



**Washington
Association for
Community Health**
Community Health Centers
Advancing Quality Care for All



Fall Workshop For FQHCs' Community Health Workers

Mon., Nov. 18, 2019
Hilltop Regional Health Center, Tacoma

ABOUT US

The Washington Association for Community Health helps our state's community health centers expand their reach and improve the health of the more than 1 million low-income people they serve.

At The Association, we're passionate about the work of our members to ensure that everyone —regardless of income—can access quality health care.

MISSION

Our Mission: To strengthen and advocate for Washington's Community Health Centers as they build healthcare access, innovation and value.

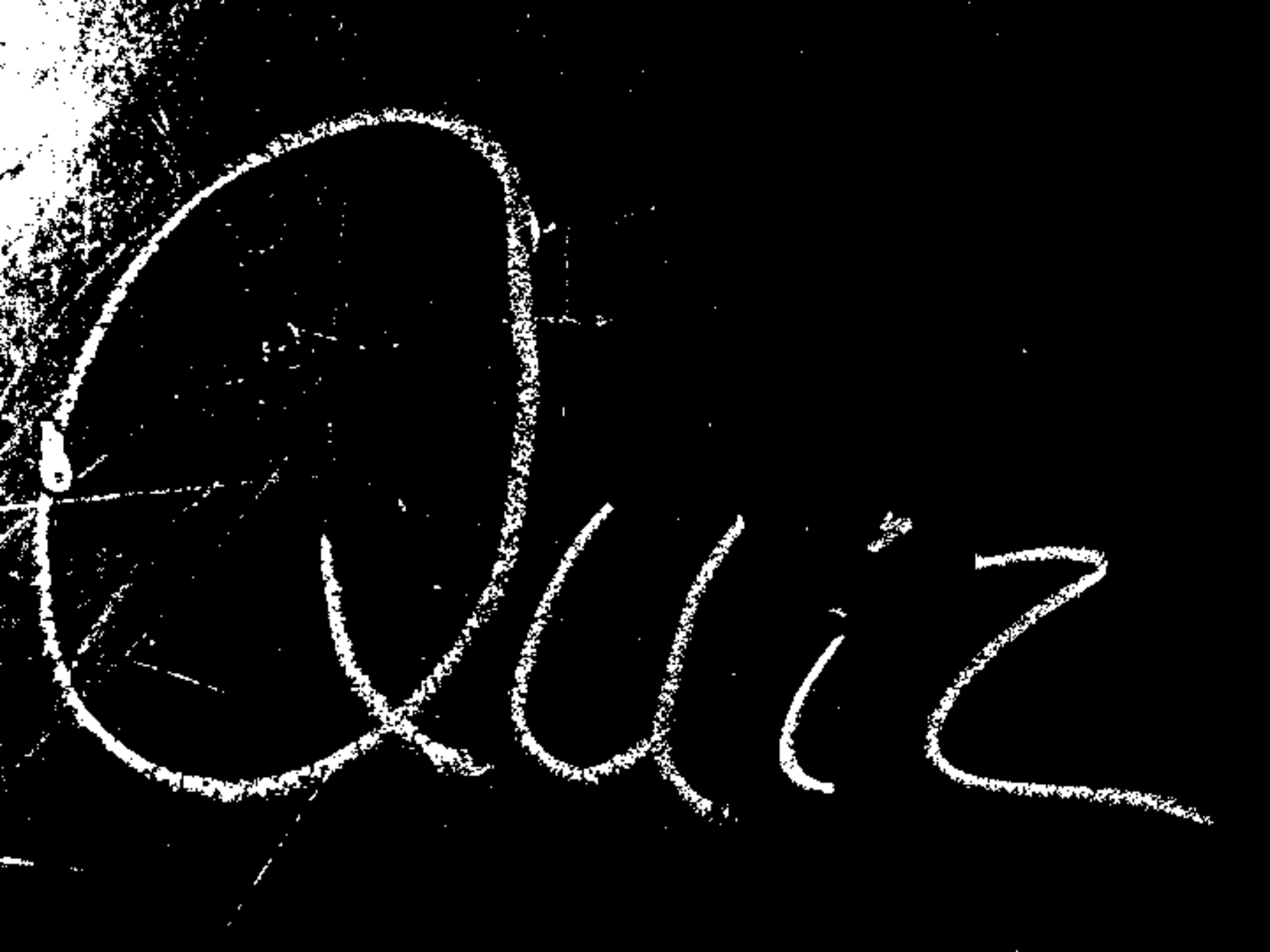
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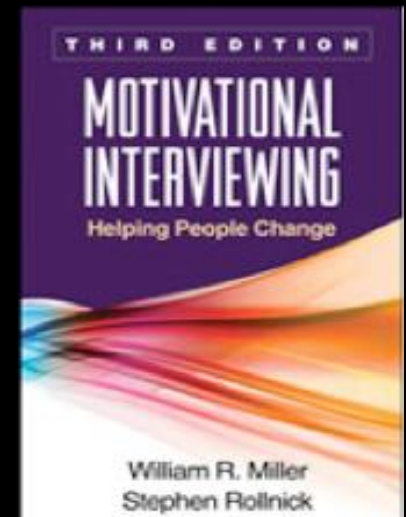
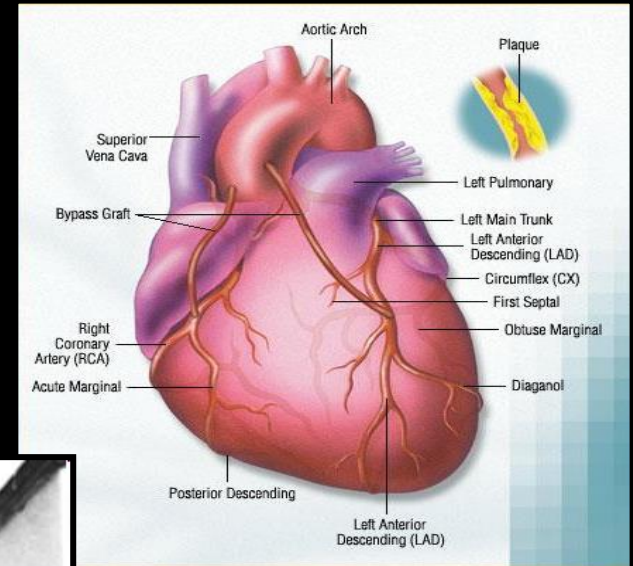
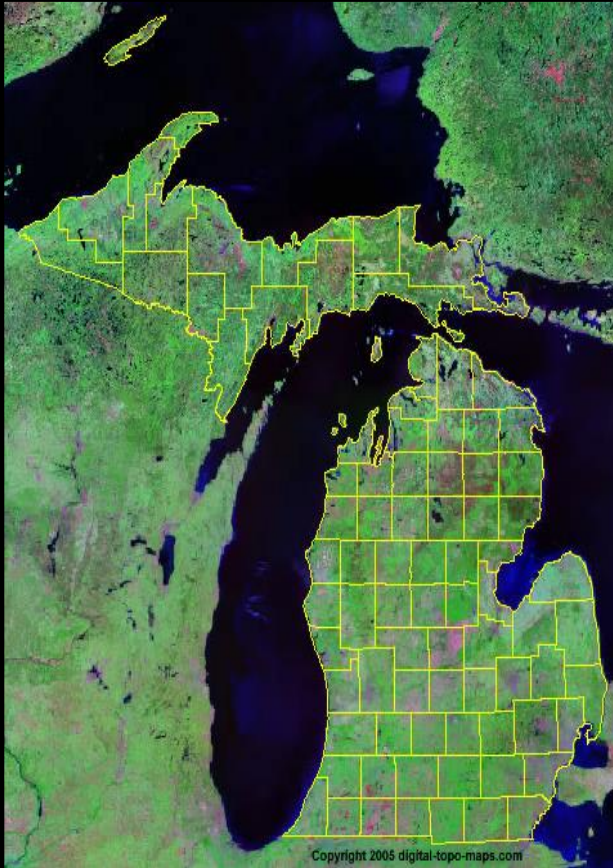


Building skills in **MOTIVATIONAL INTERVIEWING**

Helping people change



Is this MI?



Video Demo

How NOT to do Motivational Interviewing in Dental Practice Addressing Tobacco Use

<https://www.youtube.com/watch?v=SytVckoox4U>

How NOT to do Motivational Interviewing in Dental Practice Addressing Tobacco Use

What are her hopes for the patient?

What are her methods?

What is the outcome?

What was less than helpful?

Motivational Interviewing in Dental Practice Addressing Tobacco Use

<https://www.youtube.com/watch?v=rFLrDvUexC8>

Motivational Interviewing in Dental Practice Addressing Tobacco Use

What are her hopes for the patient?

What are her methods?

What is the outcome?

What was helpful?

MI is...

Your hopes?

Your methods?

A blurred photograph of two women in a room. The woman on the left is wearing a purple top and has long dark hair. The woman on the right is wearing a dark top and has dark hair. The background is out of focus, showing what appears to be a doorway or a wall. The text "A personal taste of MI" is overlaid in white, sans-serif font across the center of the image.

A personal taste of MI

A blurred background image showing a group of people in a meeting or discussion. The focus is on the text in the foreground.

Dilemma/concern?

If no change, what (if anything) would be at stake?

If change, your reasons?


If change, how to be successful?

How important?

How confident you *could* change?

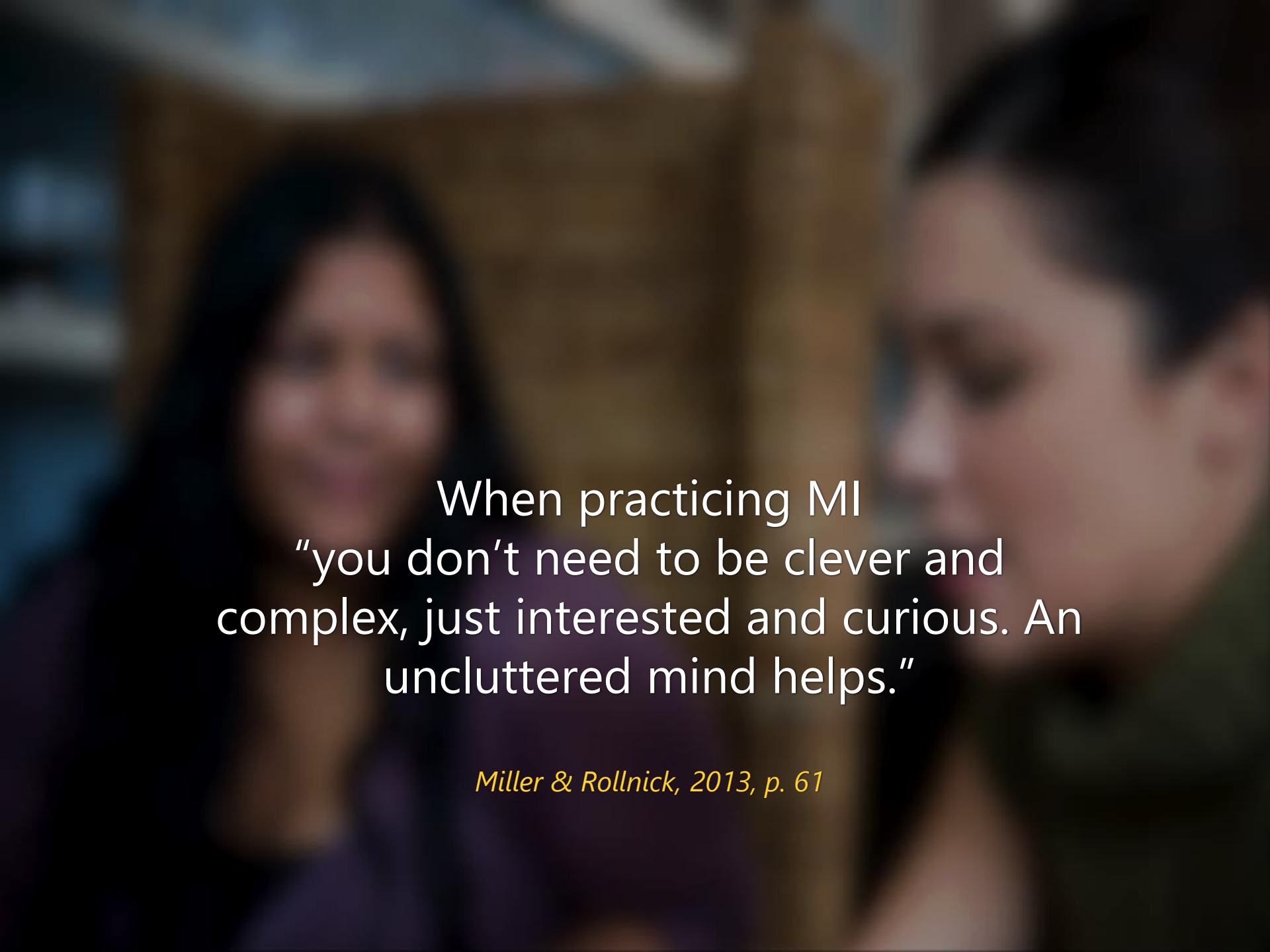
If change, who/what could help?

If change, next step(s)?

The background of the slide is a blurred photograph of a group of people, likely in a meeting or workshop setting. The focus is on the text in the center, with the background showing indistinct shapes and colors of clothing and hair.

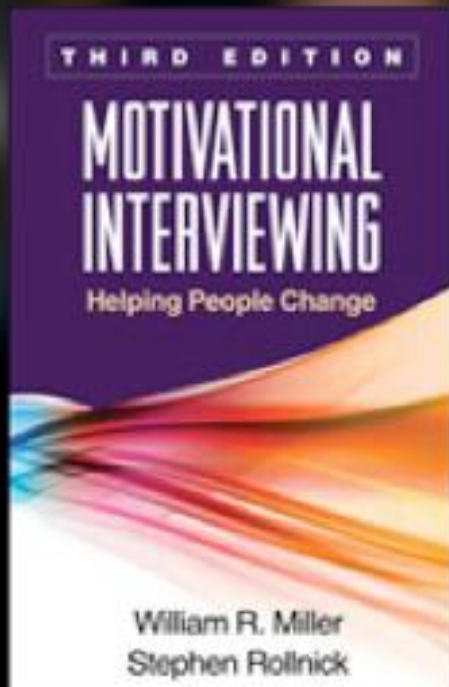
MI is about facing forward...
coming alongside someone and facing
the person's future together

Stephen Rollnick

A blurred background image showing two people, likely a man and a woman, smiling and looking towards the camera. The image is out of focus, with soft colors and a warm, positive atmosphere.

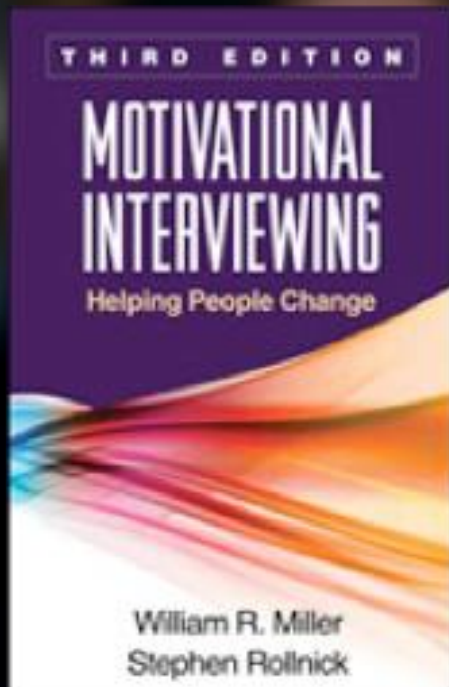
When practicing MI
"you don't need to be clever and
complex, just interested and curious. An
uncluttered mind helps."

Miller & Rollnick, 2013, p. 61



A collaborative conversation style for strengthening a person's own motivation and commitment to change.

Lay definition



A person-centered counseling style for addressing the common problem of *ambivalence* about change.

Practitioner's definition



**WHEN YOU KINDA
WANNA JUST DO IT
BUT NOT REALLY**



A blurred background image showing a group of people, possibly in a meeting or workshop setting. The focus is on the text overlaid on the image.

Or...

**A way of helping
people talk
themselves into
changing**

“Talking oneself into changing”

Explore concerns, ambivalence, values, hopes, goals, strengths



Preparatory change talk



Commitment talk



Taking steps



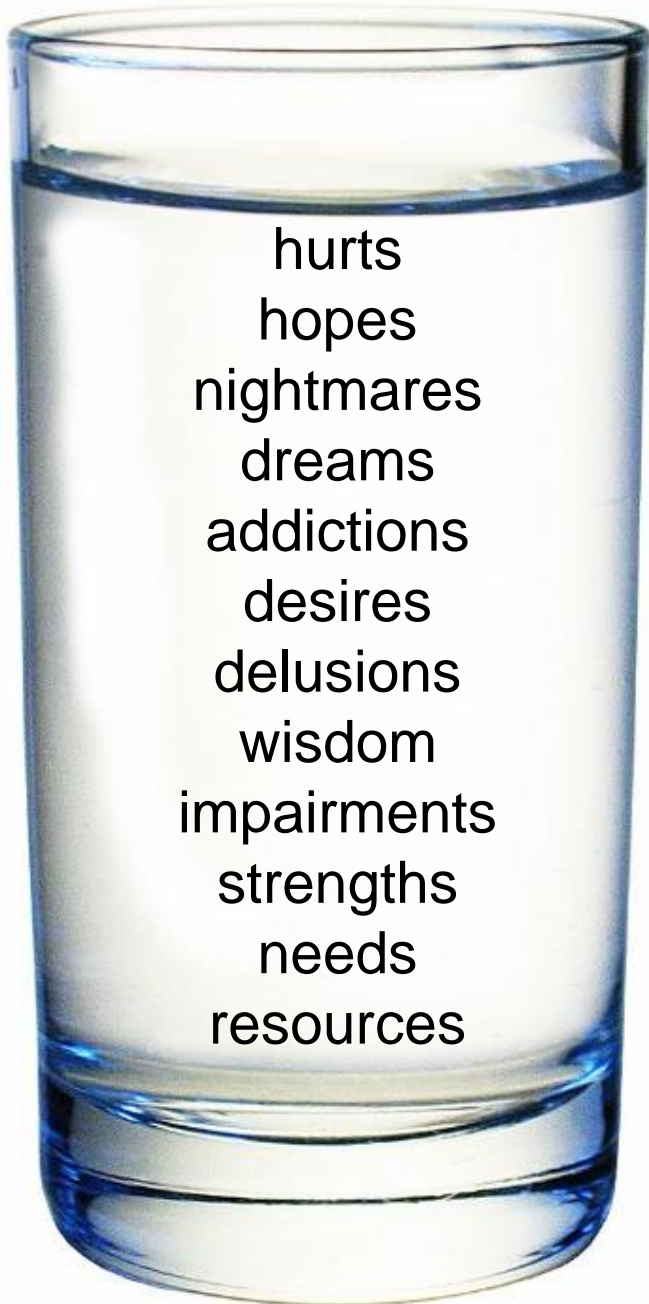




“If you change the way you look at things, the things you look at change.”


Wayne Dyer






hurts
hopes
nightmares
dreams
addictions
desires
delusions
wisdom
impairments
strengths
needs
resources

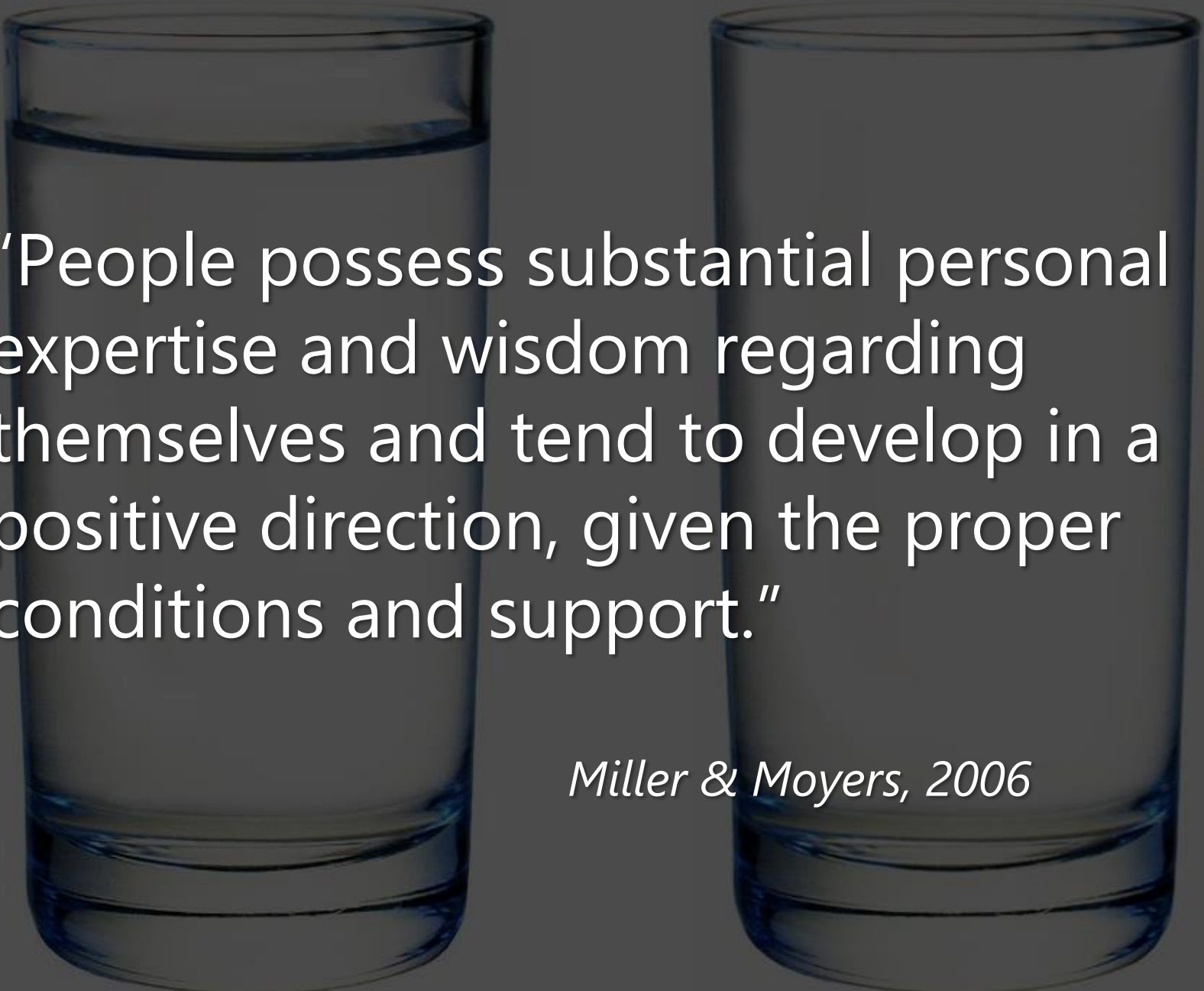




Evoking
from people
what they
already
have?

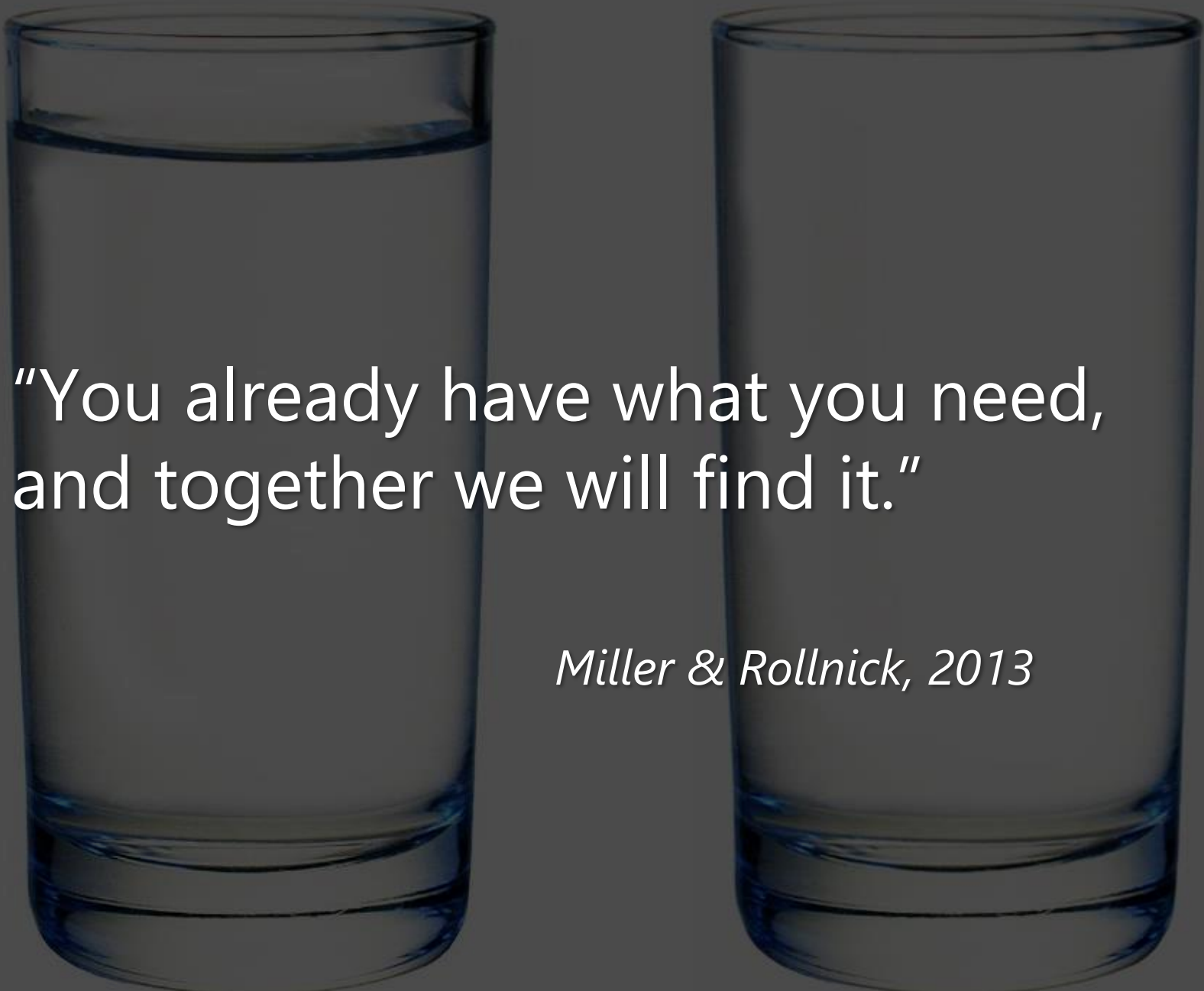


Giving
people
what they
lack?

Two clear glass tumblers filled with water are positioned on either side of the text. The glass on the left is filled with water up to about the 75% mark, while the glass on the right is empty. The background is a dark, solid color.

“People possess substantial personal expertise and wisdom regarding themselves and tend to develop in a positive direction, given the proper conditions and support.”

Miller & Moyers, 2006



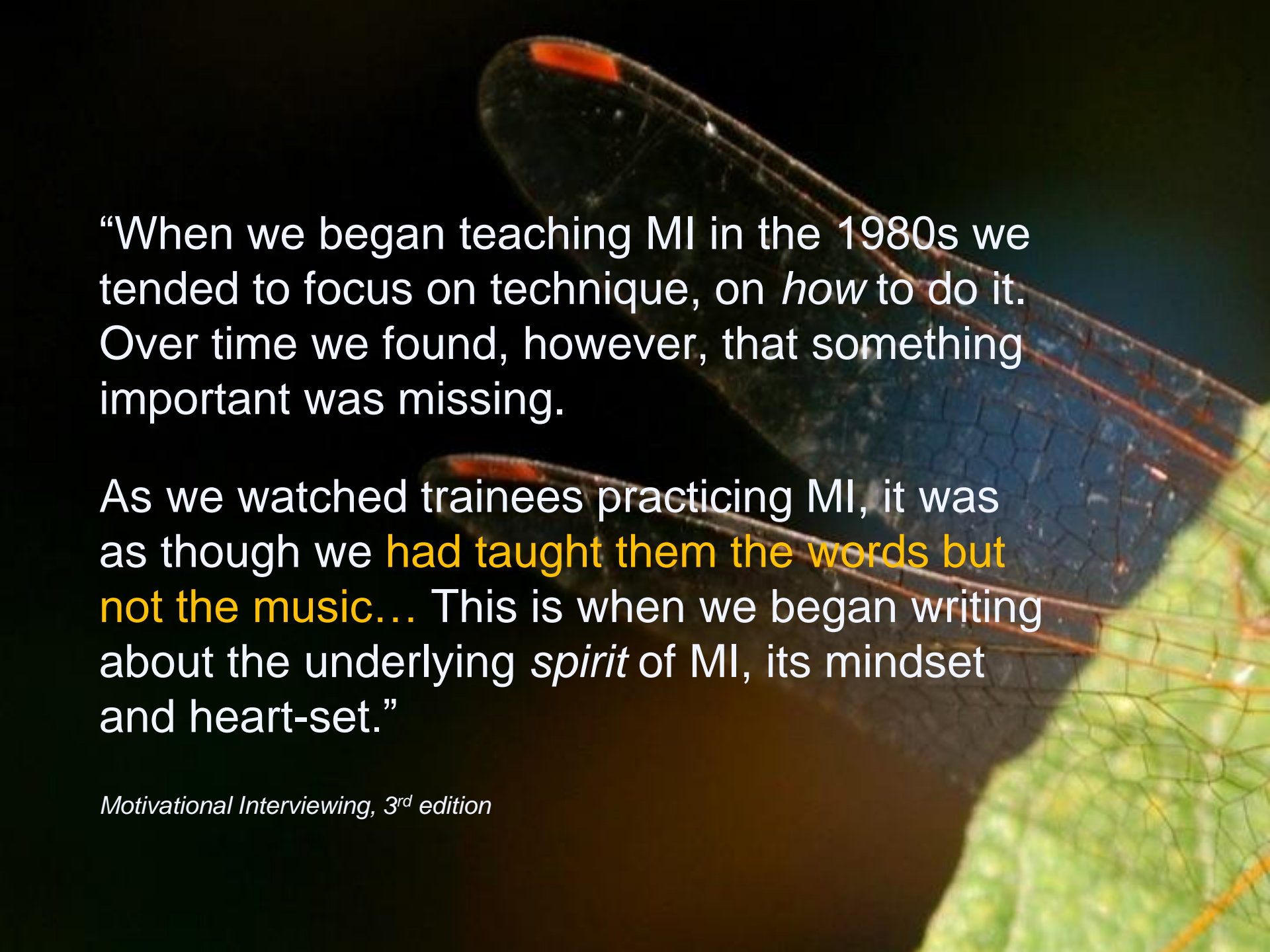
"You already have what you need,
and together we will find it."

Miller & Rollnick, 2013

A close-up photograph of a dragonfly's wings, showing the intricate network of veins. The wings are dark, almost black, with a prominent reddish-brown vein running through them. The dragonfly is perched on a bright green leaf, which is visible in the lower right corner. The background is dark and out of focus.

The spirit of MI

A mind-set and heart-set



“When we began teaching MI in the 1980s we tended to focus on technique, on *how* to do it. Over time we found, however, that something important was missing.

As we watched trainees practicing MI, it was as though we **had taught them the words but not the music...** This is when we began writing about the underlying *spirit* of MI, its mindset and heart-set.”

A close-up photograph of a dragonfly's abdomen and wings. The abdomen is dark and segmented, with a small red spot near the tip. The wings are transparent with a complex network of veins. The background is dark, and a green leaf is visible in the lower right corner.

Elements of MI spirit

Partnership

Acceptance

Compassion

Evocation

PARTNERSHIP – a collaboration;
demonstrating profound respect for the
person; both parties have expertise;
dancing rather than wrestling; best
practices are not done *on* or *to* people, but
with and *for* them

What partnership looks like...



A close-up photograph of a dragonfly's wing, showing the intricate network of veins. The wing is dark, almost black, with a prominent reddish-brown spot near the base. In the background, a vibrant green leaf is visible, partially obscured by the wing. The overall lighting is soft, highlighting the texture of the wing and the leaf.

What partnership sounds like...

Would it be all right if we took a look at...?

How do you feel about...?

What is your understanding of...?

I look forward to working together...

How can I support you in this process?

ACCEPTANCE

Prizing person's inherent worth and potential

Providing accurate empathy

Supporting autonomy

Affirming strengths

What acceptance sounds like...

Prizing person's inherent worth and potential

You are welcome here just as you are.

“There’s nothing about a caterpillar...”

What would you like to be different?

In looking ahead at your life...



What acceptance sounds like...

Providing accurate empathy

It sounds like a complicated situation.

You're feeling hurt and confused.

Part of you wants to cut back and part of you isn't sure you could cut back.

You're hoping for a better result this time.



Empathy: The Human Connection to Patient Care

https://www.youtube.com/watch?v=cDDWvj_q-o8

What acceptance sounds like...

Supporting autonomy

You know what is best for you.

You like to weigh things carefully before making any changes.

This is a decision only you can make.


What acceptance sounds like...

Affirming strengths


You showed a lot of courage in the way...

That took a lot of patience to...

You're the kind of person who values loyalty.

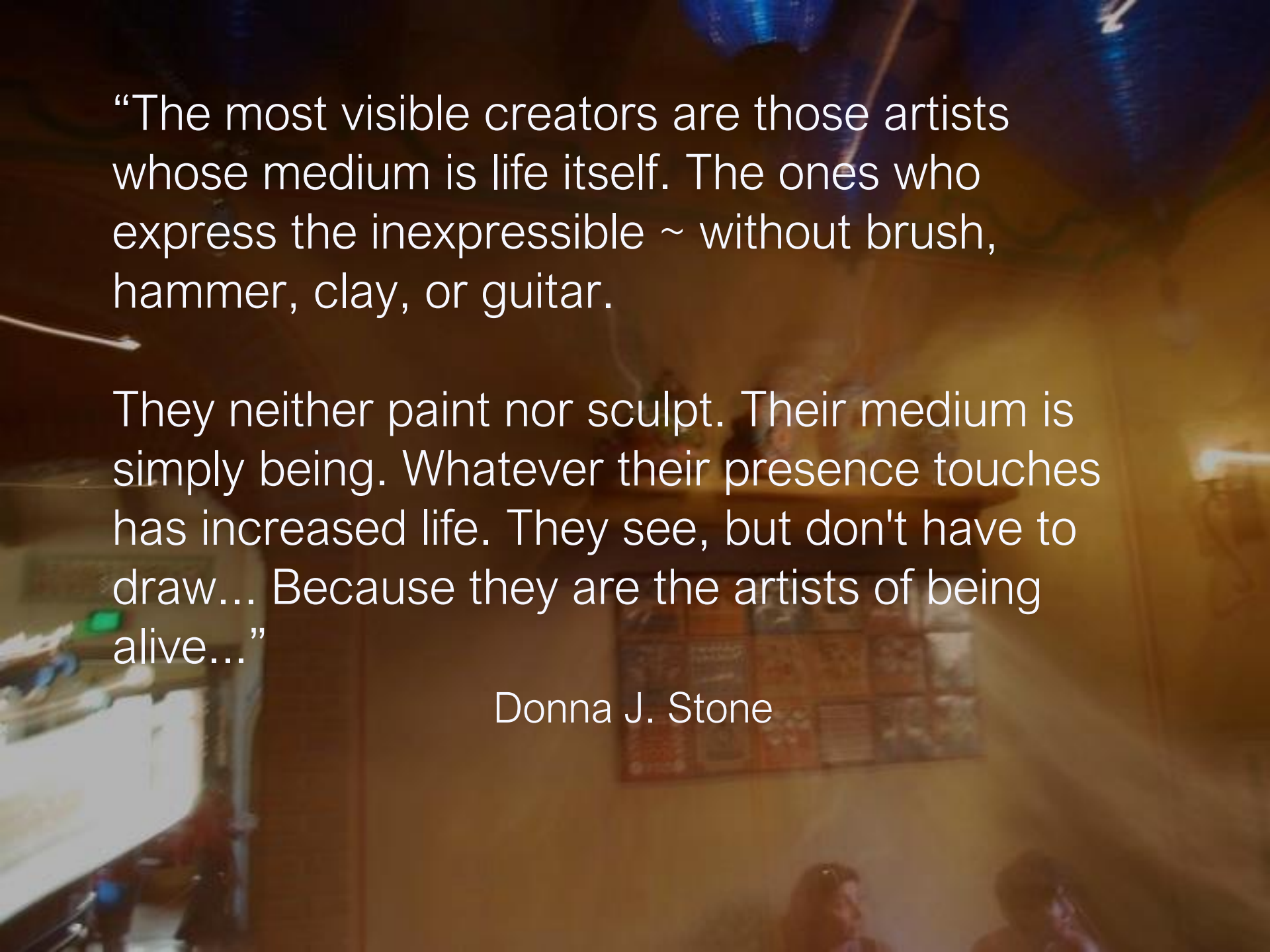
A dimly lit room with blue balloons hanging from the ceiling. A bulletin board with various papers is mounted on the wall. The text is overlaid on the image.

COMPASSION - coming alongside someone in their suffering; actively promoting the other's welfare; giving priority to the person's needs

A dimly lit room with blue balloons hanging from the ceiling. In the background, there is a wooden shelf with some items on it, and a wall panel with a grid of small, colorful images or photos. The overall atmosphere is warm and intimate.

“Here is what we seek: a compassion that can stand in awe at what (people) have to carry rather than stand in judgment about how they carry it.”

Fr. Greg Boyle, Tattoos on the Heart

A dimly lit room with a blue balloon hanging from the ceiling. A poster is visible on the wall. The text is overlaid on the image.

“The most visible creators are those artists whose medium is life itself. The ones who express the inexpressible ~ without brush, hammer, clay, or guitar.

They neither paint nor sculpt. Their medium is simply being. Whatever their presence touches has increased life. They see, but don't have to draw... Because they are the artists of being alive...”

Donna J. Stone

What compassion sounds like...

[no words at all]

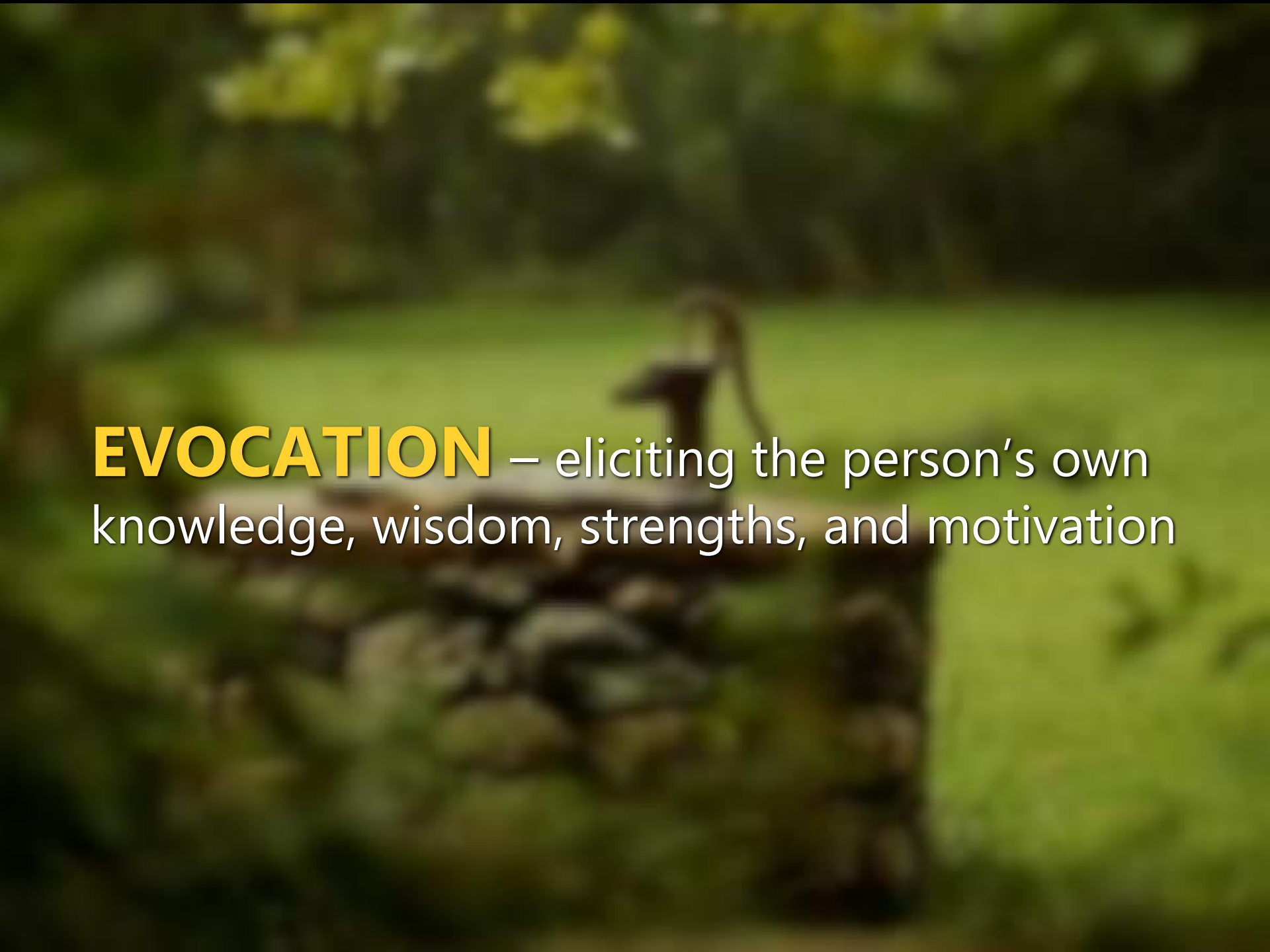
I'm so sorry...

May I just sit here/stay with you for awhile?

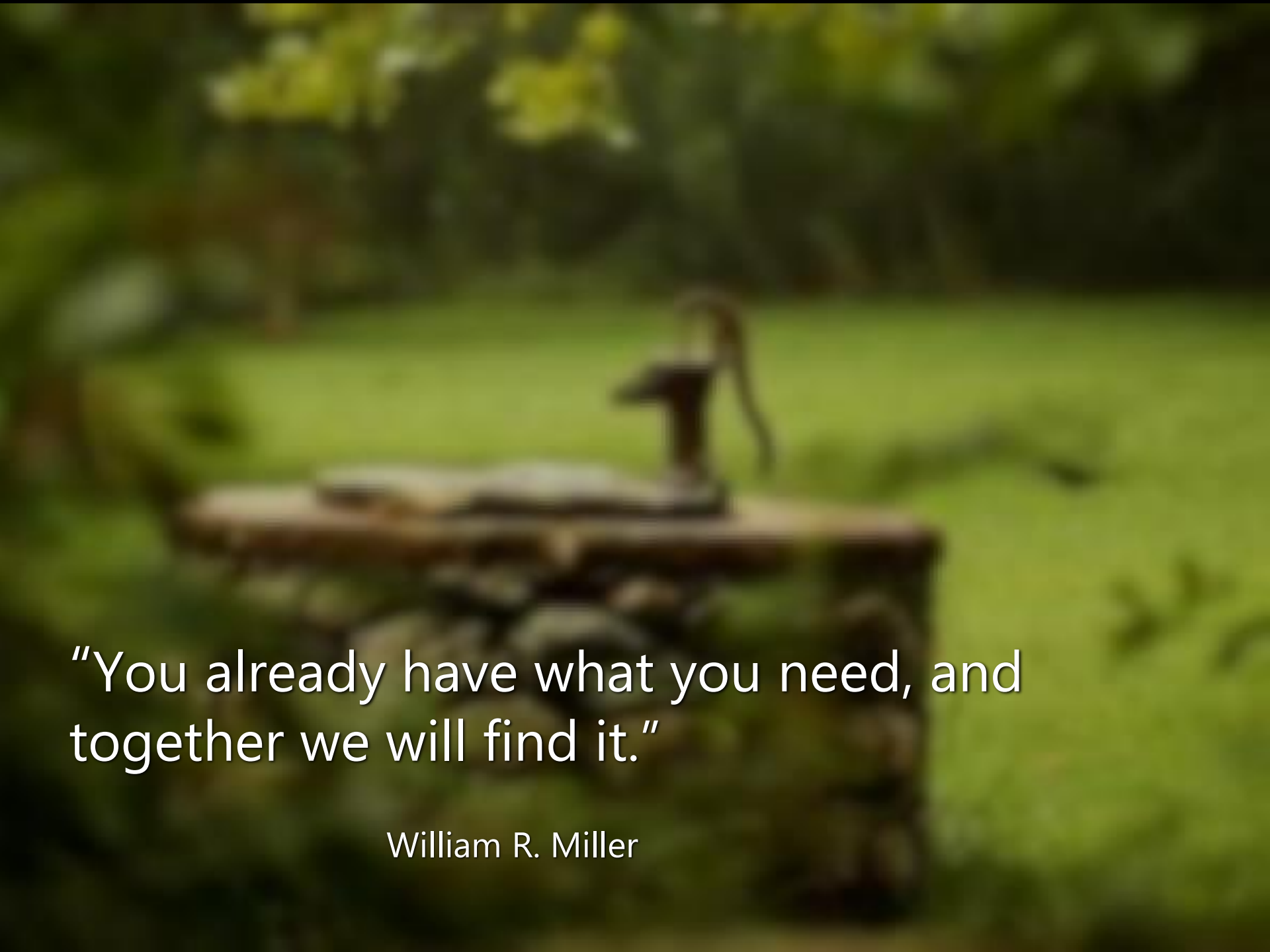
I brought you some soup...

Is it all right if I call you...?

What would be most helpful to you...?



EVOCAATION – eliciting the person's own knowledge, wisdom, strengths, and motivation

A blurry background image showing a person standing on a wooden platform or stage in a green field. The person is wearing a dark shirt and light-colored pants, and appears to be gesturing or speaking. The background is filled with green foliage and trees, creating a soft, out-of-focus effect.

“You already have what you need, and together we will find it.”

William R. Miller

What evocation sounds like...

What would you like me to know about yourself?

Tell me about...

What concerns, if any, do you have about...?

It sounds like you'd like things to be different in your life.

If you were to change, what would be your reasons to do so?

A blurred background image of a woman's face, looking slightly to the right. The image is out of focus, with soft colors and a warm tone.

Partnership

Acceptance

Compassion

Evocation

Four processes



4 Processes of MI



Demo



Common responses to being listened to

Safe

Feel understood

Want to talk more

Like the counselor

Accepted

Respected

Engaged

Empowered

Hopeful

Comfortable

Collaborative

Interested

Open to change

Want to come back

Key ideas

The helping relationship takes the form of a partnership, not an expert-recipient stance

Acceptance and compassion are at the heart of the conversation

Motivation to change is elicited from individuals, not imposed on them from without

Key ideas

Direct persuasion is not effective to resolve ambivalence or promote change

The worker uses primarily a guiding style

It is the task of the client to resolve their own ambivalence and come up with the reasons for change

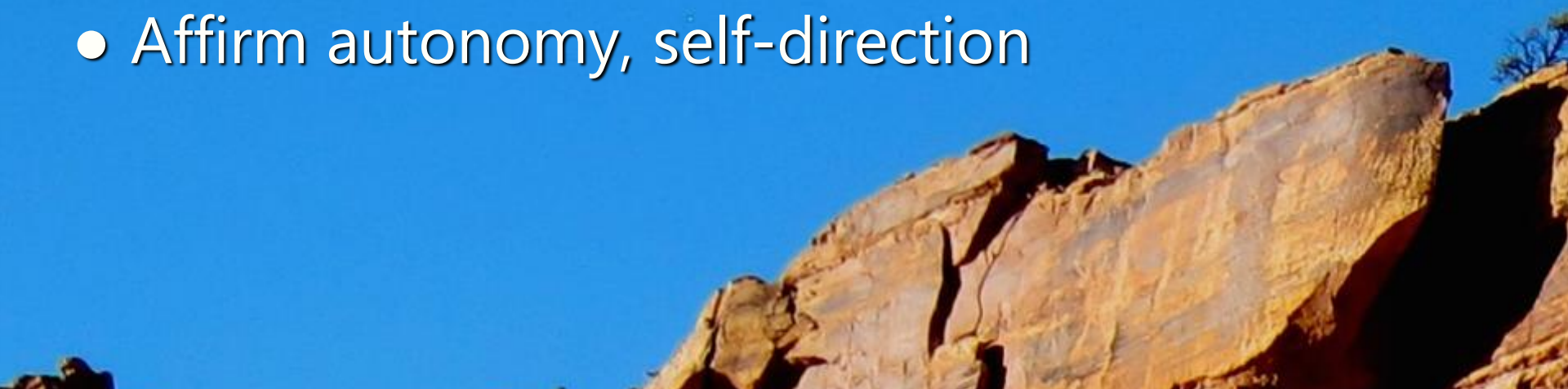
OARS:

MI Core Conversational Skills



Open Questions

- Gather information (vs. facts)
- Create open, non-judgmental tone
- Demonstrate genuine interest, respect
- Invite reflection and elaboration
- Affirm autonomy, self-direction



Closed Questions

- Invite brief, limited responses
- Useful to get basic facts
- Keep conversation superficial
- Focus on what interviewer wants to know
- Feel interrogative when used repeatedly



Closed questions sound like...

Do/did you...?

Have/has there...?

Are/is there...?

How many...?

How often...?

Could/can we...?

Will/would you...?

Were you...?

When did...?



Open questions sound like...

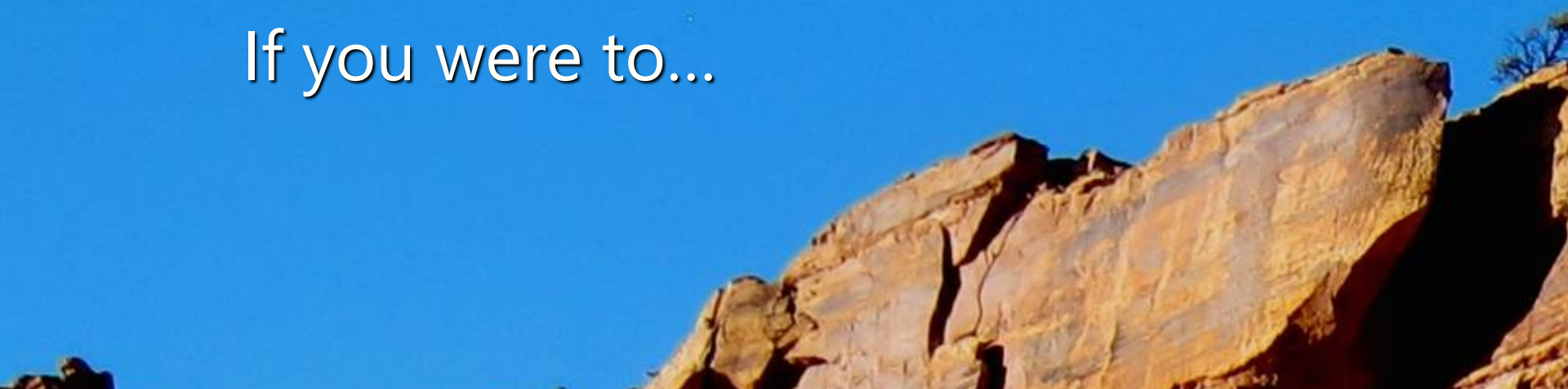
Tell me...

What...

How...

Why...

If you were to...



Open or Closed?

Of the things you just mentioned, what concerns you most right now?

Don't you think it would help if you talked with your doctor before stopping your meds?

What do you already know about safer sex practices?

What changes, if any, are you thinking of making related to managing your diabetes?

You're going to keep your appointment, right?

How's it going? Did you make it to the clinic?

A photograph of a natural rock archway in a desert landscape. The arch is made of reddish-brown sandstone and frames a view of a vast, hazy desert valley with distant mountains under a clear blue sky. The foreground shows more rugged rock formations and some sparse green vegetation.

**Open or closed:
What difference
does it make?**

Exploratory open questions sound like...

What would you like me to know about yourself?

What would you like to know about my role here?

What's most important to you in your life right now?

What are you most interested in focusing on today?

What concerns, if any, do you have about taking time off to go see the doctor?

How do you know when your diabetes is and is not well controlled?

What does meth do for you? What are the downsides?

Exploratory open questions sound like...

What will you lose if you give up drinking?

What's at stake if you don't change?

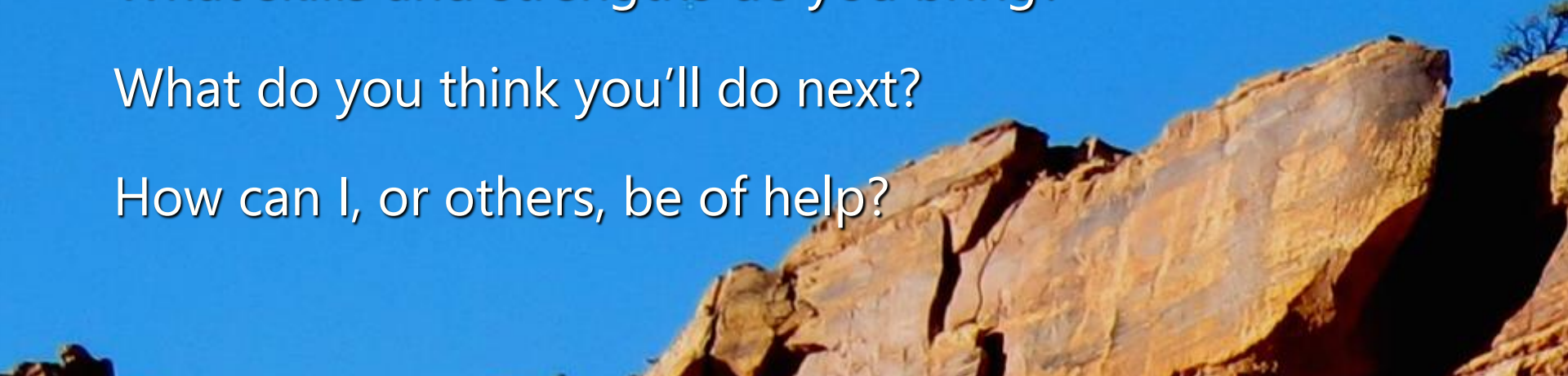
If you were to eat healthier foods, what would be your reasons to do that? Your best reason?

What ideas do you have to succeed in meeting your goal?

What skills and strengths do you bring?

What do you think you'll do next?

How can I, or others, be of help?



Guidelines: Open Questions

Ask open questions to **deepen** the conversation.

Use open questions to **guide** the conversation.

Ask **more open** questions than closed ones.

Keep questions **clear and brief**?

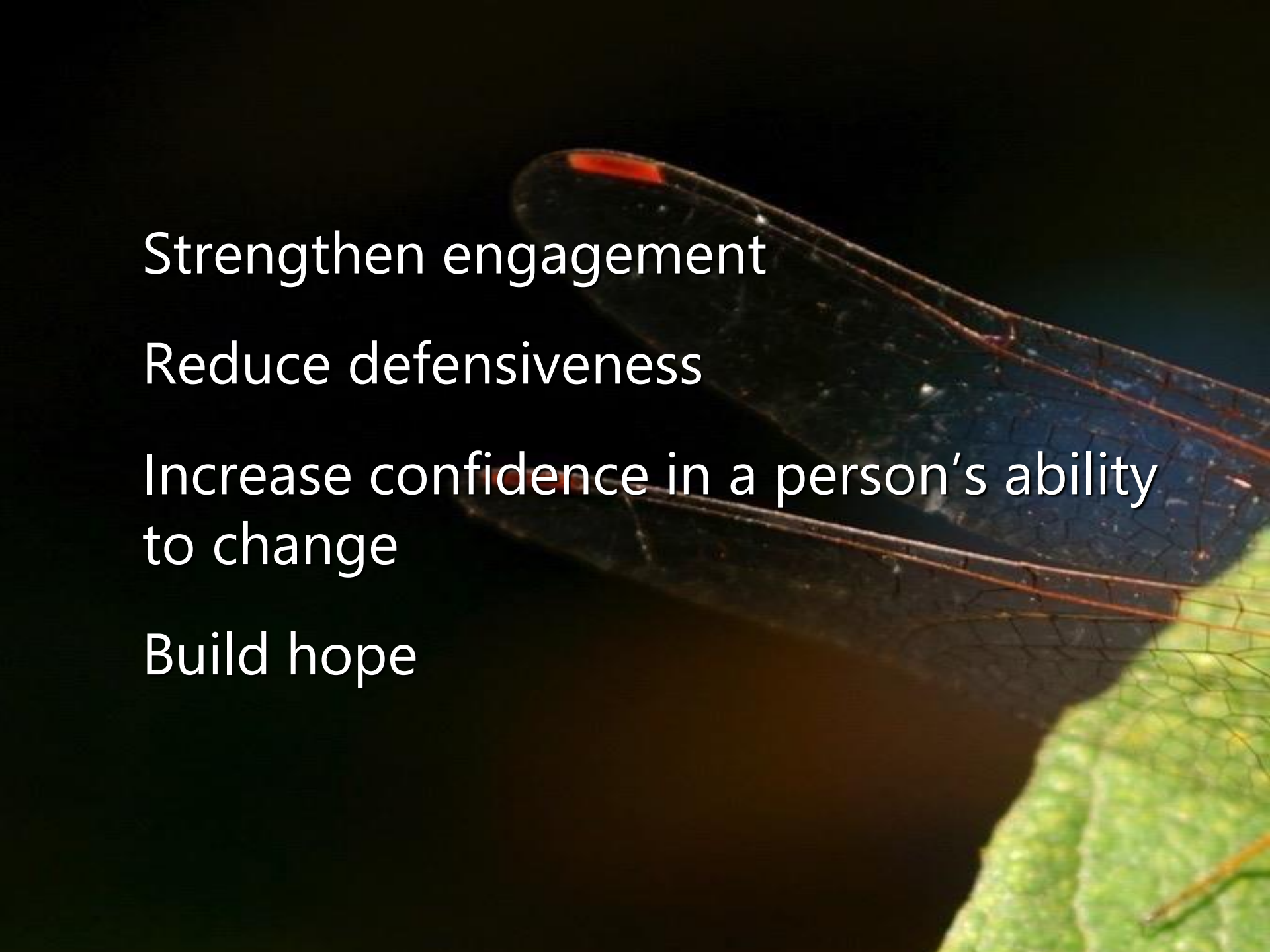
Avoid negating open questions with closed ones –
e.g., "What are your thoughts about that? For example,
do you think that...?"

Affirmations





**What are affirmations
good for?**



Strengthen engagement

Reduce defensiveness

Increase confidence in a person's ability
to change

Build hope

Affirmations



Shine a light on the good stuff

Must be genuine

Different from praise – *“I am so proud of you...”*

Can be positive judgments – *“It’s wonderful the way you...”*

Impact statements – *“I was in awe of how you...”*

Observational statements – *“You showed a lot of restraint...”*

Sound like...

You are very skillful at...

I noticed that you...

You showed a lot of patience...

You are a courageous person...

You really value...

You are very knowledgeable about...

That took a lot of persistence to...

Thank you for...



Activity

A close-up photograph of a hand holding a lit cigarette. The hand is positioned in the center-right of the frame, with the fingers gripping the cigarette. The cigarette is lit, with a small flame and a wisp of smoke visible at the tip. The background is a dark, solid color, possibly black or dark blue, which makes the hand and the cigarette stand out. The lighting is soft, highlighting the texture of the skin and the paper of the cigarette.

Trudy smokes two packs of cigarettes a day.

A close-up photograph of a hand holding a lit cigarette. The hand is positioned in the center-right of the frame, with the fingers gripping the cigarette. The cigarette is lit, with a small flame and a wisp of smoke. The background is dark and out of focus, emphasizing the hand and the cigarette. The overall mood is contemplative and somewhat somber.

Activity

Trudy smokes two packs of cigarettes a day. She knows it isn't good for her and is fed up with people reminding her of it. At some point, she will stop, but just not yet. With everything else going on in her life, this is one area she feels is her own.

Adapted from Building MI Skills , 2nd edition

Trudy's strengths include...

Trudy smokes two packs of cigarettes a day. She knows it isn't good for her and is fed up with people reminding her of it. At some point, she will stop, but just not yet. With everything else going on in her life, this is one area she feels is her own.

Examples



You're clear about what you want/need.

You have clear boundaries.

You know your mind.

You know what your priorities are.

You don't let others easily influence you.

You're aware of the benefits and negatives of smoking.

You have a plan to stop smoking.

Reflective Listening



“What people
really need is a
good listening
to.”

Mary Lou Casey



<https://www.youtube.com/watch?v=P3JUXQ4kkHs>



reflection (n.)

late 14c., in reference to surfaces, from Late Latin reflexionem (nominative reflexio) "a reflection," literally **"a bending back,"** noun of action from past participle stem of Latin reflectere, from re- "back" (see [re-](#)) + flectere "to bend" (see [flexible](#)). Meaning **"remark made after turning back one's thought on some subject"** is from 1650s.



Activity



Common sentence stems

It sounds like...

As I listen to you, it seems...

For you...

You're wondering if...

You're concerned...

So you feel...

It's really important to you...

You're hoping...

You...





Change Talk in MI



**“Change talk predicts
behavioral change”**

Miller & Rose. Toward a Theory of MI



Recognizing **Change** **Talk**

Client Speech

Neutral talk is “other talk”

Sustain talk favors the status quo, not changing (different from resistance)

Change talk favors movement in the direction of change

Change Talk: **DARN-CAT**

Preparatory change talk

- **D**esire to change (I want, like, wish)
- **A**bility to change (I can, could)
- **R**easons to change (if...then)
- **N**eed to change (I have to, got to)

Mobilizing change talk

- **C**ommitment (I will, I promise)
- **A**ctivation (I'm willing, am ready to)
- **T**aking steps (I made an appointment)

Change talk sounds like...

Focus: Getting in better shape

D: I'd like to feel more fit

A: I could probably jog or swim

R: If I exercised more, I'd feel a lot better

N: I've got to get off this couch and do something

C: I plan to bicycle more, and drive less

A: I'm ready to get started tomorrow

T: Yesterday, I took a 15 minute walk after lunch

Activity: **DARN-CAT**

Focus: _____

Preparatory change talk

- **D**esire to change (I want, like, wish)
- **A**bility to change (I can, could)
- **R**easons to change (if...then)
- **N**eed to change (I have to, got to)

Mobilizing change talk

- **C**ommitment (I will, I promised myself...)
- **A**ctivation (I'm willing, am ready to)
- **T**aking steps (I went to a support meeting)

Degrees of Change Talk

A close-up photograph of a wedding cake. The cake is covered in white frosting with large, decorative swirls. On top of the cake are two figurines: a bride in a white dress and a groom in a black tuxedo. The background is blurred, showing what appears to be a crowd of people at a wedding.

"Will you take this person

to be your lawfully wedded spouse, and be wholly faithful, for richer and poorer, in sickness and health, so long as you both shall live?"

I want to (desire)

I could (ability)

I should (reasons)

It's important to me (need)

I DO!



Activity

Is it change talk, sustain talk,
or something else?



Focus: Drinking

I like to drink. It's what I do.



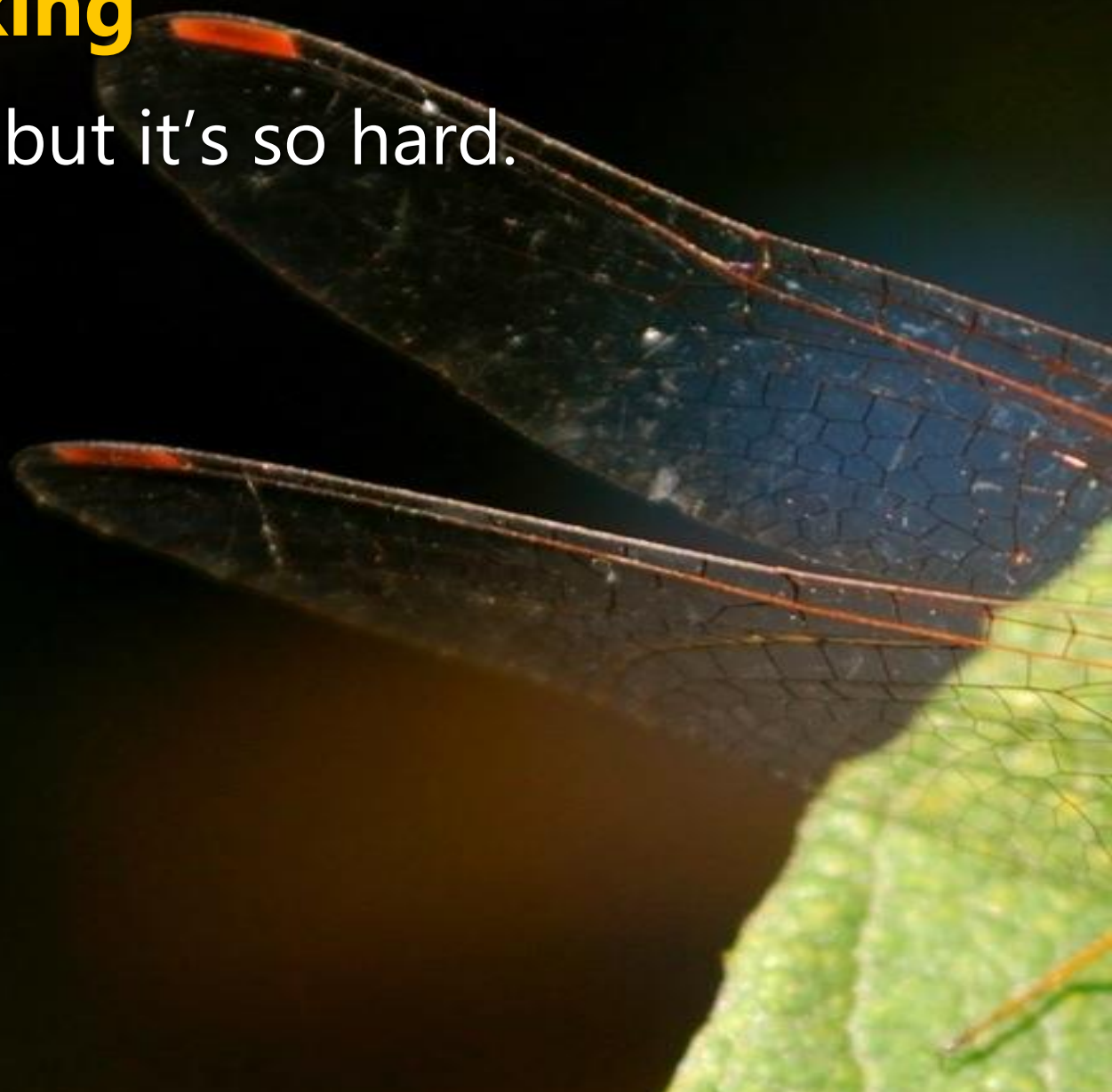
Focus: Drinking

If I drank less, I'd probably feel less groggy the next day.



Focus: Drinking

I'd like to quit, but it's so hard.



Focus: Drinking

I drink way less than most of my friends.



Focus: Drinking

I've got to do something about my drinking.
It's really getting out of hand.



Focus: Drinking

Who are you to give me advice! I saw you walking into a bar just last week.



Focus: Drinking

I've tried to quit more times than I can remember, and I'm done trying.



Focus: Drinking

I've tried to quit more times than I can remember, but I'm willing to try one more time.



Focus: Drinking

I've tried to quit more times than I can remember, and I'm not sure I want to try again.



Focus: Drinking

If I quit, I'm sure my liver will thank me.



Focus: Drinking

Maybe I could cut back by drinking less whiskey and more beer.



Activity:

Change Talk Activity

1. Underline the client's change talk
2. Drum for change talk
3. Note which OARS used by interviewer
4. Practice

Activity

Listening for Change Talk

Activity:

Listening for Change Talk



Dr. Gabor Maté
Physician, Author, Public Speaker

Featured Book:



Maté, Gabor. *In the Realm of Hungry Ghosts: Close Encounters with Addiction*. Toronto: Knopf Canada, 2008.

Jake

- It's hard to get away from it.
- When I'm older, I'll worry about pension plans and stuff.
- I don't see my own family for a year, and I don't care...
- Yeah, the coke's my life...I care more about the dope than my loved ones or anything else
- I don't know how to be without it. I don't know how to live everyday life without it.

Jake

- You take it away, I don't know what I'm going to do
- If you were to change me and put me in a regular-style life...
- I was there once in my life.
- Do you think you could send me to a skin specialist?
- I'll go, Doc. Don't worry, I'll go.
- That frog you're talking about. That's me.

Exchanging Information

“It is easy to overestimate how much information and advice clients need to be given.”

Miller & Rollnick



Elicit-Provide-Elicit

A simple strategy for
exchanging information



Elicit-Provide-Elicit

Elicit

- Ask what person already knows
- Ask what person would like to know
- Ask permission to provide information



Elicit-Provide-Elicit

Provide

- Prioritize what person most wants to know
- Be clear; use everyday language
- Offer small amounts of information with time to reflect
- Acknowledge freedom to disagree or ignore



Elicit-Provide-Elicit

Elicit

- Ask for person's response, interpretation, understanding



Activity: E-P-E

Elicit

- Ask what person already knows
- Ask what person would like to know
- Ask permission to provide information

Provide

- Offer small dose of suggestions, advice

Elicit

- Ask for person's response



A blurred background image showing two women. The woman on the left is wearing a purple top and has dark hair. The woman on the right is wearing a dark top and has dark hair. The text "In conclusion..." is overlaid in the center.

In conclusion...

General Practice Guidelines

Breathe

Let MI spirit guide you

Know where you are

Use your OARS

Trust reflections

Elicit more, impart less

Focus on the good stuff

Invite to action

Breathe

Now What?

Read more about MI

Get additional training

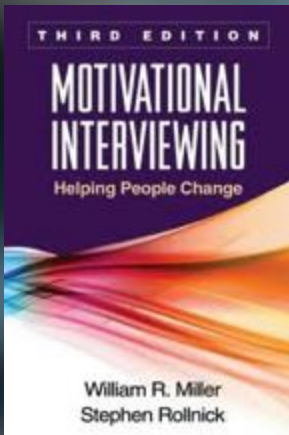
Observe and discuss professional training videotapes

Tape and critique your own practice

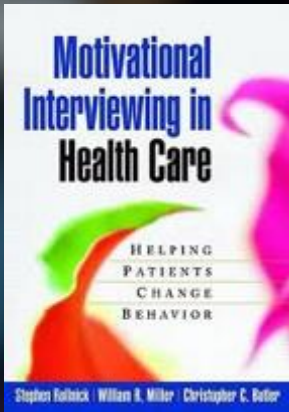
Work with someone knowledgeable about MI to provide coaching and feedback

Form a learning circle to support mutual skill-building

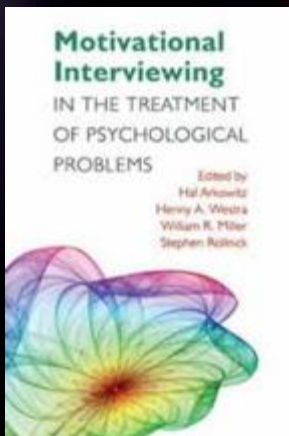
Resources



Motivational Interviewing (3rd Ed.), Miller, WR & Rollnick, S., The Guilford Press, 2013.

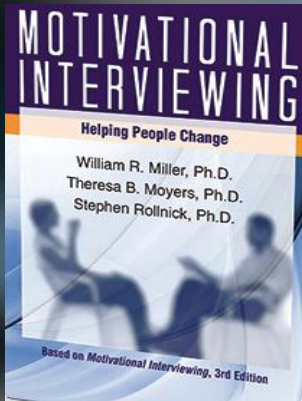


Motivational Interviewing in Health Care, Rollnick, S, Miller, WR and & Butler, C. The Guilford Press, 2008.

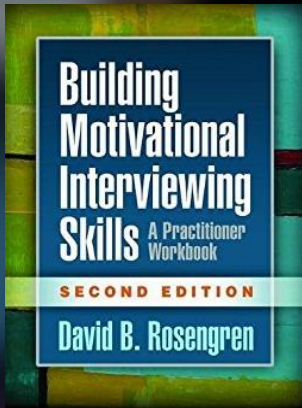


Motivational Interviewing in the Treatment of Psychological Problems, Edited by Arkowitz, Westra, H, Miller, WR, & Rollnick, S, The Guilford Press, 2007.

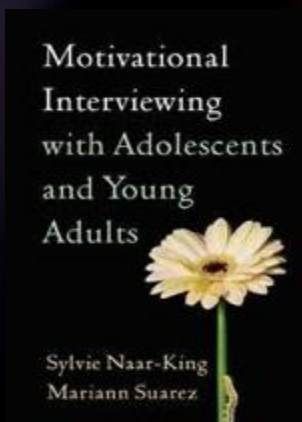
Resources



Motivational Interviewing DVD, 2013. The Change Companies www.changecompanies.net/motivational_interviewing.php



Building Motivational Interviewing Skills (2nd edition), Rosengren, D.B., The Guilford Press, 2017.



Motivational Interviewing with Adolescents and Young Adults, Naar-King, S. & Suarez, M., The Guilford Press, 2011.

Website: www.motivationalinterviewing.org

SUCCESS




**WHAT PEOPLE THINK
IT LOOKS LIKE**

SUCCESS



**WHAT IT REALLY
LOOKS LIKE**

A blurred background showing a group of people, likely in a meeting or conference, with various colors of clothing and hair visible. The focus is on the text in the center.

**Thank you
for all you do!**

PEER NETWORKING

Discussion Questions:

Are Community Health Workers integrated into Care Teams at your health center? What works well? What are the challenges?

What training would be helpful?

Washington
Paid Family & Medical Leave



Employment Security Department
WASHINGTON STATE

Matt LaPalm

mlapalm@esd.wa.gov



What we will cover today

- Why Paid Family and Medical Leave
- What is Paid Family and Medical Leave
- How it all works
- Help!
- Where to learn more

Why Paid Family and Medical Leave

Bills	Account Balance
Paycheck	+ \$800
Housing	- \$600
Food	- \$100
Utilities	- \$50
Balance	\$50

The ability to absorb a disruption in pay is not distributed equitably.



What is Paid Family and Medical Leave?

Paid leave from work to care for yourself or a family member.

You claim leave directly from the state, not your employer.

Benefit is paid directly to you, not through your employer.

Employer can not prevent you from using Paid Family and Medical Leave.

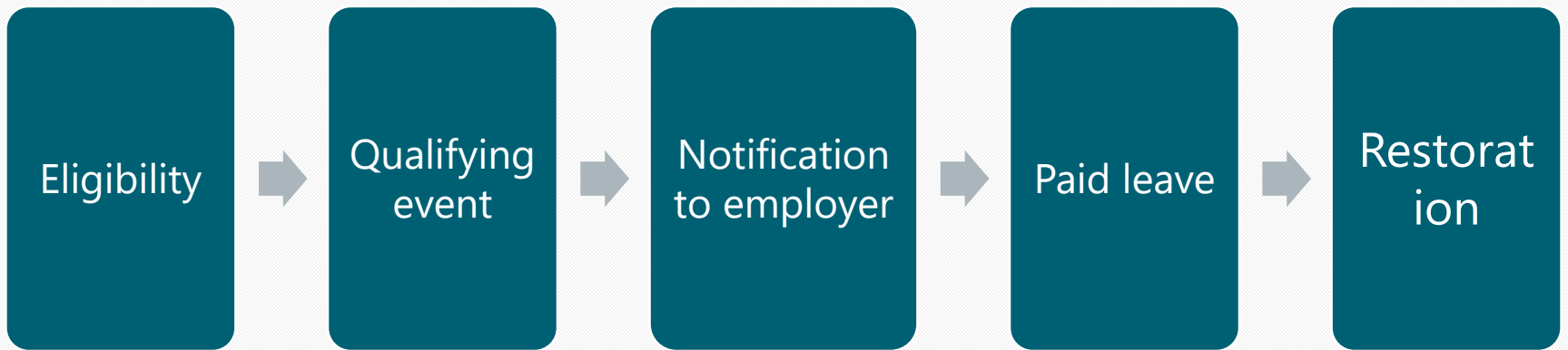


Who does this apply to?



Workers in
Washington

How it works



Eligibility



820 hours

worked during the qualifying period.
Portable across employers.

20 Hours/week -> 41 Weeks

40 Hours/week -> 20.5 Weeks

Qualifying period is the first four of the last five completed calendar quarters, or the last four completed calendar quarters.

Qualifying events

Family
leave

- Care for a family member
- Birth or placement of a child
- Military exigency

Medical
leave









- Your own medical care

Eligible for care in family leave?

Eligible

-  Child (step)
-  Grandchild
-  Spouse/Domestic Partner
-  Sibling (step)
-  Parent (step, in-law)
 - Loco Parentis
 - Legal Guardian
 - De Facto Parent
-  Grandparent (in-law)

Not eligible

-  Godparents
-  Aunts or Uncles
-  Cousins
-  Distant relatives
-  Roommates
-  Neighbors
-  Coworkers
-  Live-in non-family members
-  Pets

Available leave

12 weeks of Family OR Medical Leave.

16 weeks of Family AND Medical leave.

Additional 2 weeks for complications related to a pregnancy.

Total weeks available in a claim year.

Minimum 8 continuous hours and 7 day waiting period in statute (except birth or placement of a child).



12 - 18

Typical work weeks of leave.

Weekly Wage Replacement

Benefit payment paid by ESD directly to worker.



Proportion of typical weekly wage.

Minimum payment of \$100, maximum of \$1,000.

Benefit formula set in statute.

Online benefit calculator in development.

Normal Weekly Wage	Benefit Payment
\$500	\$450
\$750	\$672
\$1000	\$797
\$1500	\$1000

Employment Restoration

Return to the same, or similar, position when a worker:

1. Works for an employer with 50 or more employees for at least 20 weeks.
2. Has worked for that employer for at least 1 year.
3. Has worked 1250 hours for that employer in the last year.



A smiling woman with long blonde hair, wearing a red sweater, is standing in a coffee shop. She is positioned next to a coffee machine, and a cup is visible in the foreground. The background shows various coffee-making equipment and a blurred interior.

Leave scenarios

Examples to help understand how this will work.

Please note:

- Three examples that are intended to illustrate how leave works.
- Examples will not cover every aspect or scenario of leave, and please consult the Employer Toolkit or the Employee Guide for more details.



Scenario: Tim



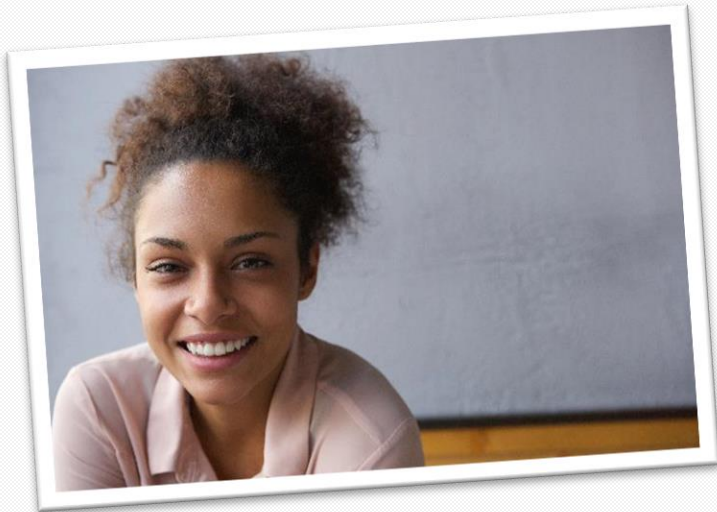
- Tim works full-time at a large construction company
- His grandfather needs 24-hour care for 3 weeks
- Has accrued 6 weeks of employer paid time off

Scenario: Chelsea



- Chelsea works full-time at a medium sized tech company
- She is expecting a new child
- Company offers 12 weeks of paid leave
- She and her partner want to maximize leave time at home with new child

Scenario: Carole



- Carole works part-time for a small retail store
- No paid leave other than state required sick leave
- She slipped on her way to class and broke her tailbone
- Dr. requires she doesn't walk for 8 weeks

What we've learned...

- 15 focus groups – July 2019
 - Latinx Workers
 - African American Workers
 - Chinese workers
 - Filipino workers
 - Korean workers
 - Vietnamese workers
 - Rural white workers
 - Healthcare employees
 - Small business owners
- Barriers
 - Mistrust of government programs
 - Difficult relationship with employer
 - Fear of burdening coworkers
 - Not enough benefit money
 - Haven't heard of Paid Family and Medical Leave

Help us, help all

Talk about paid leave with your clients.

Keep documents handy to share when a client has a medical or family event.

Invite us to your events to talk or table.

Training available for frontline staff.

Join us in 2020 for our Ambassador program.



Ambassador interest sign-up

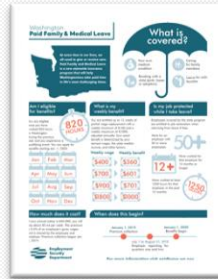


<https://www.surveymonkey.com/r/G7B5TFW>

Learn more



Upcoming webinar series
[Paidleave.wa.gov/events](https://paidleave.wa.gov/events)



Infographic
[Paidleave.wa.gov/about](https://paidleave.wa.gov/about)



Video & Handout
[Paidleave.wa.gov/workers](https://paidleave.wa.gov/workers)

Contact us



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PUBLIC CHARGE FINAL RULE

SUMMARY

EXAMPLES

NEXT STEPS

PUBLIC CHARGE RULE – KEY DETAILS

- Finalized mid-August
- CURRENTLY BLOCKED BY FEDERAL LITIGATION
 - Will not be enforceable until resolved
 - Only effective AFTER rule is upheld, IF it is upheld
- More rules from Department of Justice – including deportability on public charge grounds – coming soon
- Many special exceptions
- Medicaid rules especially complicated
- **Everyone is always welcome at CHCs, no matter what**
- Our Goals:
 - Minimize community fear
 - Maximize community knowledge

PUBLIC CHARGE RULE

- Public Charge Determinations Only Apply to Three Groups:
 - Applicants for admission to the U.S.
 - Applicants for Legal Permanent Resident status (“green card”)
 - Green card holders who have left the U.S. for more than six continuous months
- Public Charge Determinations are Forward-Looking
 - Immigration officials must look at the “totality of the circumstances,” decide whether applicant is likely to be a “public charge” for 12 out of 36 months at any point in the future

PUBLIC CHARGE RULE

- Public Charge Determinations are Complex
 - All applicants, including children, are assessed individually
 - Immigration officials look at total future benefit months:
 - An applicant that is likely to receive one benefit for 12 months in a 36-month period may be labeled a public charge, and have their application denied
 - An applicant that is likely to receive two benefits for 6 months in a 36-month period may be labeled a public charge, and have their application denied
 - Prior use of/application for certain benefits may be counted against you
 - However: benefits used or applied for before October 15, 2019, will not be counted against you

PUBLIC CHARGE TEST – BENEFITS INCLUDED

- Medicaid Long-Term Care*
- SSI, TANF, or any government cash assistance*
- SNAP
- Public Housing
- Section 8 Housing Vouchers
- Project-Based Section 8
- Medicaid, except for:
 - Emergency services
 - Children under age 21
 - Pregnant women

PUBLIC CHARGE RULE – BENEFITS NOT INCLUDED

- Community Health Center Services
- Hospital Uncompensated Care
- Children's Health Insurance Program
- Qualified Health Plans under ACA
- WIC
- Anything not specifically listed in the rule

Anyone who needs or uses these benefits should use them without fear, both now and in the future. They will not be counted against you.

Rule of Thumb: If you were eligible for benefits **BEFORE the rule, you are eligible for benefits **AFTER** the rule**

OTHER PUBLIC CHARGE FACTORS

- Age (preference for working age adults)
- Health Status
- Household Size
- Financial and Employment Status
- Household Assets and Income Potential
 - Full- or part-time caregivers given special consideration
- Credit History
- Fee Waiver

OTHER PUBLIC CHARGE FACTORS

Heavily Weighted Positive

- Full-Time Employment
- Vocational Skills/Education
- Income over 250% FPL
- Private, Non-Subsidized Health Insurance

Heavily Weighted Negative

- Unable to demonstrate current/recent or “reasonable prospect” of employment
- Has received (or been approved to receive) listed benefits for 12/36 months
- Medical conditions

EXAMPLE #1

Patricia (36 years old) is a green card holder who will soon be applying for citizenship.

- Low-income – full time, minimum wage worker
- Her son is a U.S. citizen, enrolled in Medicaid and SNAP
- She's helping her husband apply for admission to the U.S.

Patricia is okay!

- She already has a green card
- Her son is enrolled in Medicaid and SNAP, but her determination is individualized – her son's benefit use won't be used against her
- Her husband's case is more complicated.

EXAMPLE #2

Chris (29) is planning to apply for a green card soon.

- Little formal education
- “Official” work history is spotty, but he usually makes over 125% FPL
- He suffers from genetic cardiomyopathy

Chris’s application may be in trouble.

- Good:
 - Working age
 - Income over 125%
- Bad
 - Income over 125% FPL is good, but he’ll have to demonstrate that income somehow
 - Few occupational skills
 - Health condition

Chris should get advice from an immigration attorney.

MOST IMPORTANT POINTS

- Our job now is to minimize community fear, maximize community knowledge
- Applies only to applicants for admission and applicants for green card (many exceptions!)
- Public charge test is forward-looking:
 - It asks, “Are you likely to use these specific benefits for 12 months out of any 36-month period any time in the future?”
- Litigation is ongoing
- Story collection is important

RESOURCES

- Should I Keep My Kids Enrolled in Health and Nutrition Programs?
- Public Charge: Does This Apply to Me?
 - Includes green light/yellow light guide to whether the rule will affect you

THANK YOU

Any questions?

Please contact Patricia Gepert
pgepert@wacommunityhealth.org

wacommunityhealth.org