2010-12 COMMUNITY SERVICE PLAN

ADVANCING THE PREVENTION AGENDA FOR PUBLIC HEALTH
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LEADERSHIP

Founded in 1863, Hospital for Special Surgery (HSS) is the oldest existing orthopedic hospital in the country. An independent, 162-bed, nonprofit center, Special Surgery is a leader in the treatment of musculoskeletal disease with renowned expertise in the fields of orthopedics and rheumatology.

Hospital for Special Surgery has been top ranked in the Northeast for orthopedics and rheumatology by *U.S. News & World Report* for 19 consecutive years and is also the recipient of many prestigious local and national designations for service excellence, including as the first hospital in New York State to achieve reinstatement of the nation’s highest honor for nursing.

As a recognized leader in musculoskeletal medicine for more than a century, Special Surgery has established an ongoing commitment to physical wellness and providing patients with the highest standard of healthcare. Through carefully planned outreach initiatives, the HSS Public and Patient Education Advisory Committee—an interdisciplinary group of healthcare professionals at Special Surgery—have collaborated with local organizations to ensure alignment between public/patient education and all aspects of Special Surgery, with the goal of sharing knowledge, increasing awareness, and promoting healthier lifestyles for people within our community.

Mission and Vision

**The Mission of Hospital for Special Surgery** is to provide the highest quality patient care, improve mobility, and enhance the quality of life for all and to advance the science of orthopedic surgery, rheumatology, and their related disciplines through research and education. We do this regardless of race, color, creed, sexual orientation, or ethnic origin.

**The Vision of Hospital for Special Surgery** is to lead the world as the most innovative source of medical care, the premier research institution, and the most trusted educator in the field of orthopedics, rheumatology, and their related disciplines.
PRINCIPLES FOR COMMUNITY SERVICE

Hospital for Special Surgery is committed to implementing initiatives that provide superior care to patients and improve the health of the diverse communities we serve.

Our key principles include:

- Providing the highest quality patient care, improving mobility, and enhancing the quality of life for all.

- Advancing the science of orthopedic surgery, rheumatology, and their related disciplines through research and education regardless of race, color, creed, sexual orientation or ethnic origin.

- Leading the world as the most innovative source of medical care, the premier research institution, and the most trusted educator in the fields of orthopedics, rheumatology, and their related disciplines.

- Setting and adhering to the highest possible standards based on Excellence, Integrity, Compassion, Respect, Teamwork, Quality, Safety, Innovation, Education and Efficiency.

Hospital for Special Surgery extends this commitment outward by improving public health, empowering communities through information and services, leveraging resources through effective partnerships, and strategically linking to other health care providers and government agencies.
Hospital for Special Surgery is a leading center in musculoskeletal care with a reputation for excellence that spans time and borders. In its entirety, Special Surgery’s immediate community consists of the five boroughs of New York City, as well as the many suburban counties in the tri-state area (i.e., New York, New Jersey, and Connecticut). Our reach also extends to regions across the nation and around the globe.

In recent years, Special Surgery’s core service area has experienced a major surge and shift in population, including 73,000 new immigrant residents (2008) and a significant increase in the older adult population. As New York City and its surrounding areas expand, so does the need for prevention and education programs that address the health care concerns of more diverse and older communities.

Inwood / Washington Heights

Bronx

Special Surgery used census data, the New York State Report on the burden of arthritis, and its own patient demographics to form priority initiatives for community service while working with external organizations to establish more specific arthritis epidemiological data.
Public participation is a key ingredient to shaping HSS outreach education and prevention programs. Along with special attention to national, state and city health data related to musculoskeletal disease, HSS routinely conducts needs assessments of the community and collaborates with local organizations, public schools, city and state agencies, universities, colleges and the private sector to strengthen public health education initiatives.

Other needs information is gathered through a rigorous evaluation process of our existing public and patient programs. All HSS programs from the Public and Patient Education Department and Department of Social Work Programs include patient questionnaires, focus groups, and related feedback for building and improving program models.

Our collaborative approach ensures regular feedback from varied constituents including community members, patients, physicians, and staff. Such information provides valuable insight into public and patient health needs, a better understanding of community health beliefs, which is utilized in the development of public health programming.
Facing Facts

In February 2008, Hospital for Special Surgery formed a Community Service Plan Task Force to review the New York State Department of Health (NYSDOH) Prevention Agenda, analyze current program initiatives/partnerships, compare to data and health care disparities impacting these communities, and respond to the public health challenge as outlined by the Department of Health.

As part of the planning process, HSS generated its own patient statistics for comparison to existing public health data as well as to align Hospital health priorities with DOH Community Service Plan initiatives. Our investigation pointed to the following health conditions that lead to musculoskeletal problems.

Obesity Burden in New York City

For many New Yorkers, obesity tops the list of health issues. Unhealthy eating and lack of physical activity increase the risk of obesity, heart disease, stroke, diabetes, arthritis, and cancer.

- In New York City, 57% of adults are overweight or obese, compared with the statewide average of 25%.
- 24% of New York City elementary school children are obese and 19% are overweight, with significant disparities within African American and Latino communities.
- 1 in 3 Latino children are obese.
- A DOH survey indicates 14% of New Yorkers reported eating no fruits or vegetables at all on the previous day.
- Only one in four New Yorkers engage in physical activity 30 minutes per day, four days per week.
- For people with lupus, the need for corticosteroid hormones to manage the condition may contribute to high blood pressure and blood sugar, and unhealthy weight gain.

A balanced diet rich in calcium and other essential nutrients represents the key to short- and long-term healthcare maintenance. It is a lifelong goal that can be achieved with the help of targeted, accessible nutrition and fitness education initiatives, particularly for medically underserved communities.

Chronic Disease

Chronic disease, particularly arthritis and lupus, ranks high on the list of health concerns for New Yorkers.

Arthritis is a disease of the joints and connective tissue that causes pain, swelling and limits mobility. It is a major public health issue that affects young and old, with nearly two-thirds under the age of 65 and 1 in 250 children. Arthritis is a serious health challenge and is the leading cause of disability.
Across the United States, an estimated 46 million U.S. adults (about 1 in 5) report doctor-diagnosed arthritis. As the U.S. population ages, these numbers are expected to increase sharply. Arthritis is more common in women than in men across all racial and ethnic groups. Osteoarthritis (OA) is the most common form of arthritis. According to the Center for Disease Control, OA affects 13.9% of adults aged 25 and older and 33.6% (12.4 million) of those 65+; an estimated 26.9 million US adults in 2005. Locally, arthritis impacts over 20% of New York City residents of all ages, especially among the city’s poor, elderly and Latino populations, with nearly one-third reporting annual household incomes of less than $15,000.

Lupus, a life-threatening autoimmune disease, also presents complex medical issues particularly for women of childbearing age between the ages of 15 and 45. Asian, Latino, African-American and Native-American women are two-to-four times more likely to develop the disease than Caucasian women.

Further, studies have shown that African-American, Asian-American, and Latino women have more severe and life-threatening disease symptoms, such as stroke or kidney failure, and may have worse outcomes than Caucasian women. Reasons for these health disparities continue to be researched, and may be impacted by differences in access to health care, language barriers, medical insurance status, income and educational levels, and other factors. These factors can make a difference in getting an early diagnosis and effective treatment for this serious illness.

Unplanned pregnancies can also put lupus patients at greater risk for blood pressure problems, prematurity, and potentially serious maternal or fetal problems, including miscarriage. Life-threatening medical issues such as neurological conditions (hemorrhage, seizure, and stroke) are also prevalent among Latina and African-Americans, who have a reported three times higher death rate from lupus-related conditions than Caucasians.

### Plan and Respond

Hospital for Special Surgery’s comprehensive review of patient statistics along with census and health data from Centers for Disease Control and Prevention, New York State Department of Health, and other relevant sources, underscored unmet needs in our community and reaffirmed health priorities that impact healthcare maintenance, mobility and quality of life for underserved members of the HSS community. These categories are:

- **Nutrition and Physical Activity**
- **Chronic Disease**

In collaboration with current and new partners in health care, Hospital for Special Surgery is in a unique position to expand upon targeted community outreach initiatives with an emphasis on enhancing health education, communication, and quality of life for a diverse patient population.
SNEAKER© (Super Nutrition Education for All Kids to Eat Right) provides culturally sensitive, multilingual nutrition education and information for New York City’s children and their families in need. Beginning in 2003, Hospital for Special Surgery has conducted several SNEAKER© Programs at elementary schools, community centers and not-for-profit organizations, reaching more than 2,800 New York City children and their families.

The program targets the city’s most medically underserved communities in New York City including East Harlem, Harlem, the Lower East Side, Manhattan’s Chinatown, and sections of the Bronx. Citizens in these areas are predominantly Latino, Asian and African-American.

Through its existing and new collaborators, the expanded SNEAKER© program will focus on reducing childhood and adult obesity by teaching the benefits of good nutrition, including lower sugar intake, portion control, as well as increased consumption of whole grains, calcium and Vitamin D.

HSS specific program goals are:
- Increasing awareness of obesity as a key health concern for children and adults
- Helping children and adults adopt healthier nutrition habits
- Training teachers, healthcare workers, caregivers and parents in the SNEAKER© program model

Community reach will deepen through current and new relationships including:
- Girl Scout Council of Greater New York
- New York State Osteoporosis Prevention and Education Program
- New York City Public Schools
- Safe Kids International
- Pediatric Health Care Coalition
- NYC Department of Health
- Charles B. Wang Community Health Center
- Weill Cornell Clinical Transitional Science Consortium Community Engagement Core
- New York City Public Libraries

HSS new partnerships and collaborations to include Community Health Worker of NYC, school-based health centers, and Charla de Lupus (Lupus Chat)® of HSS (lupus program for Spanish speakers).
Through community health needs assessments and focus groups the SNEAKER® program model will be adapted to reach new targeted communities by:

- Organization of educational, community workshops by HSS health educators
- Coordination of training initiatives for SNEAKER® educators
- Dissemination of nutrition and exercise information, via print and website.

With the goal of raising awareness and reducing obesity among children and adults, participants will learn about portion control and how to make healthy food choices in different settings. Other healthy living principles will include the importance of calcium and vitamin D intake, whole grain and fiber-rich food, and real versus perceived amounts of sugar in our daily diet.

SNEAKER® in Action, Lessons for Life
Three-year Action Plan

Year 1
- Assess education gaps in healthy eating knowledge and practice
- Use SNEAKER® curriculum to address nutrition education and practice gaps
- Develop specific outcomes measures based on needs assessment using qualitative, community-based research methods
- Collect process data such as number of participants, number of trained SNEAKER® community healthcare workers, as well as number and location of programs offered
- Discuss findings and initial feedback with partners and community

Year 2
- Implement programs
- Apply outcomes measures to targeted populations
- Organize and analyze data
- Develop new collaborations
- Share finding with the community

Year 3
- Implement programs
- Train community health workers
- Continue collecting outcome measures and quantitative data
- Present 3-year totals and analysis
- Discuss findings with partners
- Present next steps
Hospital for Special Surgery is focusing on improving health and reducing healthcare disparities among populations affected by arthritis and lupus.

Specifically, HSS has designed four programs with a focus on medically underserved populations, including Latinos, African-Americans, Asians, and adults 60 years and older. These planned program initiatives are:

- Osteoarthritis Awareness and Action
- VOICES 60+ Senior Advocacy Program
- Charla de Lupus (Lupus Chat)
- LANtern® (Lupus Asian Network)

While there are more than 100 types of arthritis, osteoarthritis (OA) is the most common and results in the wearing down of cartilage, restricting motion, causing pain and disability.

OA has been identified by the CDC as one of five top health priorities in the chronic disease category. In fact, as of 2008, Special Surgery treated more than 7,800 patients diagnosed with OA, including over 5,500 requiring a partial or total knee replacement.

**Program Design**

Together with its partners and new collaborators, HSS will implement Osteoarthritis Awareness and Intervention by leveraging our experience of working with underserved communities as well as enhancing our expertise through emerging initiatives directed at combating OA and improving health.

HSS plans to work closely with the National Arthritis Foundation on their 2010 OA Awareness Campaign and deepen relationships with local and countrywide organizations such as:

- Weill Cornell Clinical Translational Science Community Engagement Core Partners
- NYC Department of Health
- NORCs (Naturally Occurring Retirement Communities)
- Chinese American Planning Council
- Greenberg Academy for Successful Aging
HSS outreach initiatives in OA will be extended through new partnerships including:

- United Federation of Teachers
- Harlem Health Promotion Center
- Other training facilities

The new program will focus on the objective of addressing modifiable risk factors by raising awareness of OA and providing OA patients with lifestyle management strategies. Specific outreach goals are:

- Increase public awareness of OA as a priority health concern
- Educate the public about the spectrum of treatment options for OA
- Help people with OA to increase their knowledge of the disease
- Offer people with OA strategies for disease management
- Implement OA lifestyle and behavior management programs.

HSS will carefully design a program including multilingual health education and resources for communities at risk for OA based on community health needs assessments and feedback from partners on community health beliefs and practice.

### Osteoarthritis Awareness and Intervention

#### Three-year Action Plan

**Year 1**
- Assess gaps in OA knowledge and treatment
- Identify new and existing partners
- Identify outcomes measure
- Develop specific outcomes measurements based on knowledge gap assessment
- Implement OA program
- Collect process data (e.g., number of participants in programs, number offered)
- Discuss with partners and community

**Year 2**
- Continue implementation of programs
- Apply outcomes measures to targeted populations and communities
- Organize and analyze data
- Continue collecting and applying outcomes measurement instruments
- Develop new collaborations
- Discuss findings and feedback with partners and community

**Year 3**
- Continue implementation of programs
- Train community health workers
- Continue collecting and applying outcomes measurements
- Continue collecting quantitative data
- Present 3-year totals and analysis
- Discuss findings and feedback with partners and community
- Present findings/next steps with community
Since 2006, **VOICES 60+ Senior Advocacy Program** works to enhance the medical care experience of low-income, ethnically diverse patients age 60 and older by helping them to navigate and access the support, education, and community resources they need to manage their conditions and improve quality of life.

In its first two years, VOICES 60+ reported more than 9,000 patient contacts. An evaluation of program users demonstrated 93% satisfaction with the program. However, feedback from Spanish speaking program users revealed that the program was less likely to improve communication with their healthcare team. In response, HSS expanded VOICES 60+ to better address healthcare disparities and communication barriers with the older Latino community.

### Program Design

VOICES 60+ Senior Advocacy Program will extend its reach in targeted neighborhoods of the Upper East Side and East Harlem using its broad network of existing partners and new collaborators, including:

- Greenberg Academy on Successful Aging (HSS Division of Education)
- New York Foundation for Senior Citizens
- Lenox Hill Neighborhood Association
- Health Outreach, NewYork Presbyterian Hospital
- East Side Council on the Aging (ESCOTA)
- East Harlem InterAgency Council on Aging

HSS will also continue to link patients with agencies that provide language accessible home care solutions, specifically for Spanish-speaking older adults, such as Senior Health Partners, Senior Companion (Henry Street Settlement), and RAICES (Spanish Speaking Elderly Council).

For the benefit of patients and health care professionals, the expanded program will work with community partners to address two main concerns which impact on medical adherence and outcomes for older adults: 1) **doctor-patient communication** and 2) **falls prevention**. Specific program goals include:

- Educating and raising awareness of ethnically diverse older adults on issues related to communication with their health care providers about arthritis and related needs with specific focus on falls prevention.
- Increasing patient safety and support at home and in social environments by linking older adults with community partners that will provide language and culturally appropriate services.
Working with our collaborators, HSS outreach efforts within the aging population will be put into action by:

- Meeting with leaders of community service providers for older adults
- Identifying mutual program needs and goals that serve an ethnically diverse older population
- Developing curriculums to present to our community partners
- Creating evaluation tools to measure presentation satisfaction
- Collaborating with HSS’s Greenberg Academy to prioritize needs and strategize for target populations.

Through community presentations in senior centers and collaborations with local agencies, VOICES 60+ will assist in reducing health disparities, by providing education and culturally relevant services, with an emphasis on addressing the needs of Spanish speaking older adults.

**VOICES 60+ Senior Advocacy Program Three-year Action Plan**

**Year 1**
- Build on VOICES 60+ current initiatives
- Identify internal and external community partners and healthcare providers
- Pilot referrals to identified service providers
- Define common goals
- Determine number of workshops with partners
  - Review feasibility
  - Identify resources
  - Determine number people who will benefit
- Pilot workshop implementations

**Year 2**
- Make interim changes and incorporate participant feedback
- Continue workshop implementation
- Develop specific metrics to assess
  - Participant satisfaction
  - Demographics and reach
  - Community partner feedback
  - Overall impact

**Year 2 (cont’d)**
- Prepare program evaluations to determine
  - Participant satisfaction
  - Impact of safety and support at home
- Apply outcomes measures to targeted populations and communities
- Collect, organize and analyze data including
  - Patient demographics
  - Reach
  - Satisfaction
  - Behavioral change

**Year 3**
- Continue to implement initiatives
- Reinforce partners’ network
- Continue collecting and conduct analysis of data changes (qualitative/quantitative)
- Discuss findings with community partners and incorporate any necessary
Charla de Lupus (Lupus Chat)®

Charla de Lupus (Lupus Chat)® is a unique national program offering people with lupus and their families health support and education in both English and Spanish. Since its inception in 1994, Charla de Lupus has had approximately 30,000 contacts, reaching New York’s five boroughs and far beyond.

Specially trained peer health educators provide culturally relevant support and education over the phone and in-person at multiple community clinics, helping to empower participants and enhance quality of life for people with lupus and their families. The initiative also involves Spanish media—radio and print—to increase awareness of lupus services.

Program Design

Since the Charla de Lupus program serves predominantly Latino teens (81% female), Hospital for Special Surgery plans to draw upon the participants of this support group to target two specific areas for risk reduction among this population: 1) reproductive health and 2) nutrition. These pilot programs will target the predominantly Latino and African-American neighborhood of Inwood and Washington Heights, which have a 40% higher teen pregnancy rate than the rest of New York City.

HSS will operate the program in collaboration with and onsite at Morgan Stanley Children’s Hospital of NewYork-Presbyterian, Pediatric Rheumatology Service. All activities will be coordinated and facilitated by HSS Charla de Lupus staff.

The program will be developed based on feedback from Charla de Lupus chat group participants and community partnerships. In addition, the Charla de Lupus program will collaborate with the HSS Education Division’s SNEAKER program to promote awareness of healthier food choices and physical activity through culturally sensitive education for Latina lupus patients and their families.

Specific program goals include:

- Increase routine health care, including gynecological visits, among Latina teenage women with lupus
- Promote awareness of improved nutrition through culturally relevant educational interventions

These interventions will help to enhance teen-family-health communication among Hispanics and improve patient management of lupus and its multiple impacts.
CHARLA DE LUPUS (LUPUS CHAT)®
THREE-YEAR ACTION PLAN

Year 1
• Solidify external community partnerships and internal supports
• Define the problem, common goals, and roles
• Identify gaps and finalize collaboration framework
• Undertake needs assessment through targeted outreach with lupus teens

Year 2
• Develop specific bilingual outcomes measurements, reflect participant satisfaction, knowledge and behavior change
• Tailor SNEAKER® bilingual information and assets/tools as needed
• Implement interventions and outcomes measures
• Prepare program evaluations
• Collect and analyze data
• Discuss with community and obtain feedback

Year 3
• Implement programs
• Continue gathering and applying outcomes measurements
• Continue collecting quantitative data
• Analyze and present data
• Discuss with partners
• Share findings with community
LANtern® (Lupus Asian Network)

LANtern (Lupus Asian Network) is the only national program with a telephone Support Line designed for Asian Americans with lupus. The program specifically reaches out to the Chinese community, the largest ethnic subgroup in New York City. LANtern’s specially trained volunteers—who have lupus themselves—are bilingual in English and either Cantonese or Mandarin.

LANtern’s influence extends from New York City’s Chinatown to national audiences. Since its inception in 2003, the number of contacts with individuals with lupus and their families has exceeded 4,700, including participation in over 40 conferences and community events. Nationally and internationally, LANtern has also distributed more than 6,000 copies of its Chinese-language publications: Lupus Myths & Facts and Talking about Lupus; What Chinese-Americans and their Families Should Know About Lupus; For Inquiring Teens with Lupus: Our Thoughts Issues & Concerns.

Health care providers and hospitals, multi-service agencies, professional and advocacy groups play a key role in raising awareness of lupus among the Asian American population. LANtern reaches the Asian American community through a multi-stake holder Community Advisory Board, which includes the Charles B. Wang Community Health Center, NYU Langone’s Center for the Study of Asian American Health, The SLE Lupus Foundation, the New York Downtown Hospital’s Chinese Community Partnership for Health, and NYU Hospital for Joint Diseases.

Program Design

With a focus on building capacity and increasing awareness, LANtern’s new program initiatives will not only benefit New York’s Asian American communities, but also work closely with national organizations to establish mutually beneficial healthcare priorities.

HSS plans to further expand and strengthen the program’s extensive community-based and national network by forging relationships with community organizations such as:

- Gouverneur Health Services
- Charles B. Wang Community Health Center’s Women’s Health Department
- New York Downtown Hospital’s Chinese Community Partnership for Health
- New York Chinese American Association
- Asian Health and Social Services Council
- Asian American Federation of New York
- DHHS’ Office of Women’s Health National Lupus Awareness Campaign

Specific LANtern program goals include:

- Increase awareness of lupus as an important Asian American health concern through established local, state, and national collaborations.
• Develop and implement an ongoing communication vehicle to promote and sustain lupus awareness as well as to enhance opportunities for early identification, diagnosis and treatment among Asian Americans.

With the help of HSS collaborators, LANtern will expand its new initiatives by:

• Building on LANtern experience and participant base.
• Identifying service, information gaps, and needs.
• Partnering with organizations for their comparative advantage, aligned goals, and added value.
• Developing a cooperative framework and communication strategy.
• Reviewing information needs and accessibility.
• Determining program entry points, vehicles and settings.

Planned communication activities include the development of a LANtern network e-newsletter or related tool, in addition to wellness events and other lupus education forums that target the Asian American community.

LANtern® (Lupus Asian Network) Three-year Action Plan

Year 1

• Identify and initiate partnerships with 5-7 strategically selected organizations
• Solidify external community partnerships and internal supports
• Develop a tool, with partners, for planning and evaluating partnership results and impact
• Define common goals, outcomes and roles
• Identify gaps and finalize collaborative framework
• Disseminate program information

Year 2

• Develop communications strategy to promote best practices and vehicles
• Design, test and issue first LANtern Network e-newsletter or related tool
• Implement a collaborative LANtern activity (e.g., lupus wellness event)
• Apply tracking and evaluation tool
• Collect and analyze data
• Discuss results with partners and community

Year 3

• Issue second LANtern e-newsletter or related tool
• Plan results-based collaborative activities
• Continue applying tracking and evaluation tool
• Collect data
• Assess network results
• Present findings with partners and community
MORE COMMUNITY PROGRAMS

Hospital for Special Surgery offers more free support and education programs in its specialty area of orthopedics and rheumatology than any other hospital in the country. Our mission is to support, empower, and enhance the quality of life for patients and their caregivers dealing with issues in mobility.

HSS programs specifically seek to provide needed resources and reduce barriers to access in culturally diverse communities. We reach these goals through a strategic, comprehensive, and innovative approach to psychosocial support, education, and advocacy. Our trusted expertise and passionate leadership are demonstrated every day, on a local, national, and international level.

For a complete listing of outreach programs and services for the public, HSS invites you to visit Programs for the Community.

FINANCIAL ASSISTANCE

Hospital for Special Surgery is proud of its commitment to provide financial assistance for qualifying individuals and to ensure that the program is well-known and communicated in the preferred language of our patients.

Contributors to the success of the financial aid program include visibility, such as Hospital-wide signage in two languages and notices in patient bills, as well as the creation of a dedicated team to work exclusively with patients to understand the complexities and options for their situation. A Notice of Financial Assistance is also available for patients on HSS.edu, including a comprehensive review of the eligibility, application, and notification process for aid.

In response to the economic disparities within our patient populations, HSS extended its financial aid program beyond the state mandated levels of 300% to 500% of patients who are at or below the federal poverty level. Hospital policy is also to consider a patient’s insurance co-pay, deductible, and co-insurance potentially eligible for discount. These factors are important considering the rising uninsured population and rising out of pocket expenses for those with insurance.

VOICES Medicaid Managed Care Education

In order to help patients best understand their rights and responsibilities under Medicaid Managed Care, HSS implemented VOICES Medicaid Managed Care Education — a Hospital-based service through the Department of Social Work Programs that assists patients with navigating the complexities of public insurance programs while also helping people to obtain and maintain access to our specialty care.

The specific focus of the program is to help patients understand and negotiate their options under Medicaid managed care. Services also provide information, referral and advocacy regarding other options for broader health care needs and interventions. Program staff are bilingual (Spanish), and interpretation in the patients’ preferred language is available through our Language Services Department.