visiting Bloomington.

Scan here if you are interested in participating in an interview for $75.

Estudio del Plan de Salud de Indiana (HIP) visitará Bloomington.

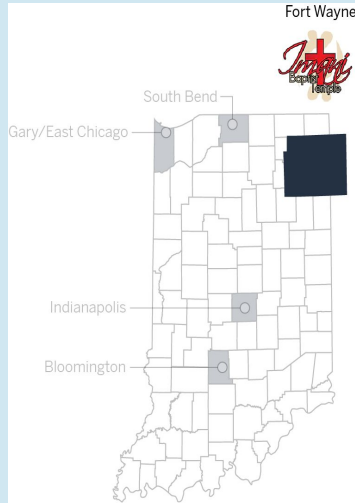Escanee aquí si está interesado en participar en una entrevista por $75.
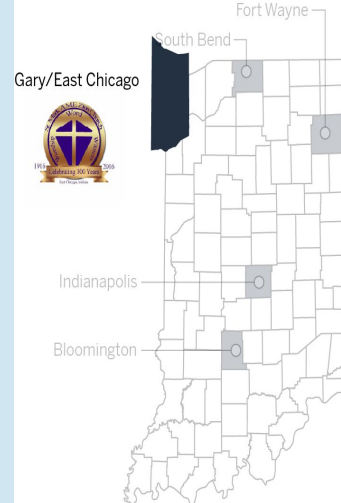
hipstudy.iu.edu

Success #1

8   16   24   14   17

79

02

Challenge

More interviews with unreached populations

Challenge #2

	Male	Female
Non-Hispanic White	8	11
Non-Hispanic Black	7	24
Hispanic/Latine	12	17
	27	52

Challenge #2

	Male	Female
Non-Hispanic White	8	11
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02

Success / Solution

Community Leadership Board

03

Challenge

Analysis

We know that when people try to access and use health care they are sometimes treated unfairly and differently based on who they are.

Have you experienced, seen, or heard about people being treated differently in a clinic, hospital, or pharmacy because of who they are?

Examples of Responses

Some participants are

1. **aware and vocal about racial discrimination.**

Others provide

1. **contradictory responses.**

Some participants

1. **just say no.**

While others

1. **acknowledge other people may experience it, but they do not.**

Lastly, some

1. **do not want to talk about it.**

With that, it's kind of a touchy subject because ==you don't know if you're in your head or if this person is actually doing that to you==, and when you do signify that they're like you're pulling that race card. It's a form of gas lighting almost. But also a lot of people or even myself in the beginning, I didn't understand that there is a hospital, when they call you back, ==a lot of people say just because they're black they're not getting called, which is partially correct because there's a lot of – okay, yes, long story short, it happens.== I'm not going to get into it because I'll be here for another ten minutes trying to explain the whole breakdown.

Those are built in things that are factors to us not getting help in the proper manner no matter what it is, that yeah. There's a lot. ==You don't know whether or not it's actually you or just things set up as obstacles that are in the way.== Again, it's a form ==you feel like you're being gas lit==. A lot of people don't care. When it happens, they don't say something to it. I try to give the benefit of the doubt, is the person intentionally doing it or do they need to be aware of this.

25 year old, Black Woman

03

Success / Solution

We need your help - Analytic Approach

Our Approach

1. We use NVivo to organize and code

2. Group interviews by race/ethnicity to look for patterns

3. Compare patterns with individual perceptions

How can we identify structural racism and the effects of structural racism using qualitative analysis?

04

Challenge

Dissemination

Policy Context

Under the new SB 202, Boards of Trustees of Indiana public universities will:

- Deny promotions and tenure to faculty members if, "**based on past performance or other determination by the board**," they are "unlikely to foster a **culture of free inquiry, free expression, and intellectual diversity**" or are "unlikely to expose students to **a variety of political or ideological frameworks" within their discipline**
- Determine "intellectual diversity" in faculty members' academic disciplines
- Evaluate "intellectual diversity" in post-tenure reviews, at least every five years

Policy Context

SB 202 also:

- Applies "intellectual diversity" standards to faculty contract renewals

- Creates a system where students can report faculty for not teaching with "intellectual diversity." Mandated reports of these complaints go to the state legislature

Ryan Quinn, "Indiana Governor Signs Bill Tying Tenure to 'Intellectual Diversity,'" *Inside Higher Education* 3/14/24

Question #2

How can IRL teams disseminate research findings about health equity and structural racism effectively and safely where political environments and legal structures are hostile?

How can we communicate findings and advocate policy change persuasively in these circumstances, especially in "red" states?

Thanks!

Do you have any questions?
youremail@freepik.com
+34 654 321 432
yourwebsite.com

Unfair Treatment/Racism Attributes:

6. Thinking about these barriers to accessing health care, are there instances when you've felt you were treated unfairly or poorly because of your race or ethnicity?

   Probe: What happened? Can you give me 1 or 2 examples--or more if you have more?

7. Thinking about your community members accessing health care, do you know other people who have been treated unfairly or poorly because of their race or ethnicity?

I've experienced it in the past but not lately. Everything has been a little better as far as that is concerned. I think sometimes when you're submitting information to HIP, I think that they kind of treat people a little different depending on – I guess you can say race maybe because you can pretty much tell who you're talking to on the phone and stuff like that. I don't really put in my – I don't really look at it real hard. I don't look at it real hard because really it doesn't matter when it's all said and done I'm still going to be who I am. I don't let it get to me like that. Maybe when I was younger, maybe it got to me a little more than it does now.

F: When I was applying for – I'm not sure, I've had a few instances. The one I just recently dealt with was when I was trying to get emergency rental assistance. They literally said to me how come you can't just go get a job. It had me crying because they're irritated with me, they were annoyed by me, and I did have my baby crying in the background, and I was trying really hard to keep her calm, but just people that can just say some really harsh nasty comments that even if that's how you feel keep it to yourself. And then people, once, when we were at the school, we were talking about, they were asking us about what our deductible was, we were like we don't have a deductible, we have cash, and they were like oh I hate when people take advantage of the government. It's like I have two autistic kids and if I was not getting coverage for especially them we wouldn't even be able to afford their care. People can just say some nasty stuff. I don't even know if it's directly about ethnicity, race, I've dealt with stuff like that too, but where you just know it's more of a financial aspect thing and just thinking you're taking advantage of the government for having those things.