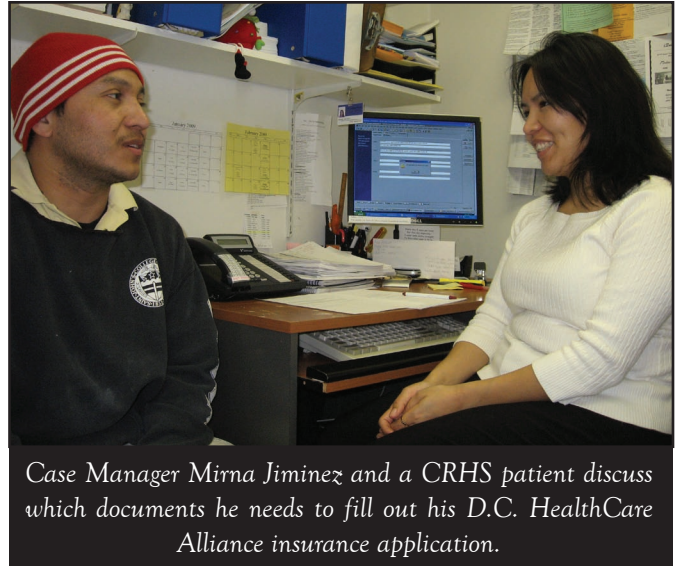


Miguel

Miguel is a 60-year-old El Salvadorian man who became a patient at Columbia Road Health Services (CRHS) in early May, after moving to Columbia Heights from southern Maryland. Miguel has chronic renal failure and is on dialysis three times a week. He originally began his dialysis two years ago at the DaVita Center in Upper Marlboro, Maryland, but they stopped accepting him because he switched his state of residence.

Miguel came to CRHS in a difficult situation. If he did not receive dialysis on a regular basis, he would be at risk for fatal complications. I immediately began to research if Miguel qualified for emergency Medicaid in Washington, DC. This process requires multiple steps, the first being to obtain his medical history from his former Case Manager at the DaVita Center. Nurse Practitioner Monica Naumann then gave him a full medical exam and we jointly filled out the emergency Medicaid application to see if he could receive approval and begin dialysis in DC. At the end of June, I was notified that Miguel was approved for the plan. He could now begin his dialysis program in the District and receive coverage for his kidney and high blood pressure medication.



Case Manager Mirna Jimenez and a CRHS patient discuss which documents he needs to fill out his D.C. HealthCare Alliance insurance application.

The next obstacle was Miguel's inability to have his prescriptions filled. The pharmacy was not accepting his new insurance plan. Miguel was also not able to explain his situation in English and there was no interpreter available, so he came back to me for assistance. I called the pharmacy and explained his emergency Medicaid coverage and that he needed six separate prescriptions to be filled. Once the pharmacist understood Miguel's status, he was able to fill the prescriptions immediately.

Miguel's status as an Emergency Medicaid member will be reviewed every three months, but at least for now, he will be able to receive his dialysis three times a week and his medication at a reduced cost. It is satisfying to be able to work smoothly with state and federal healthcare groups to ensure that patients receive the best care possible. By doing so, CRHS is able to transcend the typical bureaucratic barriers to health care to assure that all patients receive care.

Nadia Rengifo
CRHS Case Manager