TIPS FOR COMMUNITY SPONSORS
ASSISTING WITH MEDICAL/HEALTH NEEDS

Prior to Arrival:

- Find medical facilities available in your community. Most clients will have one of the Medicaid plans, but it will not be active on arrival. Be proactive and ask which plans the facility accepts and ask if it covers all services (lab, X-ray, surgery) in that facility. You want to know where to go for primary care, dental care, urgent care, emergency room and hospitalization including obstetrical care. Community Health Centers and Federally Funded Health Clinics are good options.

- Find a single pharmacy to use. If clients are Islamic, be sure the pharmacy will supply halal compatible medications upon request.

- Contact the local county health department and see what services they can provide. While they have immunizations, some charge for administration. Vaccines for children “VAC” are available from many sources at no cost for children.

- Locate the WIC clinic and ask about their documentation requirements. Mothers who are pregnant, breastfeeding or have children <5 years old are eligible for benefits. The milk/dairy benefit can be divided in many ways to increase the amount of milk or yogurt or cheese to meet the family’s needs.

- Obtain a list of available food pantries, hours/days of operation and requirements for registration.

- Look for other sources for cleaning supplies, toilet paper, etc. that are not provided on SNAP/WIC benefits. Diaper banks and pregnancy help centers are reliable sources for baby needs.

- Decide any special precautions or vaccinations that volunteers should consider.

Arrival:

- Meet Family. Learn names and birth dates. Be alert as many countries use Day/Month/Year.

- If the name is “LNU,” that means last name unknown. Please let your caseworker know as this must be rectified.

- Ask if anyone is ill or in pain. Ask if anyone is on any medication.

- Clients often arrive with immunizations and medical records from military bases and camps. You can ask permission to copy so you can review later. You will need to help them organize and keep critical medical papers.

If Urgent Care is Needed:
• Ask if they have medication allergies, had surgery, or have any serious or chronic medical problems.

• Ask if there is a family history of diabetes, high blood pressure, heart disease, kidney disease, strokes, or cancer.

• Remember to advise the provider that “Medicaid is pending.” If payment is needed, ask if it can be sent to the caseworker. Only pay if there is no other choice. Notify Catholic Charities that you had to obtain care so they can hasten the Medicaid application that will backdate to the first day of the month of application.

• At the pharmacy, tell them that Medicaid is pending. You will be asked to pay, so be sure you accept only a one-month supply. Payment with a credit card is easiest to reverse charges when Medicaid is active.

**Making Appointments for Primary Care:**

• Make appointments with primary care physicians to update immunizations, address any known problems, and obtain baseline labs. Be aware of any specific issues for clients from a specific area.

• Make a copy of their governmental ID card. This can act as their birth certificate in the future. (Be aware that the birthdates may be day/month/year on this card.) Ask if you may take a picture on your phone of all their IDs and vaccinations including their Covid vaccination card. Ask permission to copy what medical records they have with them. Return the records to the family, keep a copy for the Sponsor leader.

• Review the records and try to decide if there are any immediate health needs. If care is needed, remember to tell the provider, “Medicaid is pending.” Then let Catholic Charities know so they are sure to get the application process started.

• Catholic Charities will supply a bio sheet that lists name, date of birth and alien number. If anything is missing or does not appear correct, notify the caseworker asap.

• Men and boys, say 10 and older, should be scheduled with male physicians. Boys less than 10 may be scheduled with either gender.

• Girls and women should be scheduled with female providers.

• If there are pregnant women, they could be scheduled with a female obstetrician.

• If there is no female provider available, ask permission for them to see a male and be sure a female sponsor accompanies them and can stay with them throughout the exam.

• Be aware that male interpreters will not ask even the most basic of female related questions. (They will ask if a birth was natural, but not if they had a c-section.)

• Before the first medical appointment, obtain all the paperwork and registration forms from the provider and fill-out beforehand. You may have to go to medical records to get an “authorization for disclosure of Protected Health Information.” This is critical for the doctor to share information with Sponsors.
• Prior to the appointment, ask your interpreter to help complete the forms and explain to the clients what they are signing.

The First Appointment Requests of Provider:
• Review and administer immunizations.
• Review medical history.
• Address any identified problems and obtain medication refills as needed.
• It is often appreciated if you politely hand the doctor a list of concerns, supply a copy of the records including an immunization record, and tell the doctor of any recommendations that you are aware of. (For example, “I saw they had a positive test for XXX need a vaccine and were recommended to have a test for XXX”).

TB/Parasites/Typical Labs for Clients
• A positive QuantiFERON Gold test with negative chest X-ray shows latent TB. It is NOT contagious but requires treatment to prevent later active infection.
• Each person should have 2 negative QuantiFERON Gold tests 8-12 weeks (about 3 months) apart.
• NEVER GIVE CLIENTS A TB SKIN TEST. The test can be inaccurate due to BCG vaccine or cause a deep ulcer and be invalid.
• Consider treatment for parasites. Due to cost, doctors often prescribe ivermectin by weight as it is inexpensive and a single dose.
• Typical labs for clients: CBC, CMP, Hepatitis Panel, TSH. For pediatric patients, it includes lead. For latent TB, consider HIV and RPR.

Prescriptions:
• Send prescriptions to pharmacy labeled “Halal Compliant.”
• A copy of the bio sheet is extremely helpful for the pharmacy.
• Do not accept over a 30-day supply or Medicaid will not reimburse.
• Keep all receipts, especially the ones with the bar code. It is easiest if all payment is placed on one credit card. When the Medicaid numbers are available, your bar-code receipts will be filed with Medicaid and money will be refunded directly to the card. They will re-bill anything that is not covered, and you can request reimbursement through Catholic Charities.
• If medicines are prescribed, know which children can take pills, chewable or liquids. (Keep dosing as simple as possible, even one a day can be a challenge.)

Other exams:
• Dental exams need to be scheduled for children and adults. In Jefferson City, children can be scheduled through Community Health. Adults can only be scheduled for routine
care at Magical Smiles and must have HEALTHY BLUE. If a dental issue arises before their first appointment, call the provider as early in the day as possible for assistance.

- Vision: Medicaid covers one routine evaluation per year for children less than 18 years old and every 2 years for adults.

COUNTRY SPECIFIC ISSUES-AFGHANISTAN

- Hepatitis A is prevalent. Volunteers may wish to obtain vaccine prior to client arrival. Clients often have had first vaccination. They should have blood test if not done.
- Parasites/worms. This is common and sometimes doctors choose to just treat. Testing requires obtaining stool samples and is very problematic.
- Elevated lead levels are common and from many sources including makeup and nail polish from Afghanistan. Be sure you have checked their current home if older, that there is no peeling paint and that the water has been checked for lead levels.
- Low Vitamin D levels.
- Tuberculosis is prevalent. Immunizations often include BCG. Every client should receive a blood test for TB (QuantiFERON Gold or TB Gold), and it should be repeated in 8-12 weeks (about 3 months) to assure negativity. NEVER ALLOW A CLIENT TO HAVE A TB SKIN TEST. IT CAN CAUSE A SEVERE ULCERATION. If a child is breastfeeding and the mother has a positive QuantiFERON Gold test, treatment of a child might be warranted until the child has 2 negative blood tests.
- Typical baseline bloodwork: CBC, Chem panel, Hepatitis panels to include A and B, HIV, RPR, QuantiFERON Gold, TSH and Vitamin D.
- CDC.gov has charts for “Current vaccination criteria for U.S. Immigrants” that may be helpful in knowing when and which vaccines are due.