

# Improving the Newcomer Experience of Medicare

## Options Document



NEW BRUNSWICK  
MULTICULTURAL  
COUNCIL



CONSEIL  
MULTICULTUREL DU  
NOUVEAU-BRUNSWICK

all in

# Hello, we're All In



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# Acknowledgements

We would like to acknowledge that this work was carried out on the traditional unceded territory of the Wolastoqiyik, Mi'kmaq and Peskotomuhkati peoples. This territory is covered by the "Treaties of Peace and Friendship" which these nations first signed with the British Crown in 1726. The treaties did not deal with the surrender of lands and resources, but in fact recognized Mi'kmaq and Wolastoqiyik title and established the rules for what was to be an ongoing relationship between nations.

To recognize the land is an expression of our gratitude to those whose territory we are on, and a way of honouring the Indigenous people who have been living and working on the land from time immemorial. It is important to understand the long-standing history that has brought us to reside on the land and to honour that history as we continue to welcome new families to these lands and work together towards reconciliation.

Woliwon, wela'lin, meegwetch.

# Acknowledgements

We would like to thank all the participants, Newcomers and service providers alike, for sharing their time, experiences, and insights with us.

It was clear to us that everybody we spoke has the best of intentions, and that everybody is trying to do the best that they can with the resources that they have available to them.

Thank you.

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# Introduction

**How might we improve the Newcomer experience of the New Brunswick Medicare System?**



# The Challenge

The Province of New Brunswick is dependent on Newcomers to reverse population decline and ensure economic growth; they make significant contributions to our communities.

We actively recruit Newcomers, competing with other provinces and countries to attract them. We use the beauty of our natural environment and high quality of life as selling points, along with the promise of Universal Healthcare that Canada is renowned for.

When they arrive, many Newcomers face a variety of challenges applying for, and maintaining, Medicare coverage. These challenges have ramifications on the health, wellness, and financial security of the impacted individuals, as well as the operational efficiency of Medicare itself.

These challenges are set to increase as the province realises its goal of welcoming 10,000 Newcomers and returning New Brunswickers per year by 2027.

We set out to increase our understanding of the current Newcomer experience of Medicare, in order to identify opportunities for improvement and innovation, so that we can welcome our new neighbours and provide a seamless transition to making New Brunswick their home.

**“ The legislation was written when we wanted to keep people out...vs wanting to bring them in.**

- Stakeholder Participant

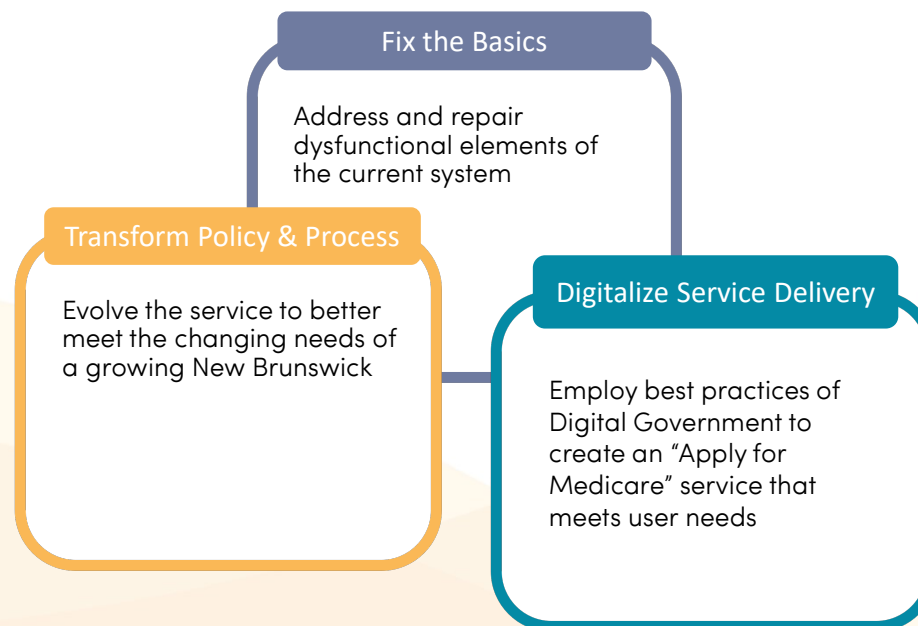


# The Outcome

Over the course of four months, we engaged in a series of conversations with Newcomers and the people who support them in their journey to New Brunswick. We examined resources that are currently made available to Newcomers during this time and reviewed the practices of other Canadian jurisdictions.

This report provides an overview of the approach taken and our key findings, illustrated by four Newcomer archetypes and the highs and lows of their experience applying for and maintaining Medicare coverage.

The report presents a suite of options to leverage three key areas of opportunity to improve the New Brunswick Newcomer experience and equip the Medicare team with the tools that they need for success in the future.



# Approach

**Methods, Participants, Materials**

# Methods



Workshops



Online Group  
Discussions



Interviews



Data Analysis



Jurisdictional  
Scan



Service Safari



Document  
Review

# Participants



34 Newcomers



7 Settlement Agencies



3 Medicare Leadership



2 Medicare Eligibility Officers



2 Medicare Client Advocates



2 Population Growth Officers



2 Offices of Elected Officials



1 Service NB Coordinator

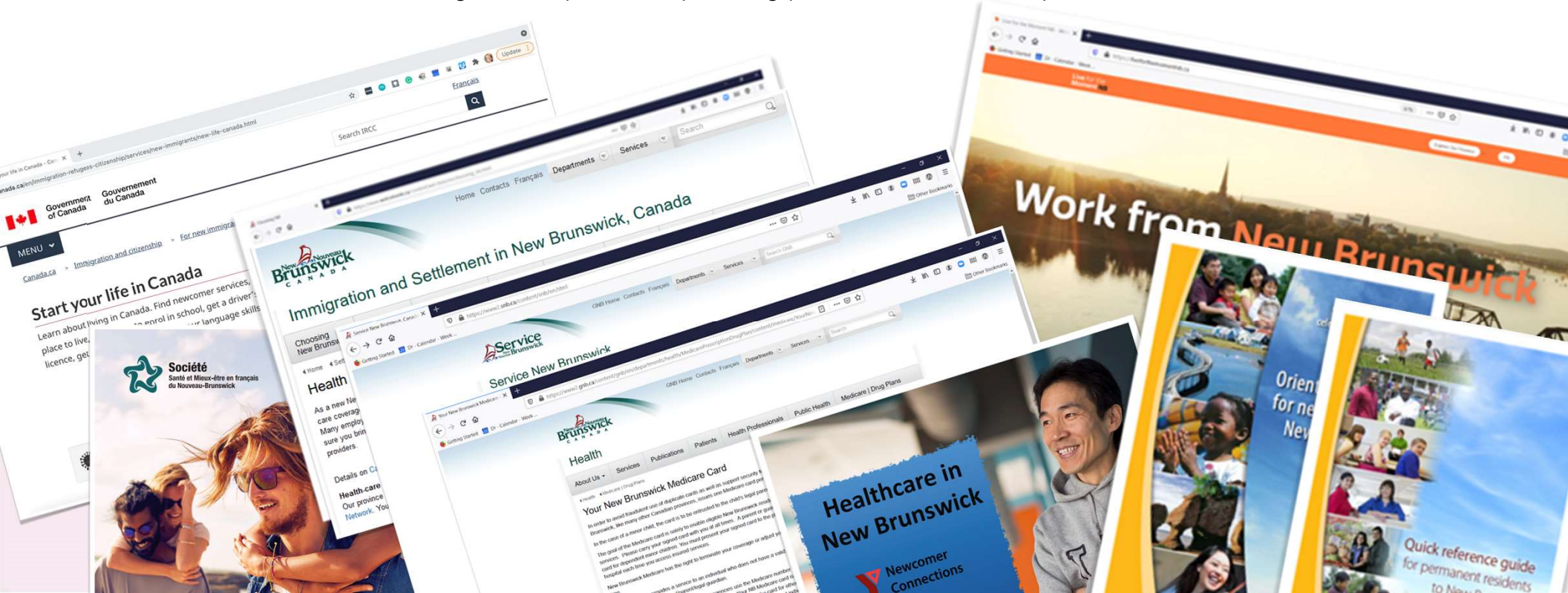


1 Immigration Consultant

# Materials

We reviewed thirteen (13) information resources available to Newcomers, along with the paperwork they must complete, and communications they receive during the application process.

We also reviewed relevant legislation, policies, operating procedures, and analysed active case data.



# Newcomer Archetypes

# Archetypes

We've identified four Newcomer Archetypes. These Archetypes are high-level categorizations of the situational circumstances that we identified through our research.

These Situational Archetypes are primarily structured around:

- Newcomers' expectations of healthcare
- Newcomers' informational needs and knowledge
- The situation leading the Newcomer to interact with the application process

## Why Use Archetypes?

Archetypes **can** help us:

- Understand Newcomer's point of view
- Consider specific needs when considering solutions
- Help with empathy building

Archetypes are **not**:

- Demographic market "segments"
- Validated with large sample sizes
- Exhaustive; they are constrained by the people we met through our research

# Who are the Archetypes based on?

34 Newcomer Participants from 19 countries.

10 International students

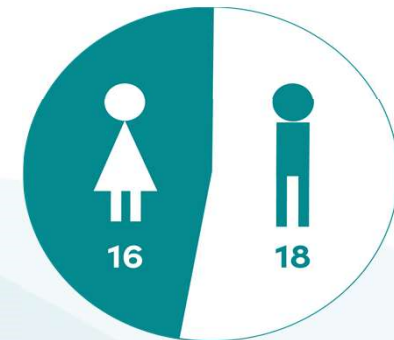
11 Provincial Nominee Program participants

9 Atlantic Immigration Pilot Program participants

4 Temporary Work Permit holders

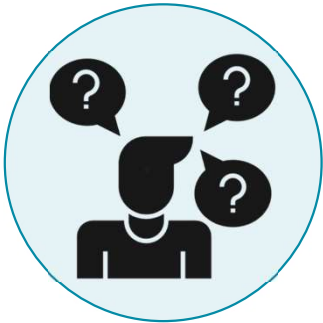


**Note:** we did not talk to any Temporary Foreign Workers who come to New Brunswick for seasonal work before returning home. We know these workers do valuable work in New Brunswick, and work some of the provinces' most "dirty, dangerous, and deadly" jobs. They are ineligible for Medicare unless they have a 12-month work permit (cumulative). We consider this challenge in our proposed options.





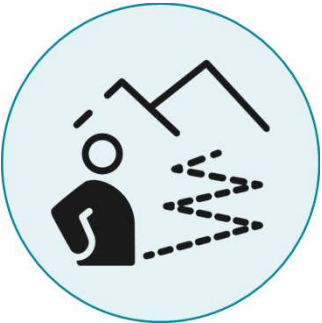
# Introducing the Archetypes



New Arrivals



Staggered Families



Renewing Residents



International  
Intraprovincials

# New Arrival



New Arrivals are arriving in Canada for the first time. Overwhelmed with settling in, their early priorities can include finding a place to live, getting a job, and figuring out transportation. In some cases, the language and the culture are completely new to them. Applying to Medicare is often not a high priority, unless there are immediate medical concerns to be dealt with.

*“I thought free Medicare is everything. If it's free, if you get sick, everything is covered.”*

## Knowledge Levels

### How to Apply

Low —●— High

### What Medicare Covers

Low —●— High

### How to Access Care

Low —●— High

## Expectations

- Come to Canada with high expectations of the healthcare system.
- Hearing healthcare in Canada is “free” or “universal” leaves them with an expectation that coverage, access, and quality of care will all be equal to or better than where they are coming from.

## Pain Points

- Realising they must apply for Medicare.
- Meeting proof of residency requirements.
- Work permit issues.
- Not understanding what is needed to correct problems with application.
- Struggle to understand what Medicare is in practical terms.

## Doing

- Living with family/friends or in a motel while looking for a more permanent home
- Engaging with a Settlement Agency, friends, family, or employer for help and advice
- Getting private insurance (maybe)
- Looking for jobs or starting classes
- Going to Service Canada, SNB to get SIN and driver' license/NB photo ID, Medicare
- Adapting to new system, culture, & climate



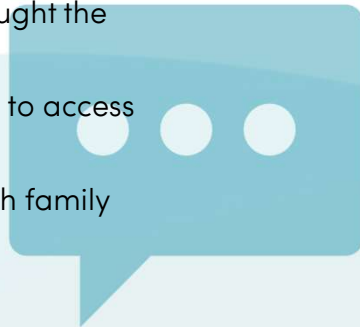
## Feeling

- Excited & Optimistic - everything is new! Canada has free, universal public healthcare!
- Overwhelmed - having to apply to several services
- Disappointed - getting Medicare and health services isn't that easy
- Worries - about lack of coverage
  - Confused - when month to month lease is rejected
  - Cheated - "I wasn't told this is how it was going to be"



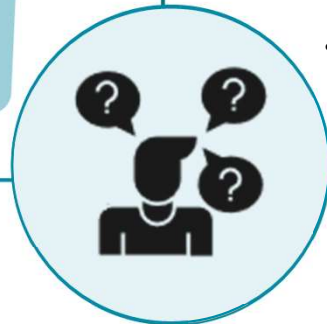
## Saying

- Canada is a developed country. I thought the healthcare would be better
- I don't understand why it is so difficult to access care, it was much better back home
- I don't have utility bills, I'm staying with family for now



## Thinking

- I'm starting a new life in a place of great opportunities
- I don't have to worry about healthcare - it's covered
- How can I prove that I reside in NB when I'm still looking for a place of my own to live?
- What did I do? (in choosing to come to Canada)



# New Arrival's Unmet Needs



I need to...

know that I need to apply for Medicare, and have access to details of when and how I should do this.

Know that I am covered from the first day, even if I can't prove my intent to stay until later on

Know where my application is in the process so I can feel confident it was received

Know quickly if my application is incomplete and specifically what I need to do to rectify it

Understand the basics of how care works in New Brunswick

Understand the form & document requirements so that I can submit it all correctly the first time

Understand specifically what Medicare covers and what it does not cover

# Staggered Family



Staggered Families immigrate to Canada, though not all at once. Often, one member of the family arrives first to get established and settled, and then the rest of the family follows. Whether arriving together or separately, Staggered Families often struggle to get Medicare at the same time due to challenges with forms and proof of residence.

*“They wouldn’t even accept our marriage certificate as legitimate proof that we were a family.”*

## Knowledge Levels

### How to Apply

Low  High

### What Medicare Covers

Low  High

### How to Access Care

Low  High

## Expectations

- They come to Canada with the same expectations as Newcomers; that Medicare is “free” and “universal” and so they will be covered.

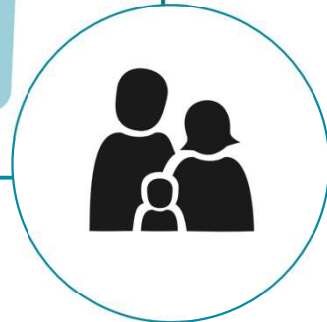
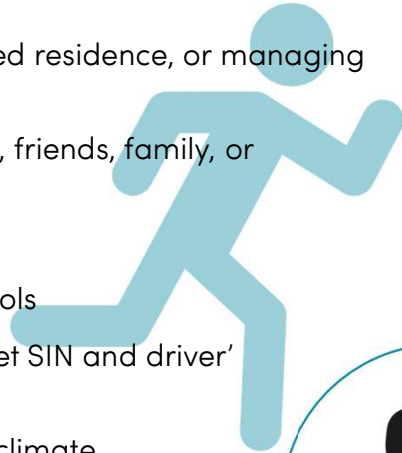
## Pain Points

In addition to the New Arrival pain points:

- They have challenges correctly completing the application form when arriving separately.
- Cannot apply proof of residency from one spouse to the other; Medicare does not trust they are living together.
- Challenges not often surfaced until later in the application process.

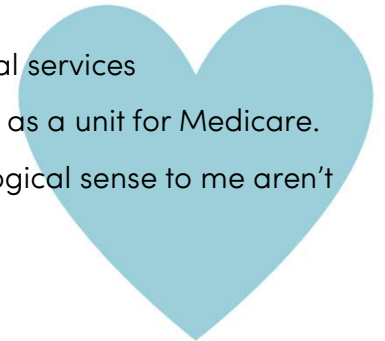
## Doing

- Joining spouse in already-established residence, or managing paperwork for whole family
- Engaging with a Settlement Agency, friends, family, or employer for help and advice
- Looking for jobs or starting classes
- Getting children settled in new schools
- Going to Service Canada, SNB to get SIN and driver's license/NB photo ID, Medicare
- Adapting to new system, culture, & climate



## Feeling

- Excited & Optimistic - everything is new! Canada has free, universal public healthcare!
- Overwhelmed - having to apply to several services
- Confused: when our family isn't accepted as a unit for Medicare.
- Frustrated: when documents that make logical sense to me aren't accepted, and when I am not trusted



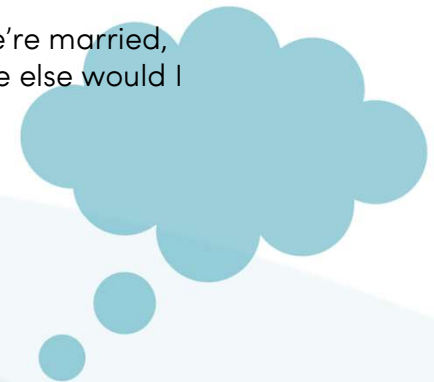
## Saying

- But the lease is in my spouses' name and you're connecting our files; why isn't this enough?
- I don't understand why our marriage certificate isn't enough to provide Medicare.
- I shouldn't need a bank account in my own name; I don't manage the family money.



## Thinking

- This doesn't make any sense; if we're married, why isn't this good enough? Where else would I live?



# Staggered Family's Unmet Needs



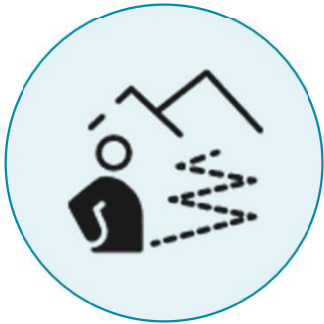
I need to....

Have our family considered as a unit; even though we didn't arrive in Canada at the same time

Be able to explain in the application form that my spouse did not travel with me, they are already here

Be trusted that I am living with my spouse.

# Renewing Resident



Renewing Residents are somewhat established in New Brunswick and are reapplying for Medicare after a change in permit type or a permit renewal; usually the extension of a work permit while on the path towards Permanent Residency or Citizenship.

*"I have the right to be here: I am allowed to work, I pay taxes, therefore I should have healthcare"*

## Knowledge Levels

### How to Apply

Low ————— High

### What Medicare Covers

Low ————— High

### How to Access Care

Low ————— High

## Expectations

- Those who have received care since arriving now have a better understanding of how Medicare and the healthcare system work in New Brunswick.

## Pain Points

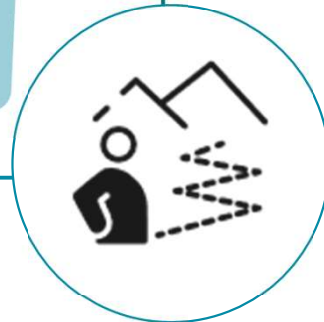
- While waiting for Medicare renewal, may have Canadian-born children now left with no Medicare.
- Disruption of paid care for ongoing health concerns
- Often cannot afford private coverage to bridge the gap

The recently implemented policy by Medicare to allow for 6 month extension of coverage while waiting for the IRCC to renew a permit is a welcome improvement, but potential gaps in coverage remain and disruption of care remains a concern.



## Doing

- Applying for a new permit type or renewing existing permit as part of the path towards permanent residency
- Trying to get updates from IRCC
- Trying to get updates from Medicare
- Going to MP/MLA/media
- Seeking legal advice
- Living my life: Continuing to work, grow my family, etc., as I settle more permanently into life in Canada



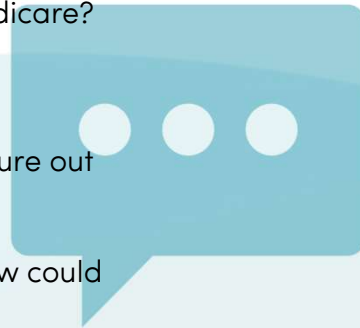
## Feeling

- Stressed: Waiting for extension/renewal of multiple things from multiple institutions.
- Frustrated: when I don't receive any updates, I can't follow-up and I'm dismissed when I call or try to contact Medicare/SNB/IRCC.
- Angry: despite my best efforts to do everything right, after months of no communication, I've been denied.
  - Tired: as the process drags on.
  - Determined: It is my right, I'll go through the process again or seek help from a lawyer, the media, or my MP.



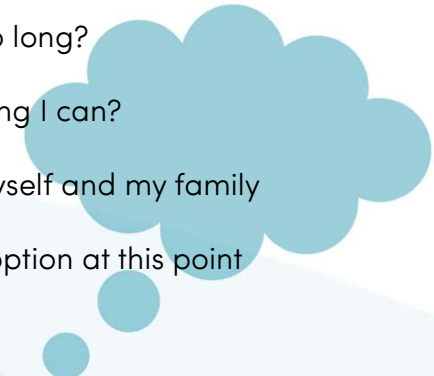
## Saying

- I'm here legally, why don't I have Medicare?
- It's unfair. I contribute, I pay taxes.
- Why can't I just talk to someone to figure out what is going on?
- But my child was born in Canada, how could they not be covered?



## Thinking

- Why does this process have to take so long?
- Why can't they see I'm doing everything I can?
- I can't afford private insurance for myself and my family
- Going home for healthcare is a real option at this point



# Renewing Resident's Unmet Needs



I need to....

Be able to renew my Medicare in a way that eliminates gaps in coverage

know Medicare is aligned with my permissions & requirements to work, live, and pay taxes in New Brunswick

follow-up with Medicare to ensure it's being processed and that I submitted all of the correct information

Feel confident that my children can get care if they need it; without concern of medical bills

have a way to communicate with Medicare, particularly if I move in the middle of the process

# International Intraprovincial

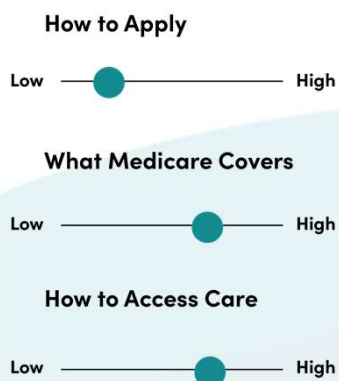


This is an emerging archetype. We only spoke to international students who found themselves ineligible for Medicare. However, we anticipate this cohort growing as the way people think about work and life change in the wake of the pandemic.

International Intraprovincials are international Newcomers arriving in New Brunswick via another province. With an opportunity to work and study remotely, they move to New Brunswick to be close to family, friends, or live in a place with a more desirable quality of life.

*"All of my studies are online; I'd rather live in New Brunswick."*

## Knowledge Levels



## Expectations

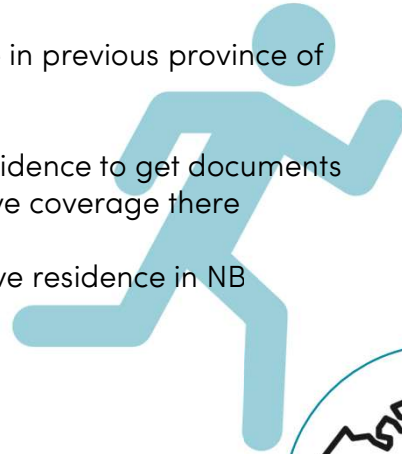
- Expect transition of provincial healthcare to be a simple paperwork exercise.
- Expect that because their permit does not explicitly tie them to any particular province, that they should have access to services in any province they choose to live in.

## Pain Points

- Not clear to them if their permit or work/study situation allows for intra-provincial mobility or Medicare coverage in New Brunswick.
- Jumping through hoops to try to get an exception when ultimately, the answer is no. They are in limbo during this period, trying to understand what they are entitled to.

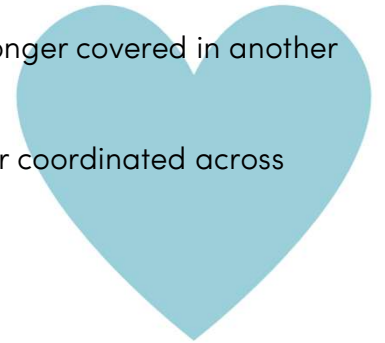
## Doing

- Cancelling my healthcare coverage in previous province of residence
- Contacting previous province of residence to get documents proving I no longer live there or have coverage there
- Trying to get documentation to prove residence in NB
- Settling in a new province
- Renewing IRCC docs



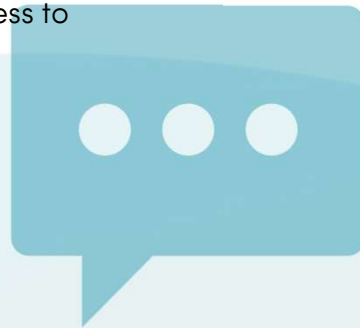
## Feeling

- Unworried at first, because I'm moving within Canada.
- Frustrated, when I have to prove I'm no longer covered in another province to access Medicare in NB
- Confused, I thought healthcare was better coordinated across provinces.



## Saying

- I'm here legally, why can't I have access to Medicare?



## Thinking

- *Must be the same (as another province)*
- *This was better in (another province)*
- *It was so easy (in another province)*
- *I thought it would be a seamless process*



# International Intraprovincial's Unmet Needs



I need to....

Understand how moving provinces affects access to healthcare for my specific circumstance

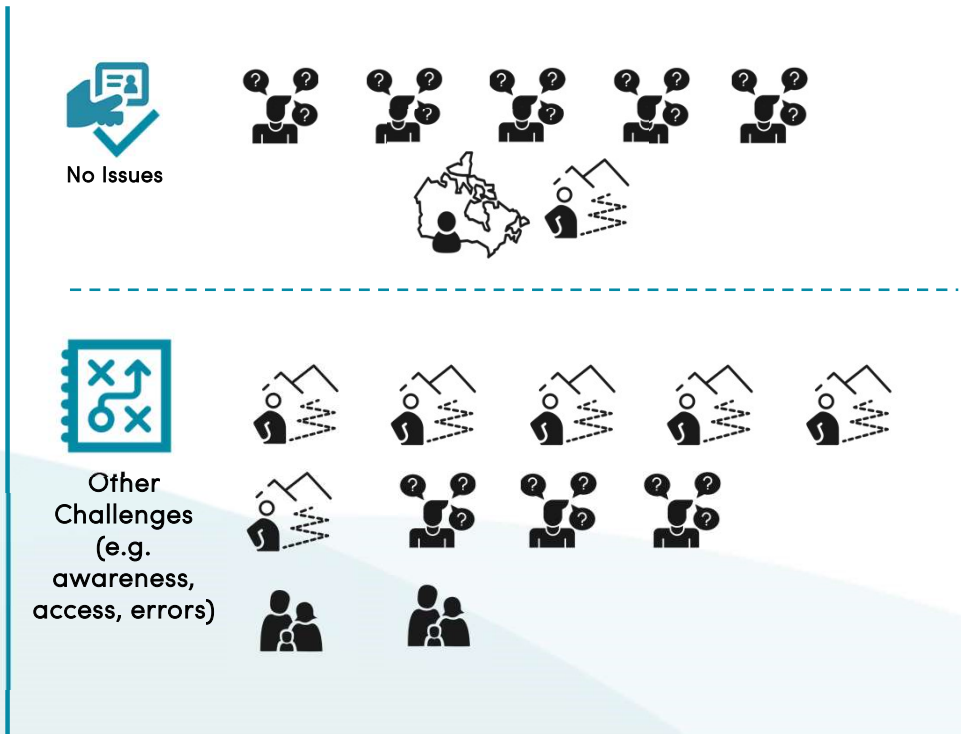
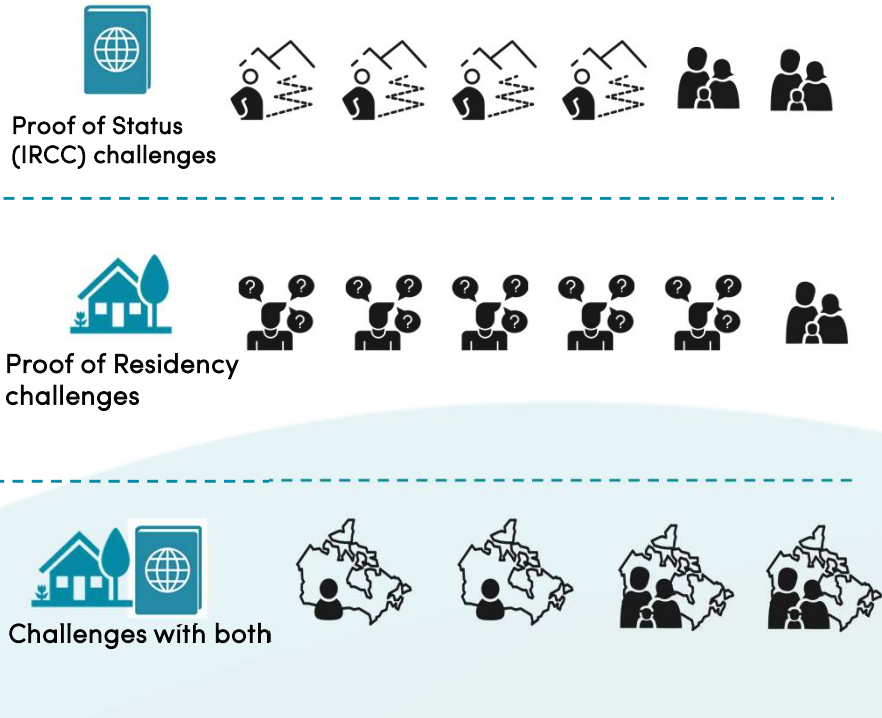
understand, before I decide to move, if my permit type will allow me to move provinces

have an easy way to prove that my care has been cancelled in my previous province

have an easy way to prove that I never had any coverage in my previous province

# Participant Distribution

Not all participants had a poor experience. Many got their Medicare approved with no hassle and within the time promised, though were still unclear about what their card entitles them to.



# Newcomer Support Ecosystem



# Any Questions?

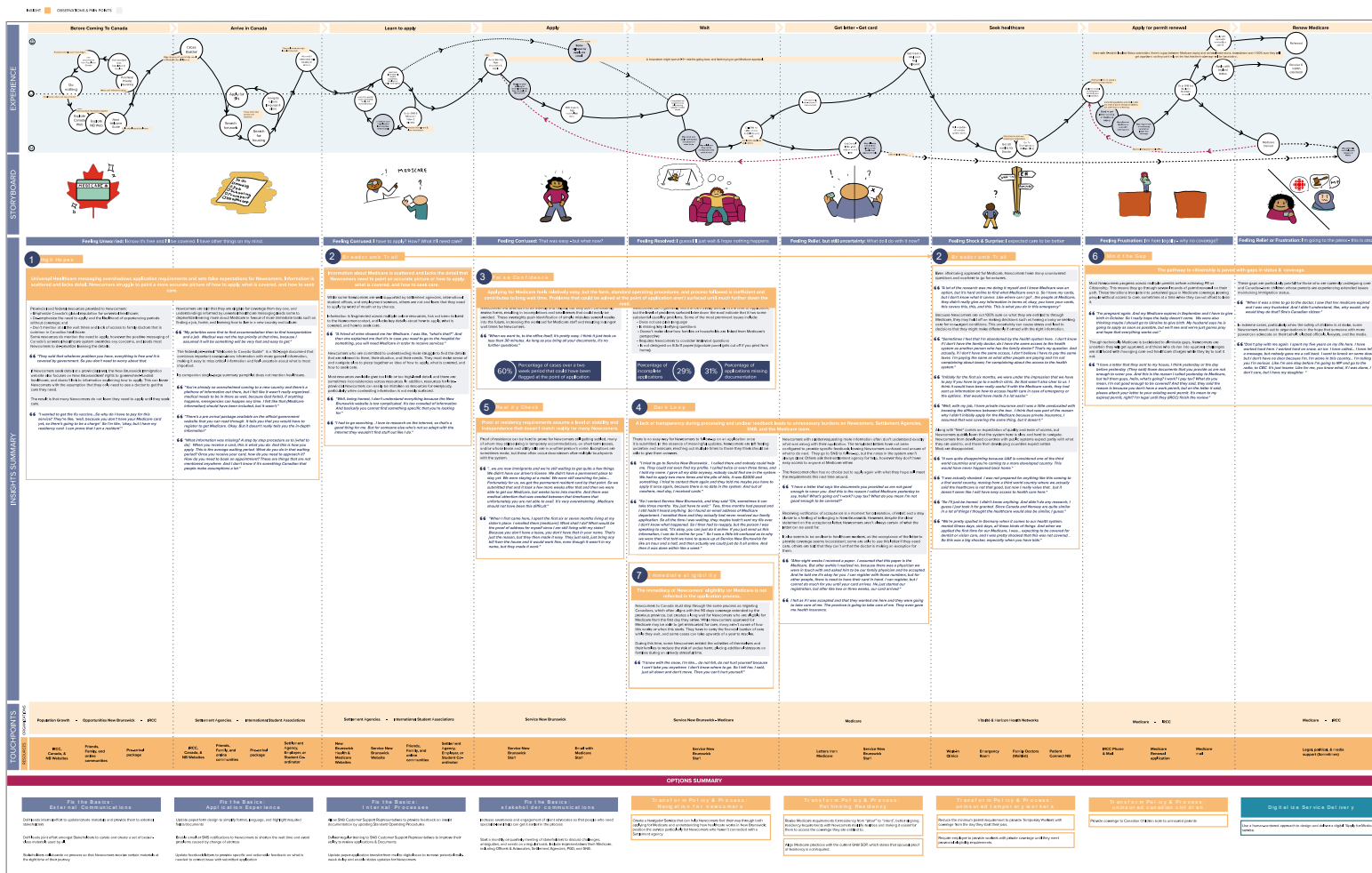
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# Journey Map

# Journey Map: International Newcomers Access to Medicare

Spring 2021

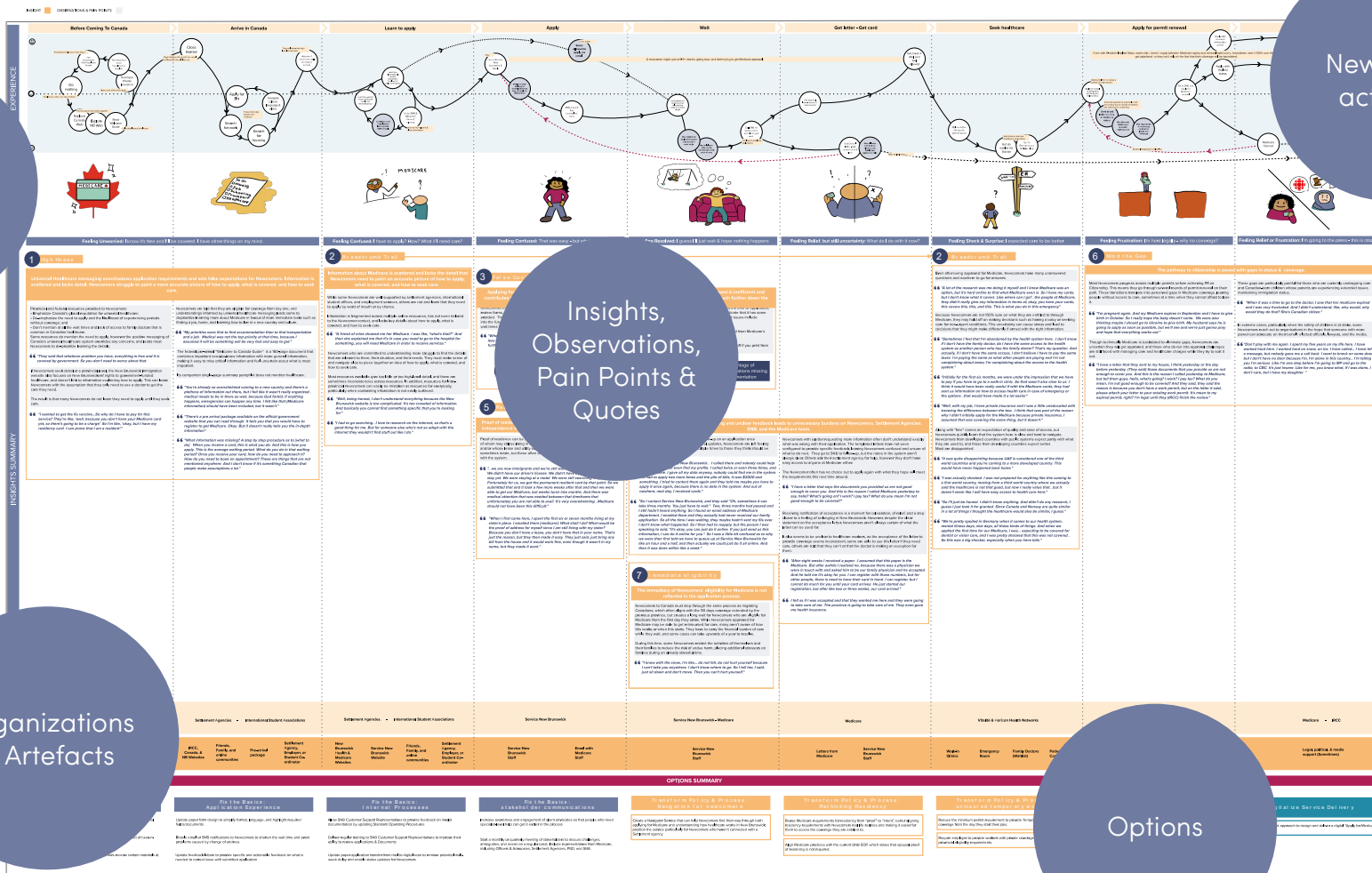


# Journey Map: International Newcomers Access to Medicare

Spring

Storyboard

Newcomer activities



Insights, Observations, Pain Points & Quotes

Organizations & Artefacts

Options

# Journey Map

The journey map summarizes the Newcomer experience of accessing Medicare in New Brunswick. It starts with learning about Canada and Healthcare in general, and moves right through to renewing Medicare due to an expired permit.

This map is a poster-format summarization of this project, outlining the insights and options as they relate to the customer journey.

This map can be printed in large-format and used to:

- Tell the story of Newcomers Experience and challenges
- Increase awareness for the value of Human-centered Design and journey mapping in government

## Journey Map Iteration

As options are considered and implemented, iterating on this map can help you explore:

- How will implementation of an option affect the journey?
- Do we have all of the processes in place that we need to bring people into and out of this part of the experience?
- What are we missing?
- What unintended consequences might happen within this new journey? How can we mitigate those things from happening or rectify them when then do?

# Key Insights

# Insights Summary



1 High Hopes

2 Breadcrumb Trail

3 False Confidence

4 Dark Loop

5 Reality Check

6 Mind the Gap

7 Immediate Eligibility

# Key Insight:

1

## High Hopes

Universal Healthcare messaging overshadows application requirements and sets false expectations for Newcomers. Information is scattered and lacks detail. Newcomers struggle to paint a more accurate picture of how to apply, what is covered, and how to seek care.

“

**You always hear about Canada's healthcare system that it's... that it's one of the best in the world, and it's free.**



# High Hopes



The early stages of the journey are dominated by Canada's global reputation and the overwhelm of having many things to do as Newcomers plan their move to a new country.



Newcomers are told that they are eligible for coverage from day one, and understandings informed by universal healthcare messaging leads some to deprioritize learning more about Medicare in favour of more immediate tasks such as finding a job, home, and learning how to live in a new country and culture.



Nobody owns the responsibility of ensuring that Newcomers are provided with enough information to make an informed choice to move to New Brunswick.



# High Hopes

Provincial and federal resources provided to Newcomers:







- Emphasize Canada’s global reputation for universal healthcare;
- De-emphasize the need to apply and the likelihood of experiencing periods without coverage; and
- Don’t mention at all the wait times and lack of access to family doctors that is common in Canadian healthcare.

“*They said whatever problem you have, everything is free and it is covered by government. So you don't need to worry about that.*”

Some resources do mention the need to apply, however the positive messaging of Canada’s universal healthcare system overrides any concerns, and leads most Newcomers to de-prioritize learning the details.



### Symbols of Canadian Identity

-  Healthcare
-  Charter of Rights and Freedoms
-  RCMP
-  Multiculturalism
-  CBC
-  Hockey

*Tuohy CH. What's Canadian about Medicare? A Comparative Perspective on Health Policy. Healthcare Policy. 2018;13(4):11-22.*

# High Hopes

The details are easy to miss.

The federal pre-arrival “Welcome to Canada Guide” is a 150-page document that combines important need-to-know information with more general information, making it easy to miss critical information and feel uncertain about what is most important.

Its companion single-page summary pamphlet does not mention healthcare.

*“You’re already so overwhelmed coming to a new country and there’s a plethora of information out there, but I felt like it wasn’t really organized...I felt like that (Medicare information) should have been included, but it wasn’t.”*



# High Hopes

If Newcomers seek detail at a provincial level, the New Brunswick Immigration website also focuses on New Brunswickers' rights to government-funded healthcare, and doesn't link to information explaining how to apply.

This can leave Newcomers with the assumption that they only need to see a doctor to get the care they need.

The result is that many Newcomers do not learn they need to apply until they seek care.



*“I wanted to get the flu vaccine...So why do I have to pay for this service? They’re like, ‘well, because you don’t have your Medicare card yet, so there’s going to be a charge’. So I’m like, ‘okay, but I have my residency card. I can prove that I am a resident’.*



# Key Insight:

2

## **Breadcrumb Trail**

Information about Medicare is scattered and lacks the detail that Newcomers need to paint an accurate picture of how to apply, what is covered, and how to seek care.

“

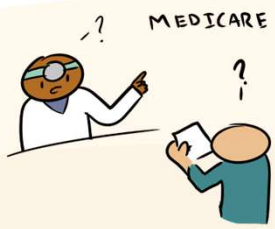
**You're kind of on your own to explore and find out information... and when you're coming from another country, you're already overwhelmed by so many factors.**

# Breadcrumb Trail

## Learn to Apply

While some Newcomers are well supported by settlement agencies, international student offices, and employment services, others are not and learn that they need to apply by word of mouth or by chance.

Information is fragmented across multiple online resources, has not been tailored to the Newcomer context, and lacks key details about how to apply, what is covered, and how to seek care.



## Seek Healthcare

When a gap between expectations and reality is revealed, Newcomers are left confused and disappointed in their decision to come to New Brunswick.



## Breadcrumb Trail

Newcomers who are committed to understanding more struggle to find the details that are relevant to them, their situation, and their needs.

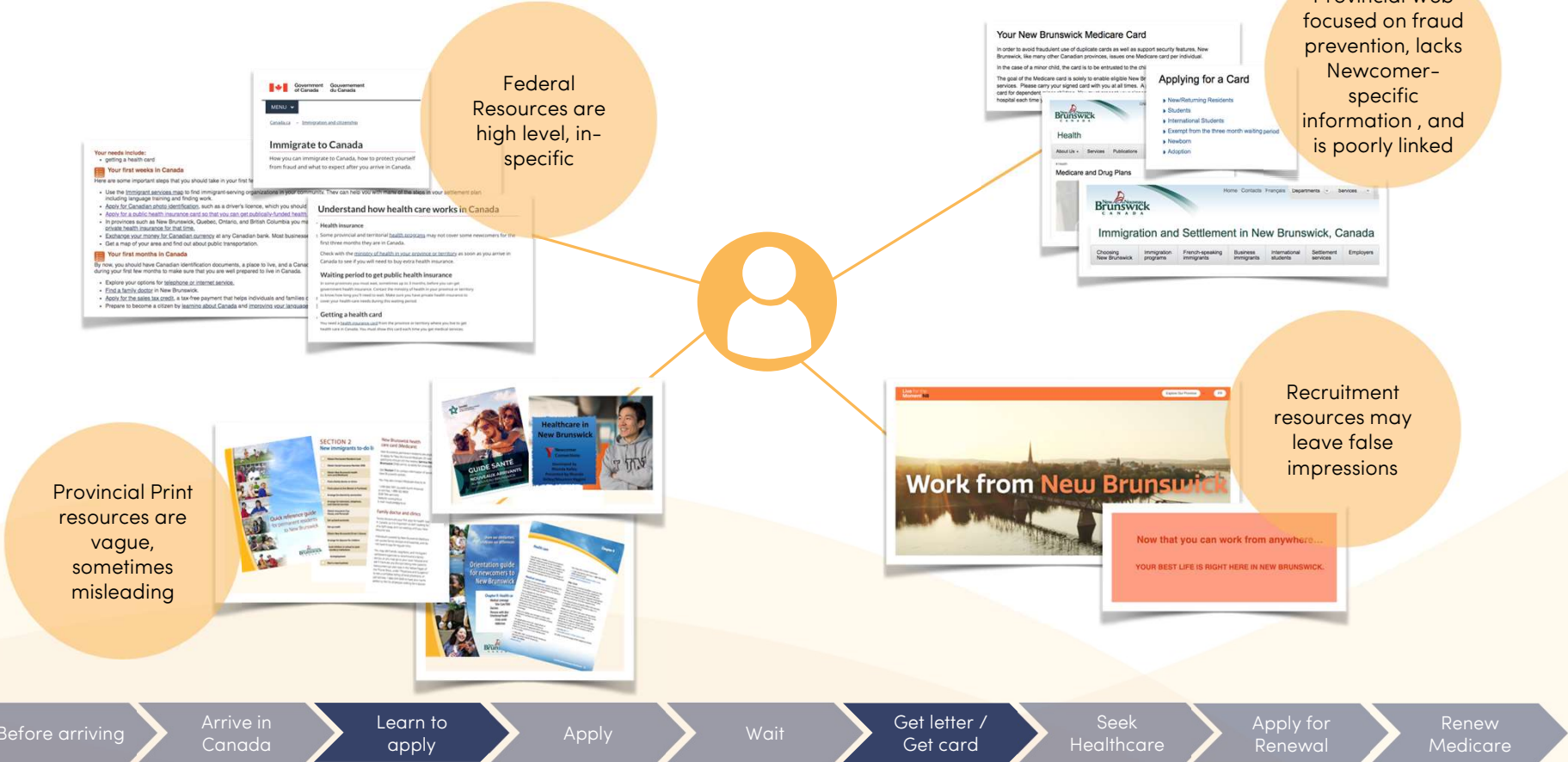
They must make sense of and navigate silos to piece together an idea of how to apply, what is covered, and how to seek care.

Most resources available give too little or too high-level detail, and there are sometimes inconsistencies across resources. In addition, resources for Intra-provincial Newcomers can easily be mistaken as resources for everybody, particularly when contrasting information is not easily surfaced.





# Breadcrumb Trail



## Breadcrumb Trail

Newcomers are simply not able to make sense of the information that is available to them, and often miss important details all together.

*“Well, being honest, I don’t understand everything because the New Brunswick website is too complicated. It’s too crowded with information. And basically you cannot find something specific that you’re looking for.*

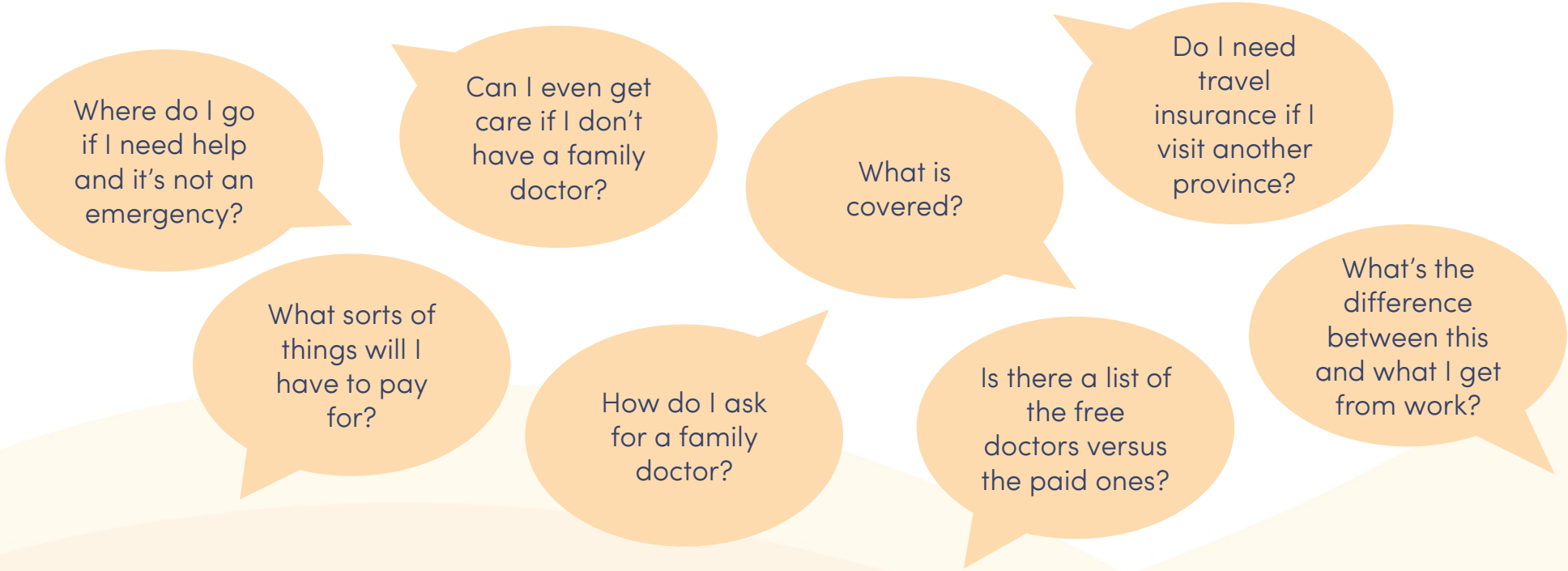
*“A friend of mine showed me her Medicare. I was like, ‘what’s that?’ And then she explained [to] me that it’s in case you need to go to the hospital for something, you will need Medicare in order to receive services.*

*“I had to go searching...I love to research on the internet, so that’s a good thing for me. But for someone else who’s not so adept with the internet they wouldn’t find stuff out like I do.*



# Breadcrumb Trail

Newcomers have so many unanswered questions and nowhere to go for answers.



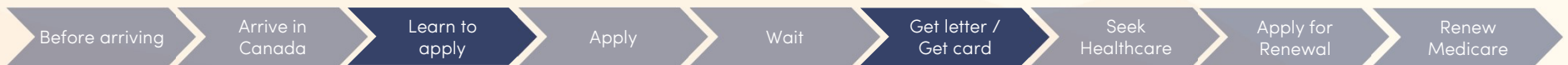
## Breadcrumb Trail

Because Newcomers are not 100% sure on what they are entitled to through Medicare, they may hold off on making decisions such as having a baby or seeking care for non-urgent conditions.

“*Sometimes I feel that I’m abandoned by the health system here...I don’t know if I don’t have the family doctor, do I have the same access to the health system as another person who has the family doctor? That’s my question. And actually, if I don’t have the same access, I don’t believe I have to pay the same taxes. I’m paying the same as what other people are paying and I’m not complaining about taxes; I’m complaining about the access to the health system.*”

This uncertainty can cause stress and lead to decisions that they might make differently if armed with the right information.

“*Initially for the first six months, we were under the impression that we have to pay if you have to go to a walk-in clinic. So that **wasn’t clear** to us. I think it would have been really useful if with the Medicare cards, they had sent us information on how to access health care in case of emergency or the options...that would have made it a lot easier.*”



## Breadcrumb Trail

Along with “free” comes an expectation of quality and ease of access, but Newcomers quickly learn that the system here is slow and hard to navigate. Newcomers from developed countries with public systems expect parity with what they are used to, and those from developing countries expect better.

Most are disappointed.



## Breadcrumb Trail

“We’re pretty spoiled in Germany when it comes to our health system, mental illness days, sick days, all those kinds of things. And when we applied the first time for our Medicare, I was... expecting to be covered for dentist or vision care, and I was pretty **shocked** that this was not covered... So this was a big shocker, especially when you have kids.

“So I’ll just be honest. I didn’t know anything. And didn’t do any research, I guess **I just took it for granted**. Since Canada and Norway are quite similar in a lot of things **I thought the healthcare would also be similar, I guess**.

“It was quite **disappointing** because UAE is considered one of the third world countries and you're coming to a more developed country. This would have never happened back home.

“I was actually **shocked**. I was not prepared for anything like this coming to a first world country, moving from a third world country where we actually said the healthcare is not that good, but now I really value that...but it doesn’t seem like I will have easy access to health care here.



## Key Insight:

3

### **False Confidence**

Applying for Medicare feels relatively easy, but the form, standard operating procedures, and process followed is inefficient and contributes to long wait time. Problems that could be solved at the point of application aren't surfaced until much further down the road.

**“ After 9 weeks I contacted SNB and they said you just have to wait. I said, I have a daughter, what if something happens to her? They said, just wait.**

**After 3 months I found the Medicare email and contacted them, and they had never actually received our application.**



# False Confidence



The majority of Newcomers we spoke to found the process of applying for Medicare to be relatively easy. The form is short and SNB staff are friendly and helpful.

But a lack of adequate feedback at point of submission is leading to Newcomers finding out weeks or months later that their application contains errors or is incomplete.



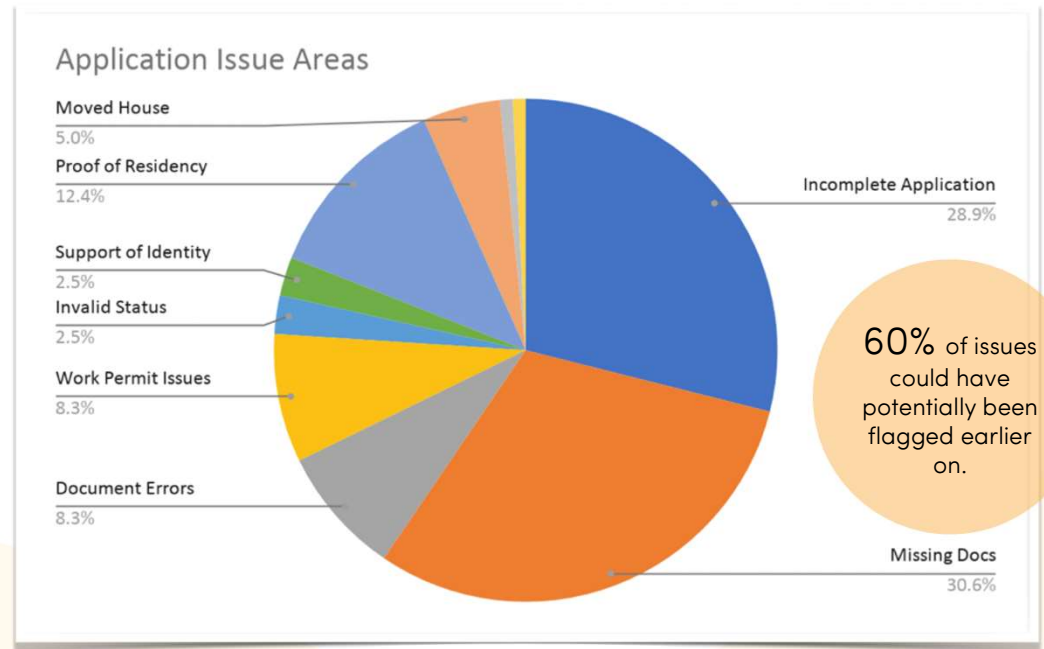
# False Confidence

An analysis of cases handled by the Medicare team over a two week period in April 2021, found that 90/151 ("60%) submitted applications had issues that prevented a decision being made on the eligibility of the application.

There are 2 main issues driving this problem:

- The design of the form (and accompanying guidance); and
- The level of support provided by SNB staff.

*“When we went to the office itself, it’s pretty easy. I think it just took us less than 30 minutes. As long as you bring all your documents, it’s no further questions.”*

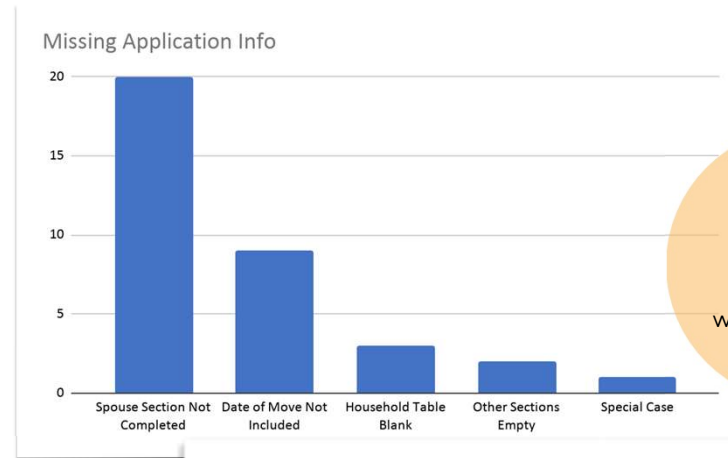


# False Confidence

## SNB Staff Support

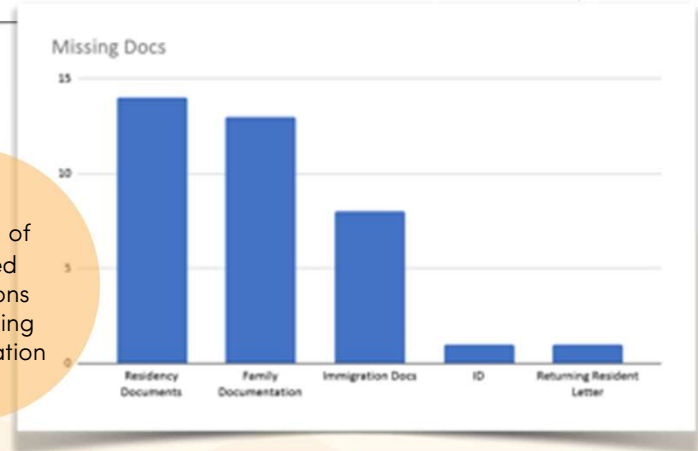
Newcomers find SNB staff to be friendly and helpful, but they don't consistently review forms, resulting in incompletions and small errors that could easily be avoided. In the two-week period we analyzed, almost 30% of the forms simply weren't completed.

These oversights push identification of simple mistakes several weeks into the future, increasing the workload for Medicare staff and resulting in longer wait times for Newcomers.



28.9% of submitted applications were incomplete

30.8% of submitted applications were missing documentation



# False Confidence

Current standard operating procedures require SNB staff to ensure the completeness of applications, but prevents them from stopping the submission of an application that is missing supporting documentation.

Many errors are slipping through the SNB safety net, but it is important to remember that SNB are the touchpoint for over 200 services. In this case, they are asked to provide specialist-level support in a generalist environment.

***From the Standard Operating Procedures:***

*If the client does not provide all the documentation required, does not have the correct documentation, or provided documentation which is not listed, please copy what they are providing and forward it to Medicare with a note indicating that “customer did not provide any other documentation”.*



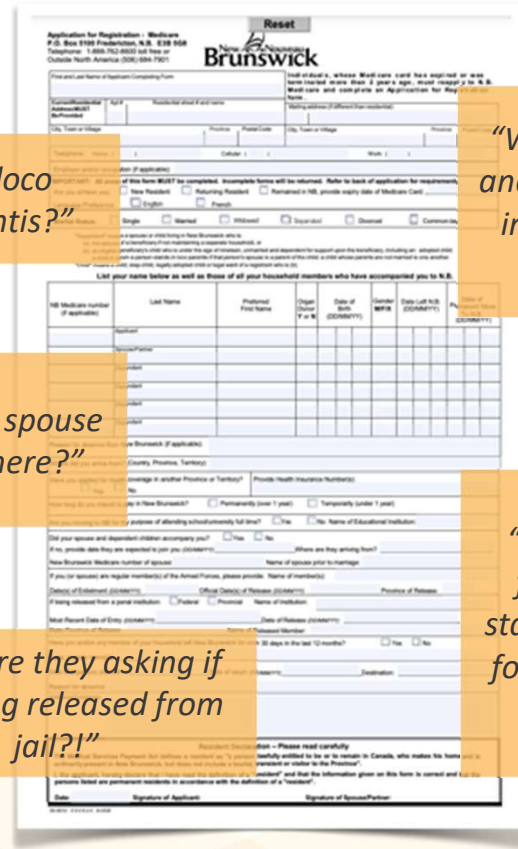
# False Confidence

## Application Form Design

Newcomers don't generally find the form overly difficult at the time of application, but the level of problems surfaced later down the road indicate that it has some substantial usability problems.

Some of the most prominent issues include:

- Does not use plain language
- Is missing key clarifying questions
- Doesn't make clear how families or households are linked from Medicare's perspective
- Requires Newcomers to consider irrelevant questions
- Is not designed on 8.5x11 paper (signature panel gets cut off if you print from home)



*"In loco parentis?"*

*"What if I'm married and my spouse has no intention of joining me?"*

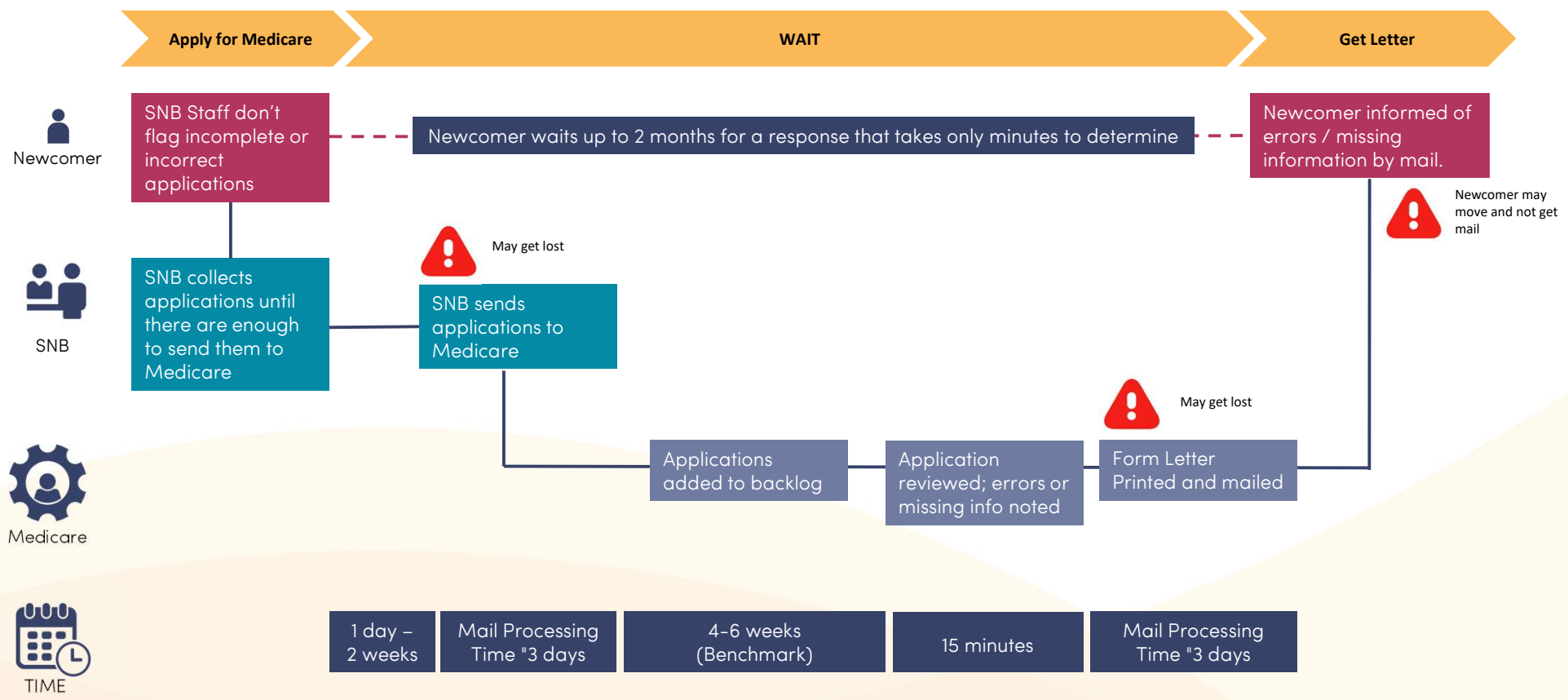
*"What if my spouse is already here?"*

*"Where did I arrive from? Montreal: I stayed with my cousin for two weeks before coming to NB."*

*"Why are they asking if I'm being released from jail?!"*



# False Confidence



## Key Insight:

4

### **Dark Loop**

A lack of transparency during processing and unclear feedback leads to unnecessary burdens on Newcomers, Settlement Agencies, SNB, and the Medicare team.

“

I tried to go to Service New Brunswick... nobody could help me. They could not even find my profile. I called twice or even three times... I gave all my data. Nobody could find me in the system. We had to apply two more times and the pile of bills, it was \$2000 and something.



# Dark Loop



There is no easy way for Newcomers to follow-up on an application once it is submitted. In the absence of meaningful updates, Newcomers are left feeling uncertain and insecure, reaching out multiple times to those they think should be able to give them answers.



The letters that they eventually receive lack clarity.

- For those who are asked to correct problems with their application, this can lead to multiple failing attempts to provide the information that is being requested.
- For those who are successful, a moment of celebration is quickly followed by questions of what comes next.

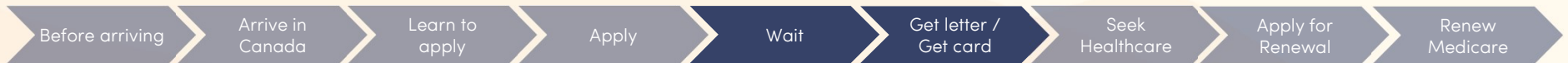
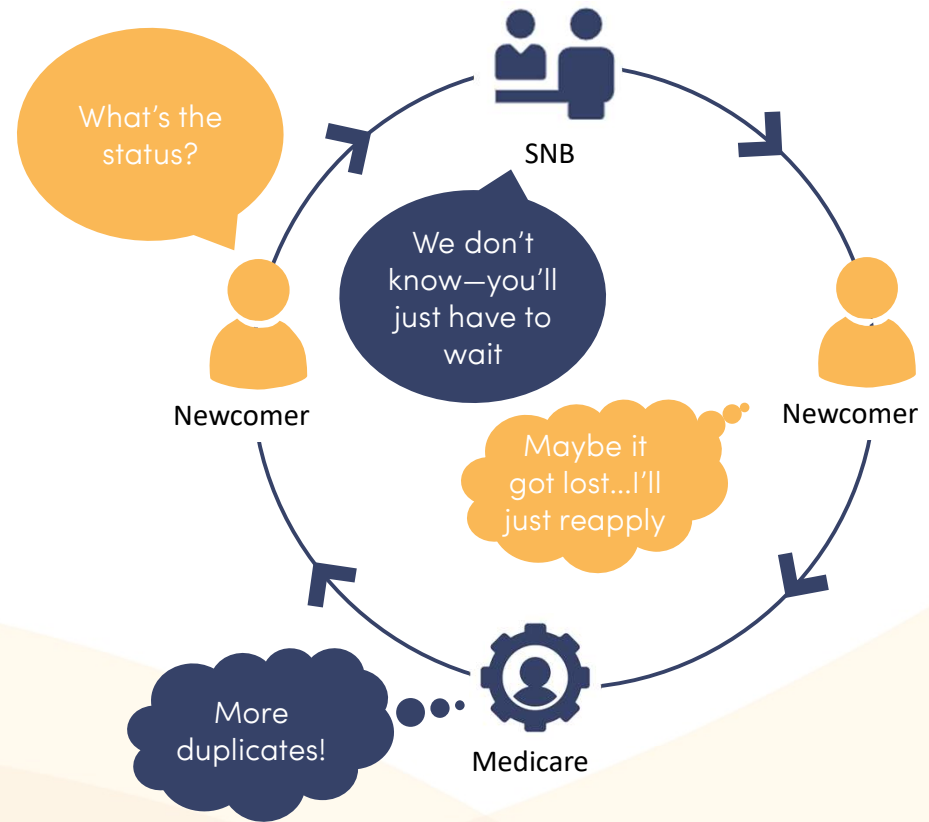


# Dark Loop

The inability to follow-up on an application means that Newcomers are often not confident that their paperwork made it into the right hands.

This lack of transparency leads to:

- Unnecessary emotional strain on Newcomers and their families who may reapply out of desperation and fear that their original application has been lost; and
- Avoidable burden on Settlement SNB and Medicare teams as they respond to enquiries and handle duplicate applications.



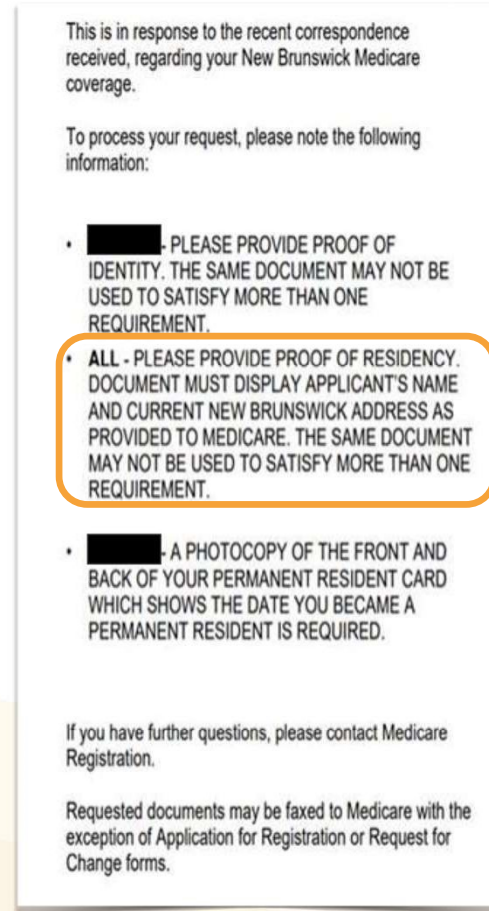
# Dark Loop

Newcomers with a letter requesting more information often don't understand exactly what was wrong with their application. The templated letters have not been configured to provide specific feedback, leaving Newcomers confused and unsure of what to do next.

They go to SNB to follow-up, but the notes in the system aren't always clear. Others ask their settlement agency for help, however they don't have easy access to anyone at Medicare either.

The Newcomer often has no choice but to apply again with what they hope will meet the requirements this next time around.

- 1
- 2
- 3
- 4
- 5
- 6
- 7



*The same message is sent regardless of whether applicant submitted something to demonstrate proof of residency or not. e.g. if they have already submitted a month-to-month lease.*



# Dark Loop

Receiving notification of acceptance is a moment for celebration, of relief, and a step closer to a feeling of belonging in New Brunswick.

However, despite the clear statement on the acceptance letter, Newcomers aren't always certain of what the letter can be used for.

It also seems to be unclear to healthcare workers, as the acceptance of the letter to provide coverage seems inconsistent; some are able to use this letter if they need care, others are told that they can't or that the doctor is making an exception for them.

*“ I felt as if I was accepted and that they wanted me here and they were going to take care of me. The province is going to take care of me. They even gave me health insurance.*

*“ After eight weeks I received a paper...I assumed that this paper is the Medicare. But after awhile I realized no, because there was a physician we were in touch with and asked him to be our family physician and he accepted. And he told me it's okay for you. I can register with those numbers, but for other people, there is need to have their card in hand. I can register, but I cannot do much for you until your card arrives. He just started our registration, but after like two or three weeks, our card arrived.*



## Key Insight:

5

### Reality Check

Proof of residency requirements assume a level of stability and independence that doesn't match reality for many Newcomers.

**“ It's very overwhelming because you need to find a permanent place to stay, find a job to sustain yourselves, figure out how to get around. So you're, worrying about all these things and you're trying your best.**

# Reality Check

Proof of residence can be hard to prove for Newcomers still getting settled, many of whom may still be living in temporary accommodations, on short term leases, and/or whose lease and utility bills are in another person's name.

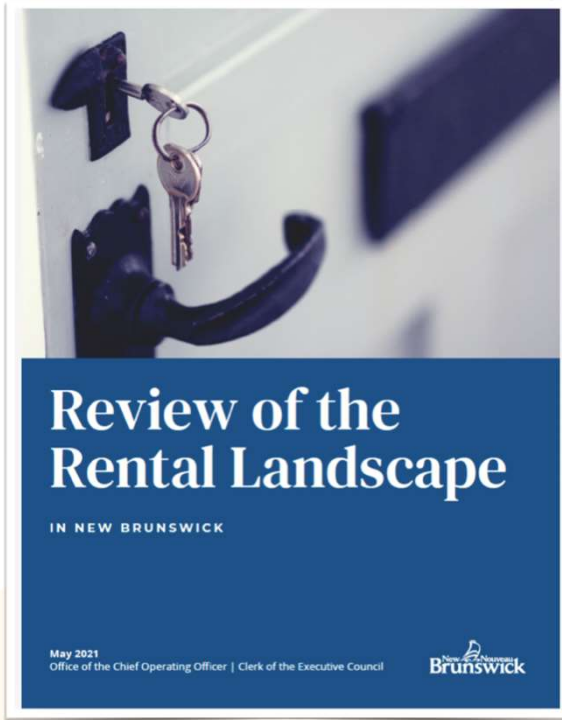
The year-long lease requirement is problematic for a number of reasons:

- The requirement itself is poorly communicated (the only evidence of that requirement is on the back of the application form);
- It is well documented that there is a shortage of affordable, appropriate rental units for Newcomers in New Brunswick;
- It takes time to learn neighbourhoods enough to commit to one long-term; and
- While harder to obtain than month-long leases, year-long leases are no guarantee that an individual will stay in that location.

*“...we are new immigrants and we're still waiting to get quite a few things. We didn't have our driver's license. We didn't have a permanent place to stay yet. We were staying at a motel. We were still searching for jobs...Fortunately for us, we got the permanent resident card by that point. So we submitted that and it took a few more weeks after that and then we were able to get our Medicare, but weeks turns into months. And there was medical attention that was needed between that timeframe that unfortunately you are not able to avail. It's very overwhelming...Medicare should not have been this difficult.*”



# Reality Check



**Newcomers** are impacted by low-vacancy rates because most must rent upon arrival to build a Canadian credit history. On top of this, many newcomers spend more than 30% on rent and have trouble navigating their new community, making finding the right place a challenge. A recent survey found many newcomers felt discriminated against while finding housing.

// *Being an international student with a family, I found it way too difficult to find an accommodation. Some of the landlords denied as they were not renting out to students and some others denied as they were not giving for families..."*

// *We are a stable family with two viable careers but due to lack of housing we can't move into NB despite having jobs lined up. I'm not sure how NB can grow its population or income when people can't move there due to extremely limited availability of rental places."*

**New Brunswick is committed to growing our population and building our economy through immigration. The plan is to welcome more than 10,000 newcomers annually by 2027 to the province and these people need places to live.**





# Reality Check

Acquiring named proof of residency for Newcomers can be especially problematic for families from cultures where the head of the family takes sole responsibility for administrative duties.

This challenge is further compounded when the children's access to Medicare is dependent on the Newcomer who cannot satisfy proof of residency requirements despite having valid immigration status and is living with their spouse who has successfully obtained Medicare coverage.

Exceptions are sometimes made, but these often occur downstream after multiple touchpoints with the system.

*“When I first came here, I spent the first six or seven months living at my sister's place. So it was just a matter of how, how to put my proof of address? That was a little bit of a problem with Medicare. I emailed them: What shall I do? What would be the proof of address for myself since I am still living with my sister? Because you don't have a lease, you don't have that in your name. That's just the reason, but they then made it easy. They just said, just bring any bill from the house and it would work fine, even though it wasn't in my name, but they made it work.”*



# Reality Check

Proof of Residency is one of the biggest issues Newcomers face.

The Client Advocates who are best empowered to work through the most complex cases are often not involved until after the Newcomer has exhausted all avenues, potentially looping through multiple rounds of applications and letters requesting more information.

Awareness of this resource is low amongst Newcomers and the Settlement Agencies who support them. They are left feeling that they have no one to turn to when they no longer know what to do.

*“I wish I just had someone at Medicare I could actually talk to; maybe then we could get to the bottom of this. But they keep sending letters and we keep trying to explain the situation but nothing is working.”*

— Settlement Agency



# Reality Check

The responsibility to determine whether a Newcomer intends to establish residency lies with the Director of Medicare.

Ultimately, the Medicare Act is asking the Director to predict events and behaviours that are yet to have taken place, and placing the burden of proof on Newcomers.

*4(5) Immigrants who, in the opinion of the Director, are or **will become** permanent residents under the Immigration Act (Canada) and Canadian citizens as defined in the Citizenship Act (Canada) who have entered the Province from another country shall be entitled to become beneficiaries on the first day of arrival in the Province **if they will, in the opinion of the Director, establish residence in the Province.***

Medicare Services & Payment Act



# Key Insight:

6

## Mind the Gap

The pathway to citizenship is paved with gaps in status/coverage.

**“ I’m pregnant again. And my Medicare expires in September and I have to give birth in October. So I really hope the baby doesn’t come. We were also thinking maybe I should go home to give birth. My husband says he is going to apply as soon as possible, but we’ll see and we’re just gonna pray and hope that everything works out.**

# Mind the Gap



Most Newcomers progress across multiple permits before achieving PR or Citizenship.

This means they go through several rounds of permit renewal on their path.

These transitions translate into perceived gaps in Medicare coverage, leaving people without access to care, sometimes at a time when they cannot afford to lose it.

Though technically Medicare is backdated to eliminate gaps, Newcomers are uncertain they will get approved, and those who do run into approval challenges are still faced with managing care and healthcare charges while they try to sort it out.



# Mind the Gap

In the wake of COVID-19, Medicare introduced measures to provide six months of coverage for Newcomers who find themselves in implied status, which can be extended if needed.

While this goes a long way to address the many of the challenges that Renewing Residents faced, the processes of applying and waiting means that there are still substantial gaps in coverage. These gaps are particularly painful for those who are currently undergoing care and Canadian-born children whose parents are experiencing extended issues maintaining immigration status.

In extreme cases, particularly when the safety of children is at stake, some Newcomers reach out to organisations in the hope that someone with more power can advocate on their behalf: elected officials, lawyers, and the media.

*“Don't play with me again. I spent my five years on my life here. I have worked hard here. I worked hard on snow, on ice. I have called... I have left a message, but nobody gave me a call back. I want to knock on some door, but I don't have no door because I'm, I'm alone in this country...”*

*I'm telling you I'm serious. Like I'm one step before I'm going to MP and go to the radio, to CBC. **It's just insane.** Like for me, you know what, if I was alone, I don't care, but I have my daughter.*



## Key Insight:

7

### **Immediate Eligibility**

The immediacy of Newcomers' eligibility for Medicare is not reflected in the application process.



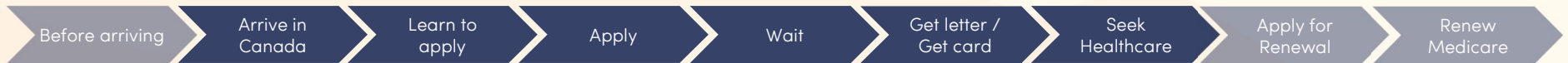
**“ I know with the snow, I'm like... do not fall, do not hurt yourself because I can't take you anywhere. I don't know where to go. So I tell her, I said, just sit down and don't move. Then you can't hurt yourself.**

# Immediate Eligibility

Newcomers to Canada must step through the same process as migrating Canadians, which often aligns with the 90 days coverage extended by the previous province, but creates a long wait for Newcomers who are eligible for Medicare from the first day they arrive.

While Newcomers approved for Medicare may be able to get reimbursed for care, many aren't aware of how this works or when this starts. They have to carry the financial burden of care while they wait, and some cases can take upwards of a year to resolve.

During this time, some Newcomers restrict the activities of themselves and their families to reduce the risk of undue harm, placing additional stressors on families during an already stressful time.



# Any Questions?

5 mins

# Opportunities & Options

# A Continuum of Options

## Fix the Basics

Address and repair dysfunctional elements of the current system

## Transform Policy & Process

Evolve the service to better meet the changing needs of a growing New Brunswick

## Digitalize Service Delivery

Employ best practices of Digital Government to create an "Apply for Medicare" service that meets user\* needs

Reactive

Proactive

\*users aren't just applicants, but also include front line staff who must engage the process to do their jobs.

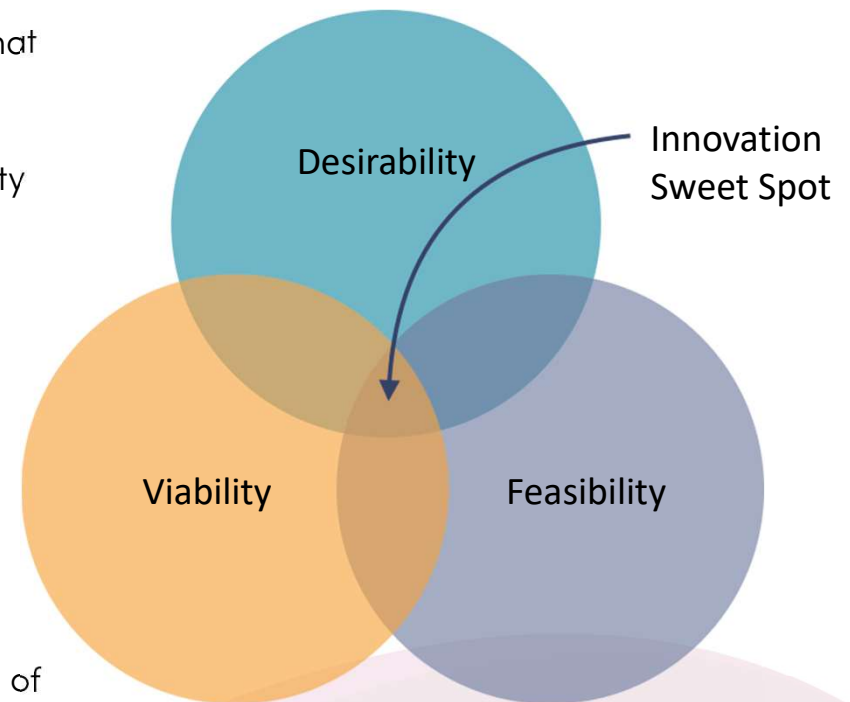
# Option Evaluation Criteria

The innovation “sweet spot” is said to be at the intersection of what is **desirable** (is needed), **feasible** (is something that we can implement), and **viable** (is financially sustainable).

For the purpose of the evaluation, we have focused on desirability and feasibility of each option.

- **Desirability:**
  - Effectiveness;
  - Political Alignment;
- **Feasibility:**
  - Organizational Complexity;
  - Executional Complexity;
  - Administrative Complexity;

In the absence of data needed to evaluate the financial sustainability of each option, we have included a proxy measure of *Relative Cost* (the cost of the option in relation to other options proposed).



# Option Evaluation Criteria

## Desirability

## Feasibility

## Viability

Effectiveness	Political Alignment	Organizational Complexity	Execuational Complexity	Administrative Complexity	Relative Cost
Degree to which the option addresses or responds to the problem	Alignment with current government priorities	Stakeholders involved and the nature of the relationships between them	Maturity of- and familiarity with proposed approach	Legislative, policy, or procedural changes required	In relation to other options being proposed
Compensates	None	Single department	Good practice	Procedure	Low
Reduces	High Performing Government	Multi department / engaged external stakeholders	Best practice / proven internally	Policy	Medium
Resolves	Increase Immigration	Unengaged external stakeholders	Emerging practice / proven externally	Legislation	High



Low



Medium



High

# Fix the Basics

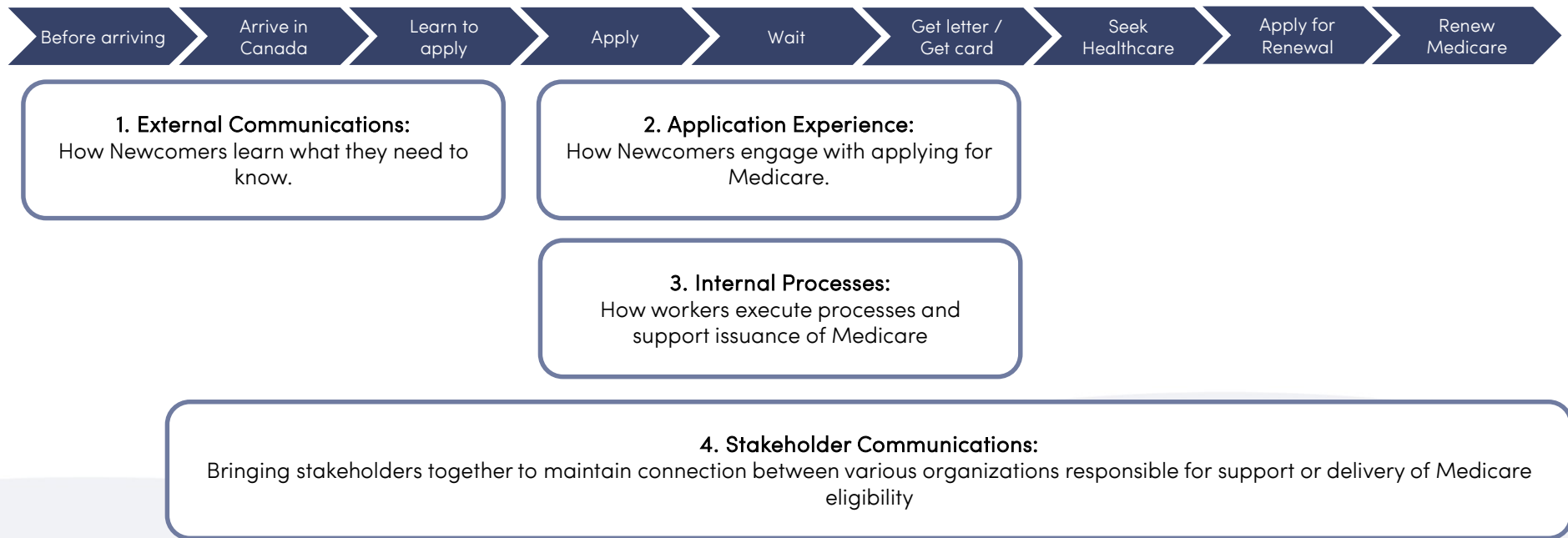
Address and repair dysfunctional elements of the current system.

The bottom of the slide features a decorative graphic consisting of several overlapping, semi-transparent, light blue wavy shapes that create a sense of movement and depth.

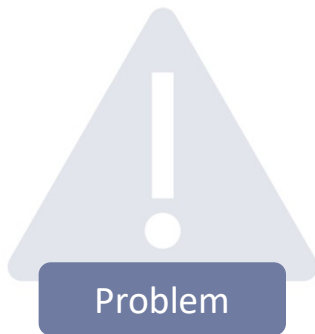


# Fix the Basics

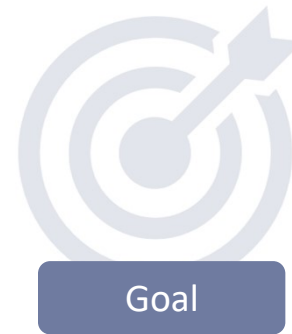
There are 4 key areas where fixes can be applied across the journey.



# 1. External Communications: Problem



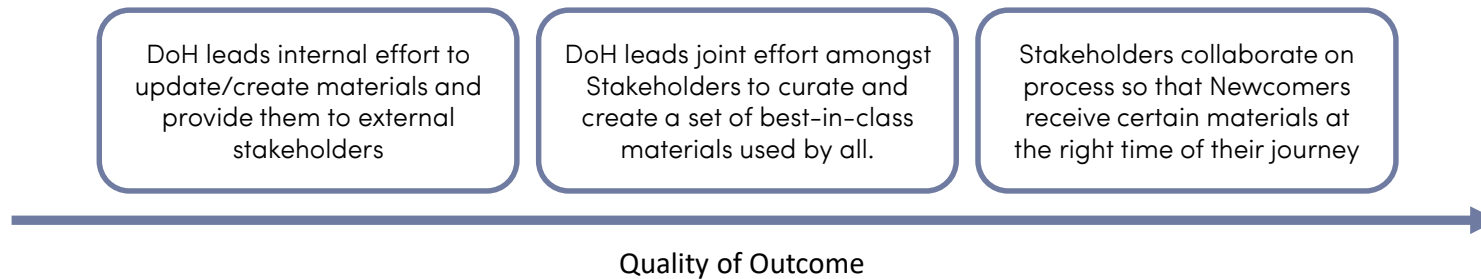
Current communication is fragmented, inconsistent, and fails to adequately inform or prepare Newcomers.



Newcomers are informed and prepared for the requirements and realities of applying for and accessing Medicare.

# 1. External Communications: Options

There are three (3) options; each option builds on the previous, increasing the quality of the fix for both Newcomers and Stakeholders.



**Summary:** Core to these options is a Department of Health-led effort to update existing and create new resources for stakeholders and Newcomers. This work would address issues of misinformation and inconsistencies by creating one source of truth for Medicare-related information for International Newcomers.

Information should:

- Explain when coverage starts, and what Newcomers should do in the meantime
- Explain the application process up-front, giving visual examples of documentation requirements
- Lay out the coverage model used in Canadian Healthcare
- Set realistic expectations for access to healthcare in New Brunswick

Resources should include all paper and web-based information sources and should use a welcoming tone and avoid the defensive, fraud-focused language of many of the existing government Medicare pages.

# 1. External Communications: Evaluation

	Effectiveness	Political Alignment	Organizational Complexity	Executorial Complexity	Relative Cost	Administrative Complexity
DoH leads internal effort to update/create materials and provide them to external stakeholders	Medium	High (Supports Immigration)	Low	Low	Low	N/A
DoH leads joint effort amongst Stakeholders to curate and create a set of best-in-class materials used by all.	Medium	High (Supports Immigration)	Medium	Low	Low	N/A
Stakeholders collaborate on process so that Newcomers receive certain materials at the right time of their journey	High	High (Supports Immigration)	Medium	Low	Low	N/A

# 1. External Communications: Outcomes



## Newcomers

Come to Canada with more accurate expectations, and have a better understanding of what Medicare is, how to (successfully) apply, how to seek care, and what is covered.



## Settlement Agencies

Have reliable resources they can trust, and while they have contributed to them, they do not need to spend time creating and updating their own.



## Medicare Officers

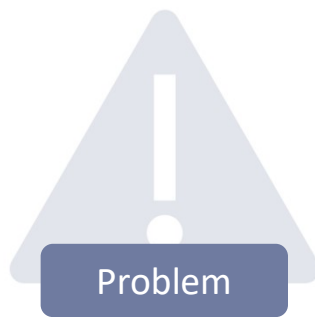
See a reduction in documentation errors, and a reduced call load.



## New Brunswick Government

Benefit from a reduction in complaints to media regarding Newcomers' negative experiences and the unexpected state of healthcare in New Brunswick.

## 2. Application Experience: Problem



The end-to-end application experience is challenging for Newcomers.

- The form is rarely completed properly
- There is no way to check the status of an application
- When feedback does arrive, it is generic.

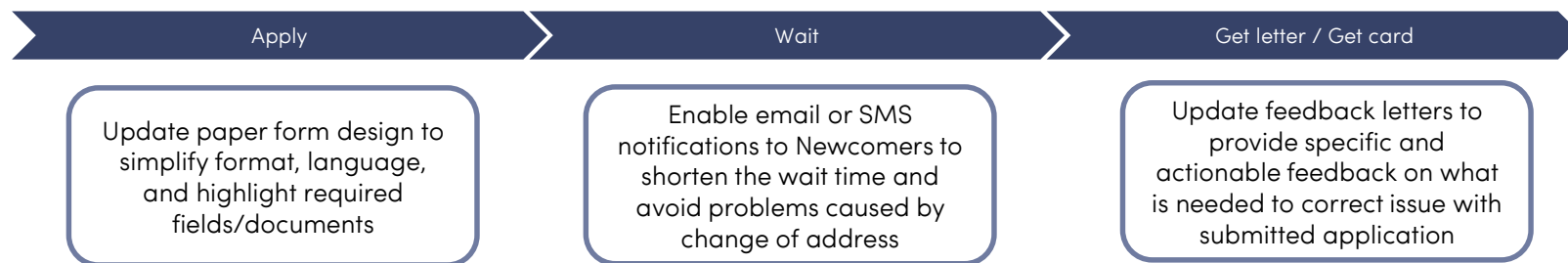
All of these lead to stress on Newcomers, prolonged processing times, and failure demand.



Newcomers submit forms correctly more often, know where they are in the process, and understand what they need to do to rectify problems. It takes fewer transactions to correct issues, there are fewer duplicate applications. There are fewer calls to SNB and Medicare team

## 2. Application Experience: Options

There are three (3) options in the area of Application Experience. Each option affects a different stage of the journey.



**Summary:** These options focus on core front-facing components of the Application Experience.

Improvements to the Application Experience should result in increased forms understanding and completion accuracy, increased understanding when requirements are not met, and a reduction of stress for Newcomers as they wait to hear back from Medicare.

Much of the Application Experience can be improved by engaging a content designer, in consultation with the Medicare team, and by deploying usability testing with newcomers to validate effectiveness of redesigned experience elements.

We recommend considering a move from generalized (one form for everyone, generic form letters), to more specific (unique forms potentially aligned with permit types, more specific feedback in letters).

## 2. Application Experience: Evaluation

	Effectiveness	Political Alignment	Organizational Complexity	Executorial Complexity	Relative Cost	Administrative Complexity
Update paper form design to simplify format, language, and highlight required fields/documents	High	High (Supports Immigration)	Low	Low	Low	N/A
Enable email or SMS notifications to Newcomers to shorten the wait time and avoid problems caused by change of address	Medium	High (Supports Immigration)	Low	Medium (Privacy review)	Low	Low (Privacy review)
Update feedback letters to provide specific and actionable feedback on what is needed to correct issue with submitted application	High	High (Supports Immigration)	Low	Low	Low	N/A



## 2. Application Experience: Outcomes



### **Newcomers**

Have a greater chance of getting the form right the first time, can feel confident their application has been received, and understand what is being asked of them when they do get it wrong.



### **SNB Customer Service Representatives**

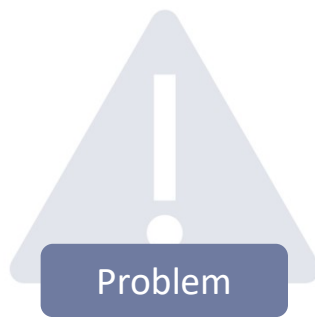
Reduced call volumes from Newcomers trying to decipher feedback from Medicare.



### **Medicare Officers**

See a reduction in forms errors in incompletions, experience lower call volumes for questions about letters, receive fewer duplicate applications.

### 3. Internal Processes: Problem



Forms errors, document omissions, and length of overall processing times are driven by a need for process and procedure change at SNB



Forms errors and documents omissions are flagged at the point of application, allowing Newcomers to correct things quickly. Processing times are shortened due to more efficient document handover between SNB & Medicare.

# 3. Internal Processes: Options

There are three (3) options affecting Internal Processes. Each option occurs during the “Apply” stage of the journey and focuses primarily on processes at the first point of application contact; Service New Brunswick



**Summary:** These options focus on core internal processes that support the Application Experience.

They would help drive internal efficiencies to speed up the overall processing time and catch simple errors up-front.

While we are recommending SNB play a bigger role in ensuring forms and documentation are complete and correct, we do not intend for them to indicate eligibility; we do think that providing Newcomers with greater friction at the point of application (having to redo their form, or return with a document they didn't think to bring along) will enable them to be more likely to get approved for Medicare, and will reduce workload for Medicare staff.

# 3. Internal Process: Evaluation

Allow SNB Customer Support Representatives to provide feedback on invalid documentation by updating Standard Operating Procedures

Deliver regular training to SNB Customer Support Representatives to improve their ability to review applications & Documents

Update paper application transfer from mail to digital scan to remove potential multi-week delay and enable status updates for Newcomers

	Effectiveness	Political Alignment	Organizational Complexity	Executorial Complexity	Relative Cost	Administrative Complexity
Allow SNB Customer Support Representatives to provide feedback on invalid documentation by updating Standard Operating Procedures	Medium	High (Supports Immigration)	Medium	Low	Low	Low
Deliver regular training to SNB Customer Support Representatives to improve their ability to review applications & Documents	Medium	High (Supports Immigration)	Medium	Low	Low	N/A
Update paper application transfer from mail to digital scan to remove potential multi-week delay and enable status updates for Newcomers	High	High (Supports Immigration)	Medium	Low	Low	Low

## 3. Internal Process: Outcomes



### **Newcomers**

Learn about mistakes they've made at the point of application, where they have the opportunity to fix issues on the spot. They hear back from Medicare more quickly.



### **SNB Customer Service Representatives**

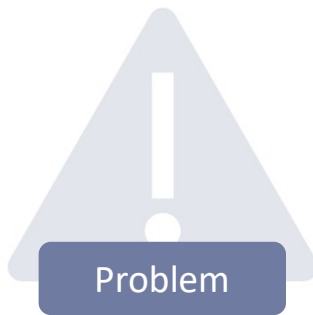
While they now must spend more time with each applicant, the reduction in application problems should reduce failure demand in other areas.



### **Medicare Officers**

See a significant reduction in forms errors, incompletions, and inadequate documentation. Completed applications arrive faster.

# 4. Stakeholder Communications: Problem



Stakeholders who share a part in service delivery are disconnected and operating in siloes. They are unaware of each others, needs, challenges, and available resources.



Stakeholders within the Apply of Medicare Ecosystem know each other and understand how the organizations operate. They leverage each others knowledge to learn and make the service better for everybody involved.

## 4. Stakeholder Communications: Options

There are two (2) options that can improve Stakeholder Communications. These are simple to implement, but do involve participants and co-ordination of multiple stakeholders from a variety of organizations in the ecosystem

Start a monthly or quarterly meeting of stakeholders to discuss challenges, ambiguities, and needs on a regular basis. Include representatives from Medicare, including Officers & Advocates, Settlement Agencies, PGD, and SNB.

Increase awareness and engagement of client advocates so that people who need specialist-level help can get it earlier in the process

### Summary:

Through this engagement, it has been clear that when we bring stakeholders together, good things happen. Empathy and understanding of each others' challenges, limitations, and abilities grows, and the beginning of a collaborative effort to improve the experiences of Newcomers and Stakeholders can begin.

These options really can be viewed singularly. We think that a earlier engagement of Advocates will naturally occur if there is a formal setting where relationships and awareness can grow.

The "Apply for Medicare" service should be seen as a living, breathing, thing; the needs of the service, Newcomers, and stakeholders will change over time. It is only through setting up and ongoing collaborative effort that small fixes and adjustments can become a part of an ongoing effort.

# 4. Stakeholder Communication: Evaluation

Start a monthly or quarterly meeting of stakeholders to discuss challenges, ambiguities, and needs on a regular basis. Include representatives from Medicare, including Officers & Advocates, Settlement Agencies, PGD, and SNB.

Increase awareness and engagement of client advocates so that people who need specialist-level help can get it earlier in the process

	Effectiveness	Political Alignment	Organizational Complexity	Executorial Complexity	Relative Cost	Administrative Complexity
Start a monthly or quarterly meeting of stakeholders to discuss challenges, ambiguities, and needs on a regular basis. Include representatives from Medicare, including Officers & Advocates, Settlement Agencies, PGD, and SNB.	High	High (Supports Immigration)	Medium	Low	Low	N/A
Increase awareness and engagement of client advocates so that people who need specialist-level help can get it earlier in the process	High	High (Supports Immigration)	Medium	Low	Low	N/A



# 4. Stakeholder Communications: Outcomes



**Newcomers**

Because stakeholders are more engaged with each other, problems are solved faster. It is invisible to the Newcomer, but things should move more smoothly overall.



**All Stakeholders**

Better relationships and more understanding and input into evolving processes will make work-life better for all stakeholders involved.

# Any Questions?

3 mins

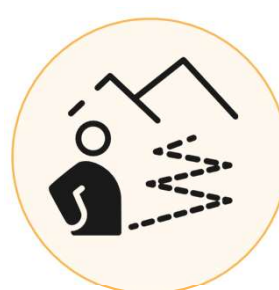
# Transform: Policy & Process

Update policy and streamline application processes to reflect the 21st century context of intentional immigration as a strategic priority for New Brunswick

The bottom of the slide features a decorative graphic consisting of several overlapping, wavy, semi-transparent shapes in shades of light orange and yellow, creating a soft, abstract background.

# Transform Process & Policy

These options focus on updating policy and streamlining application processes to reflect the 21st century context of international immigration as a strategic priority for New Brunswick. They focus on changes that will help the challenges faced by specific Newcomer Archetypes.



**1. Navigation for Newcomers:** Help Newcomers before things go wrong

**2. Rethinking Residency:**  
Residency requirements that align with Newcomer Context

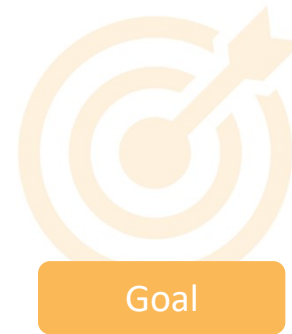
**3. Uninsured Temporary Workers:**  
Coverage for Temporary Foreign Workers

**4. Uninsured Canadian Children:**  
Coverage regardless of parental status

# 1. Navigation for Newcomers: Problem



When problems arise, many Newcomers struggle to get the help they need to resolve issues in a timely manner.



Adopt a more proactive approach to supporting Newcomers by engaging early in the process and ensuring complex cases have the support they need from the start.

# 1. Navigation for Newcomers: Option

This option would provide new programming meant to help Newcomers through the journey of learning about Medicare and applying for Medicare, as well as understanding Healthcare in the context of their own unique needs.

Create a Navigator Service that can help Newcomers find their way through both applying for Medicare and understanding how healthcare works in New Brunswick; position the service particularly for Newcomers who haven't connected with a Settlement agency

## Summary:

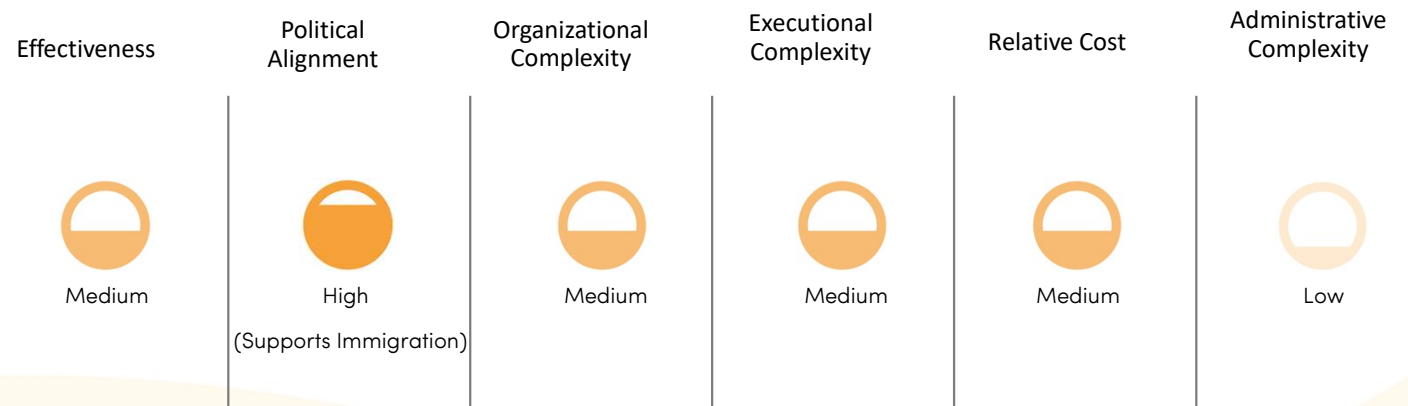
Navigator Services provide specialist customer service support to people facing complex administrative and bureaucratic processes. A navigator service could help Newcomers understand and navigate issues with their Medicare applications and coverage questions, particularly to those "independent" Newcomers not connected with a Settlement Agency. This model has already proven successful within the context of supporting Internationally Educated Nurses coming to New Brunswick.

A Navigator program could shift the role of the Client Advocate up to an earlier point the journey, so that rather than being a last stop when things go wrong, they become a first stop to ensure things go right.

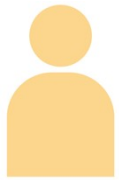
This would allow for clarification of messaging and response to enquiries while reducing the burden on existing support services who are intended to be generalist in nature (SNB) or focused on the processing of applications (Medicare Officers).

# 1. Navigation for Newcomers: Evaluation

Create a Navigator Service that can help Newcomers find their way through both applying for Medicare and understanding how healthcare works in New Brunswick; position the service particularly for Newcomers who haven't connected with a Settlement agency



# 1. Navigation for Newcomers: Outcomes



## **Newcomers**

Able to ask questions and get help early in their journey. Provides a particularly helpful resource for those who aren't working with a settlement agency.



## **SNB**

Reduced pressure to have deep specialist knowledge of Medicare, can direct Newcomers with seemingly-complex cases to Navigators for advice early in the process.



## **Medicare Officers**

Navigators contribute to reduction in errors and omissions, particularly with complex cases, reducing the time Medicare Officers need to spend following up.

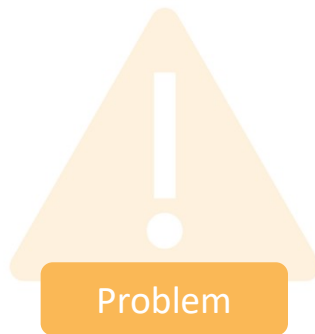


## **Medicare Advocates**

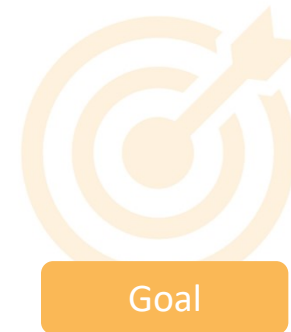
Advocates potentially integrated with Navigator role; policy support for less complexity (other options) should free them up to help people earlier.



## 2. Rethinking Residency



Current proof of residency requirements assume a degree of stability and independence that don't match the reality of many Newcomers.



Proof of residency requirements align with what is feasible for someone who has just arrived and not yet settled in the province to be able to prove.

## 2. Rethinking Residency: Option

These options would provide Newcomers with an easier path to eligibility by updating the current residency requirements.

Revise Medicare requirements for residency from “proof” to “intent”, better aligning residency requirements with Newcomers real life realities and making it easier for them to access the coverage they are entitled to.

Align practices with the current GNB SOP, which states that spousal proof of residency is not required.

### Summary:

Across Canada, the Provinces and Territories ask applicants to prove their residency via:

- A statement of intent within the application form (n=5);
- The submission of supplementary documentation (n=3), or
- Both an attestation and supplementary documentation (n=5).

Requiring a statement of intent is most aligned with the day one eligibility of the Medicare Services Payment Act.













Noteworthy when considering updates to the proof of residency requirements is that New Brunswick is the only Province to require residents be physically present on a permanent basis (in policy). Ten of the others only require physical presence in the province for a minimum of 153 days (NWT) or six months. The remaining two only specify the requirement to be ordinarily present (NL) or establish primary residence (NU).

Furthermore, although in practice spouses are asked to prove residency, the GNB SOP already states that spousal proof of residency is not required. Clarifying and removing that requirement from practice would further streamline the application process.

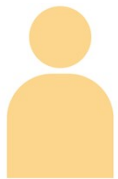
## 2. Rethinking Residency: Evaluation

Revise Medicare requirements for residency from “proof” to “intent”, better aligning residency requirements with Newcomers real life realities and making it easier for them to access the coverage they are entitled to.

Align practices with the current GNB SOP, which states that spousal proof of residency is not required.

	Effectiveness	Political Alignment	Organizational Complexity	Executorial Complexity	Relative Cost	Administrative Complexity
Revise Medicare requirements for residency from “proof” to “intent”, better aligning residency requirements with Newcomers real life realities and making it easier for them to access the coverage they are entitled to.	 Medium	 High (Support Immigration)	 Low	 High	 Medium	 Medium
Align practices with the current GNB SOP, which states that spousal proof of residency is not required.	 Medium	 High (Support Immigration)	 Low	 High	 Low	 Low

## 2. Rethinking Residency: Outcomes



### **Newcomers**

Requirements for Medicare are more aligned with the context of many Newcomers' lives.



### **Medicare Officers**

Policy supports easier decision making at the point of evaluation; fewer cases require follow-up, or denial which evolves into Medicare Advocate involvement.



### **Medicare Advocates**

Fewer cases with this complexity land on Advocates' desk, freeing them up to help more people earlier.



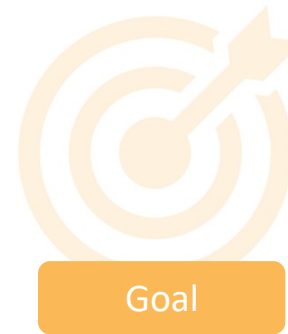
### **New Brunswick Government**

Supports the growth of the province by being more welcoming to Newcomers from a Medicare perspective, and providing administrative space for a growing volume of applications.

### 3. Uninsured Temporary Workers



Temporary Foreign Workers are low-income essential workers, who are currently ineligible for Medicare coverage unless they have 12-month work permits (cumulative).



Temporary Foreign Workers receive insurance from day one, providing needed coverage for those working in "dirty, dangerous, and deadly" jobs

### 3. Uninsured Temporary Workers: Option

These options would provide uninsured Temporary workers with coverage that starts at day one, regardless of length of stay.

Reduce the minimum permit requirement to provide Temporary Workers with coverage from the day they start their jobs.

Require employer to provide workers with private coverage until they meet provincial eligibility requirements.

**Summary:**

New Brunswick is one of the seven\* Provinces and Territories that do not provide coverage to temporary workers with 6 month work permits.

Given our Province’s reliance on seasonal workers, highlighted during the COVID pandemic, their low income status and the nature of their work, reducing the minimum permit requirement would recognise their value and contribution to the Province while providing the care they need and today find themselves without

An alternative to reducing eligibility requirements for provincial coverage, would be to implement a requirement for employers to pay for private insurance for these essential workers until they meet provincial eligibility requirements. A comparable program has been implemented in BC, where employers must pay for private insurance if they hire Temporary Foreign Workers on closed permits < 12 months.

*\*Newfoundland has created an exception to the 12 month minimum permit rule, for temporary workers coming to the province via the Newfoundland Provincial Nominee Program and Atlantic Immigration Pilot Program.*

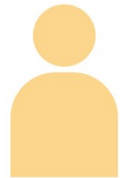
# 3. Uninsured Temporary Workers: Evaluation

Reduce the minimum permit requirement to provide Temporary Workers with coverage from the day they start their jobs.

Require employer to provide workers with private coverage until they meet provincial eligibility requirements.

	Effectiveness	Political Alignment	Organizational Complexity	Executorial Complexity	Relative Cost	Administrative Complexity
Reduce the minimum permit requirement to provide Temporary Workers with coverage from the day they start their jobs.	High	High (Support Immigration)	Low	High	High	High
Require employer to provide workers with private coverage until they meet provincial eligibility requirements.	Medium	High (Support Immigration)	Medium	High	Medium	High

# 3. Uninsured Temporary Workers: Outcomes



## Newcomers

Temporary Work Permit holders can do their jobs without fear of injury with no coverage.



## New Brunswick Government

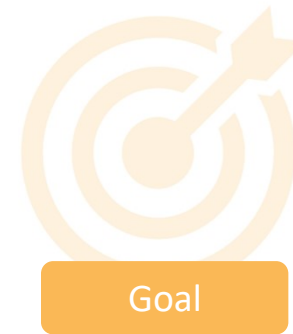
Supports the provincial need to continue to attract and support temporary workers.



## 4. Uninsured Canadian Children



Canadian born children of Newcomers can be left without coverage if their parents experience gaps in status



The coverage of Canadian born children are not dependent on the immigration status of their parents

# 4. Uninsured Canadian Children: Option

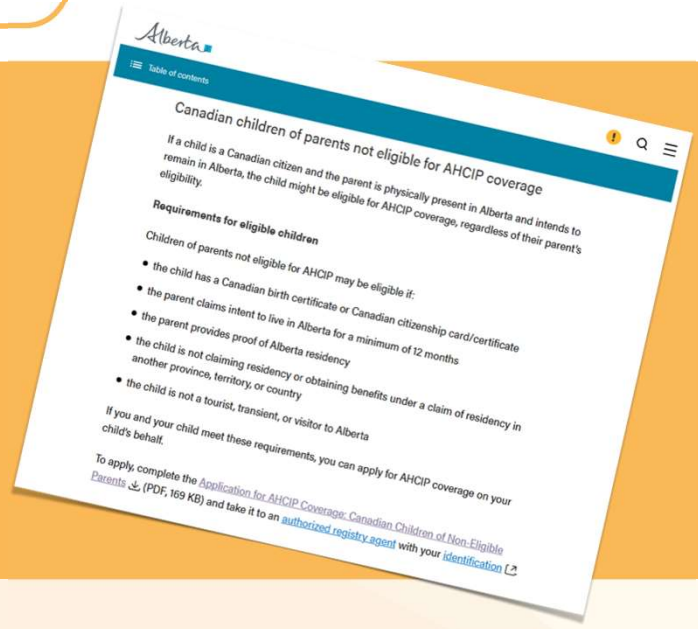
This simple policy addition would take a great source of strain away from Newcomers, as well as decrease workload for Officers and Advocates.

Provide coverage to Canadian Children born to uninsured parents

### Summary:

Of all of the stories shared, the ones involving the withdrawal of a Canadian child's coverage because of a parent's loss of status were the most emotionally fraught.

We encourage the Province to consider following Alberta's lead and provide coverage to Canadian children born to uninsured parents.

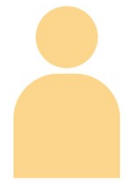


# 4. Uninsured Canadian Children: Evaluation

Provide coverage to Canadian Children born to uninsured parents



# 4. Uninsured Canadian Children: Outcomes



### Newcomers

Renewing Residents can rest easy that their Canadian-born children have coverage for Medicare; even if there are challenges with their own permit-related renewals.



### Medicare Officers

Policy supports easier decision making at the point of evaluation; fewer cases require follow-up, or denial which evolves into Medicare Advocate involvement



### Medicare Advocates

Fewer cases with this complexity land on Advocates' desk, freeing them up to help more people earlier.



### New Brunswick Government


Supports the provincial focus on increasing and support immigration. Decreased shock and frustration from Newcomers translates into fewer negative news stories.

# Any Questions?

3 mins

# Digitalize Service Delivery

Creating a digital “Apply for Medicare” service that is aligned with the Government of New Brunswick’s priority to build an affordable, responsive, and high-performing government



# Digitalize Service Delivery: Problem



Current paper-based processes are cumbersome for users and don't meet their expectations in 2021. Moreover, they are the cause of slow processing times, lost documents, and manual labour for staff.



Newcomers can Apply for Medicare online, sending information directly to Medicare for review/approval. Errors and omissions are low, and applications are processed quickly. Complex cases get the immediate care they need.

# Digitalize Service Delivery: Option

We have only one option for digital. It is broad and requires new ways of working to deliver, but we think this is the best way for New Brunswick to attain the best result. While we have some ideas, we are not making specific recommendations as to what the digital service should look like. These things should not be decided without a process of prototyping and testing.

Use a human-centered approach to design and deliver a digital "Apply for Medicare" service.

**Summary:** The service should include:

A front-end digital application form that:

- Makes it easier for applicants to understand the requirements for Medicare
- Makes it easier to get their information right the first time
- Provides them with confidence their application has been received and is being processed
- Enables applicants to find out about their eligibility faster

A backend process that makes daily life better for staff by:

- Reducing manual labour
- Reducing data entry and paper handling
- Reducing processing errors
- Reducing lost documents.



# Digitize vs Digitalize

Digitize

Moves existing artefacts to digital format (ex. fillable PDF forms)



Digitalize

Redesigns the process and ways-of-working to support a digital process flow

# Digitalize Service Delivery: Option

Effectiveness



High

Political Alignment



High

(Supports Immigration)

Organizational Complexity



Medium

Executorial Complexity



High

Relative Cost



High

Administrative Complexity



Medium

Use a human-centered approach to design and deliver a digital "Apply for Medicare" service.

# Benefits for Newcomers

Many people today know how to complete basic transaction online and have access to a computer or smartphone. Many of them expect to be able to complete basic applications online.

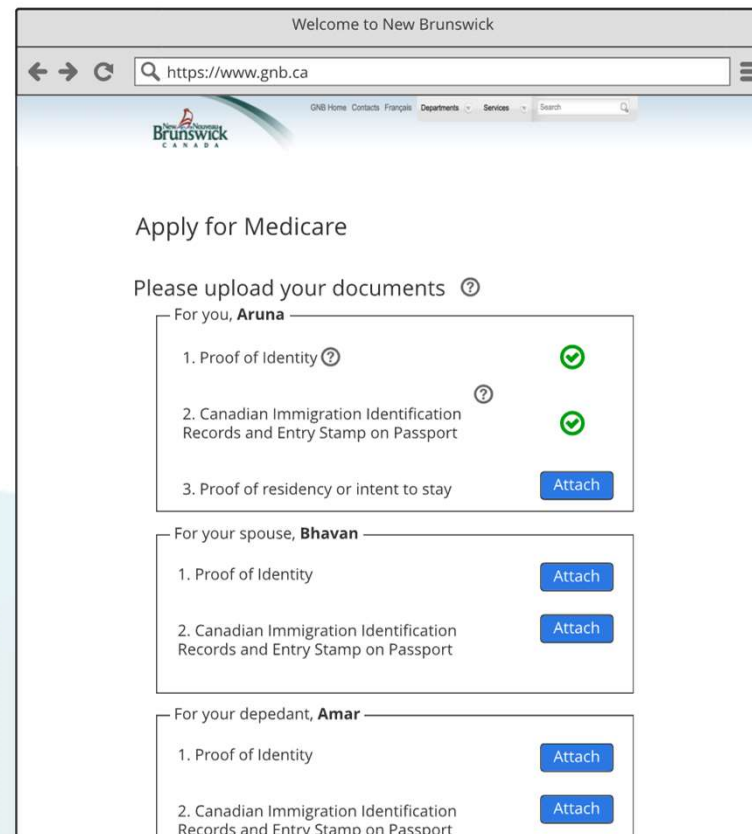
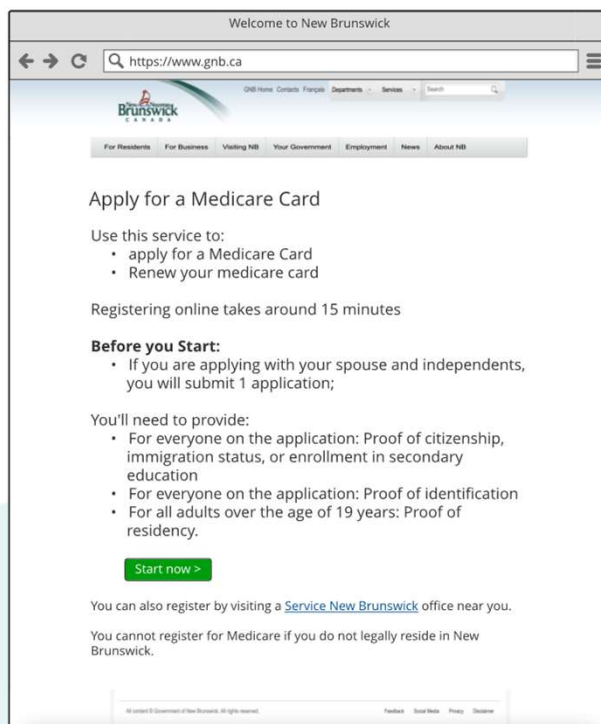
Applying for government services is faster and easier when people can do it online.

Digital done right:

- Produces fewer errors
- Can be easier to understand
- Enables follow-up and a clearer paper trail

# Benefits for Newcomers

Example: It's easier to provide clear instructions with plenty of examples along the way.



# Benefits for Newcomers

Example: Applicants are only asked questions relevant to their situation, meaning the form is customized every time. Asking questions one at a time simplifies the experience for the user, and the lack of space limits means the end-to-end experience can be presented in plain, easy-to-follow language.

Welcome to New Brunswick

Apply for a Medicare Card

What is your marital status?

- I live with a spouse (Married or Common-Law)
- I don't live with a spouse (Single, divorced or widowed)

[Continue](#)

Welcome to New Brunswick

Apply for a Medicare Card

Did your spouse arrive in Canada with you?

- Yes
- No, they have already applied
- No, they are not here yet
- No, my spouse is not moving to New Brunswick

[Continue](#)

Welcome to New Brunswick

Apply for a Medicare Card

Did your spouse arrive in Canada with you?

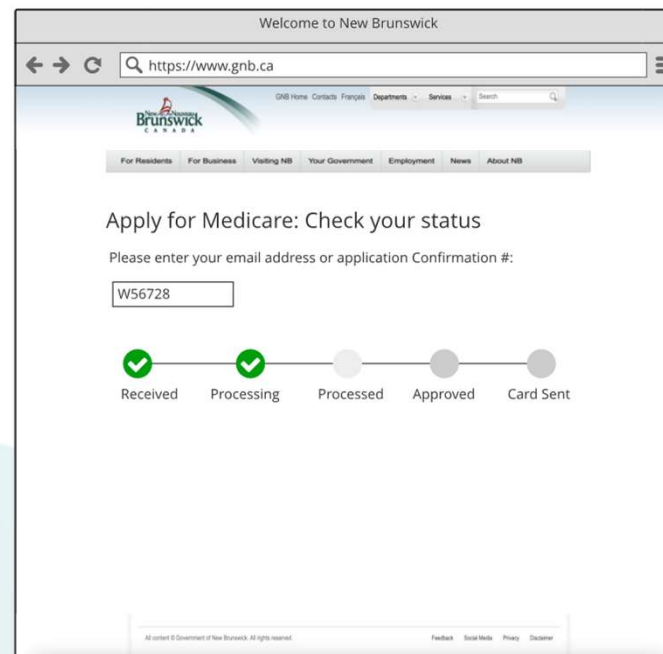
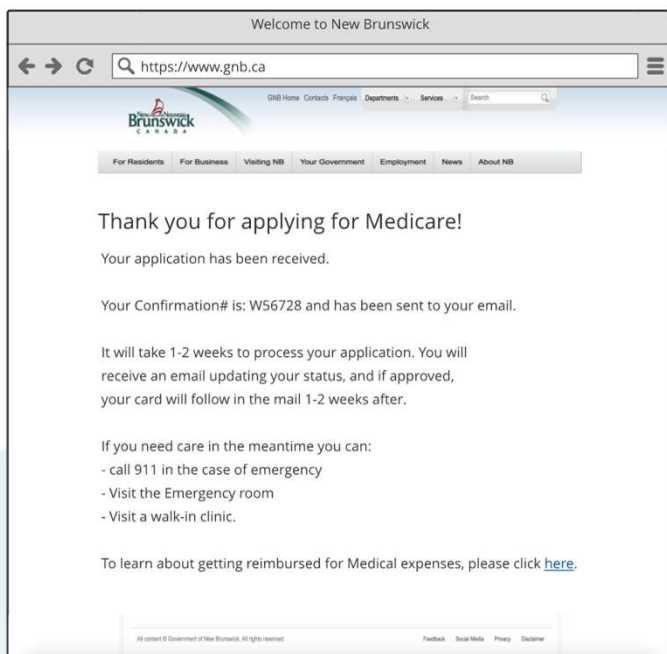
- Yes
- No, they have already applied
- No, they are not here yet

When will they arrive?

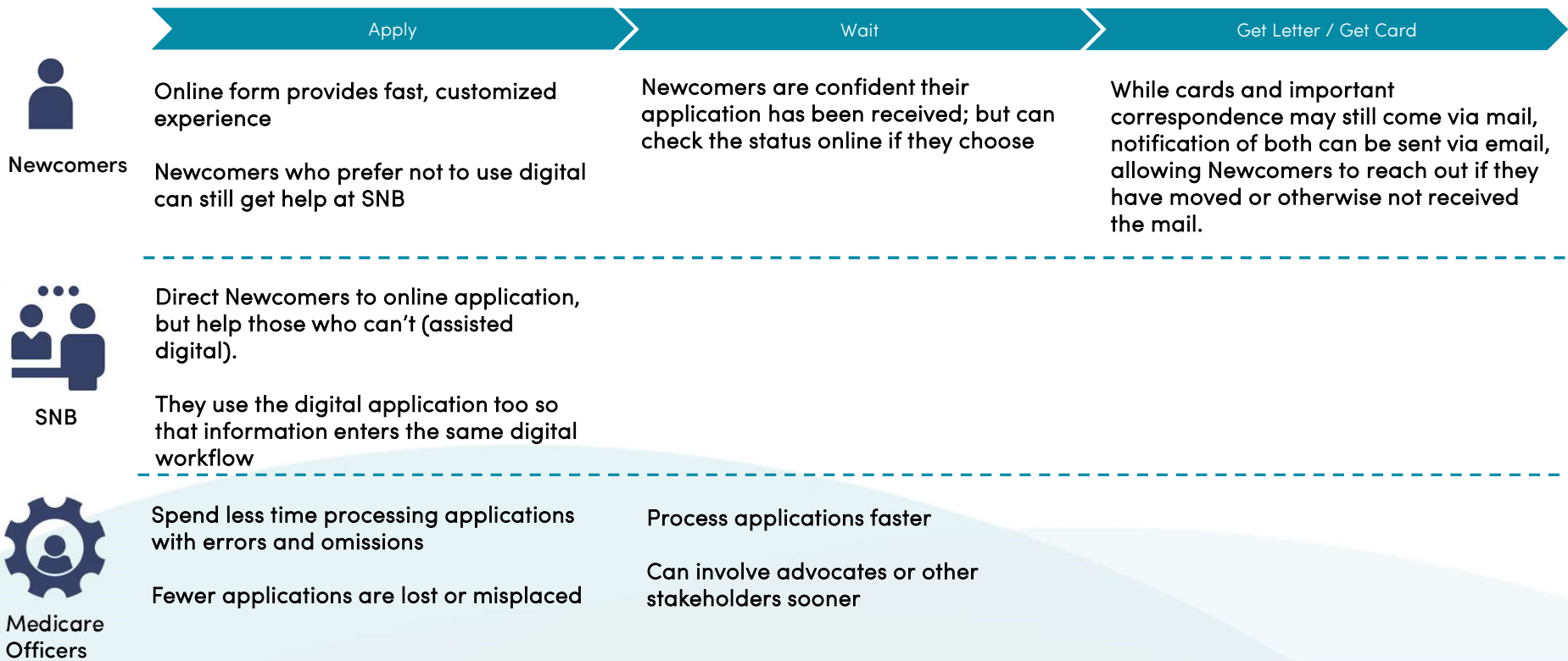
[Continue](#)

# Benefits for Newcomers

Example: Applicants are confident their application has been received and can easily check their status again while they wait.



# A Vision for Digital “Apply for Medicare”



# A Canadian Example

In 2017, the BC Ministry of Health and the BC Service Design Team worked together using an iterative, human-centered approach to redesign how British Columbians apply for Medicare.

Through testing and iteration, the team has created an online MSP Enrollment experience that meets user needs. Previously, 30% of applications were returned with errors. Today, the error rate sits at about 1%.

To learn more:

<https://www2.gov.bc.ca/gov/content/governments/services-for-government/service-experience-digital-delivery/service-design/case-studies/transforming-the-medical-services-plan>

The screenshot shows the 'Medical Services Plan - Enrolment' page from the British Columbia government website. The page features a dark blue header with the BC logo and the title. Below the header is a progress bar with seven steps: Check Eligibility, Personal Info, Spouse Info, Child Info, Contact Info, Review, and Authorize. The main content area is white and contains the following text and form elements:

**See if you qualify for public health care in B.C.**

If you already have Medical Services Plan (MSP) coverage and received a letter notifying you to renew your BC Services Card, you do not have to submit a new Application for MSP Enrolment; you only need to renew your BC Services Card. Follow the instructions on the letter to renew your card.

Do you currently live in British Columbia (i.e. Do you have an address here)?

No  Yes

Will you or anyone in your immediate family (included on this application) be away from B.C. for more than 30 days in total over the next six months?

No  Yes

Is anyone you're applying for:

- A student returning to your home province at the end of a course or program; or
- A minor (under the age of 16) who needs to have their own individual account; or
- Seeking refugee status and is not approved yet

No  Yes

At the bottom right of the form is a yellow 'Apply' button. The footer contains links for Disclaimer, Privacy, Accessibility, Copyright, and Contact Us.



# Rethinking How Government Works

Traditionally, government technology projects are approached as large up-front investments. Budget dollars are committed when risk is high. They take years to implement and are often outdated by the time they are launched. And they don't consider the needs of users, whether workers, residents, or other stakeholders.



Policy Formation



Procurement & Requirements Gathering



Development



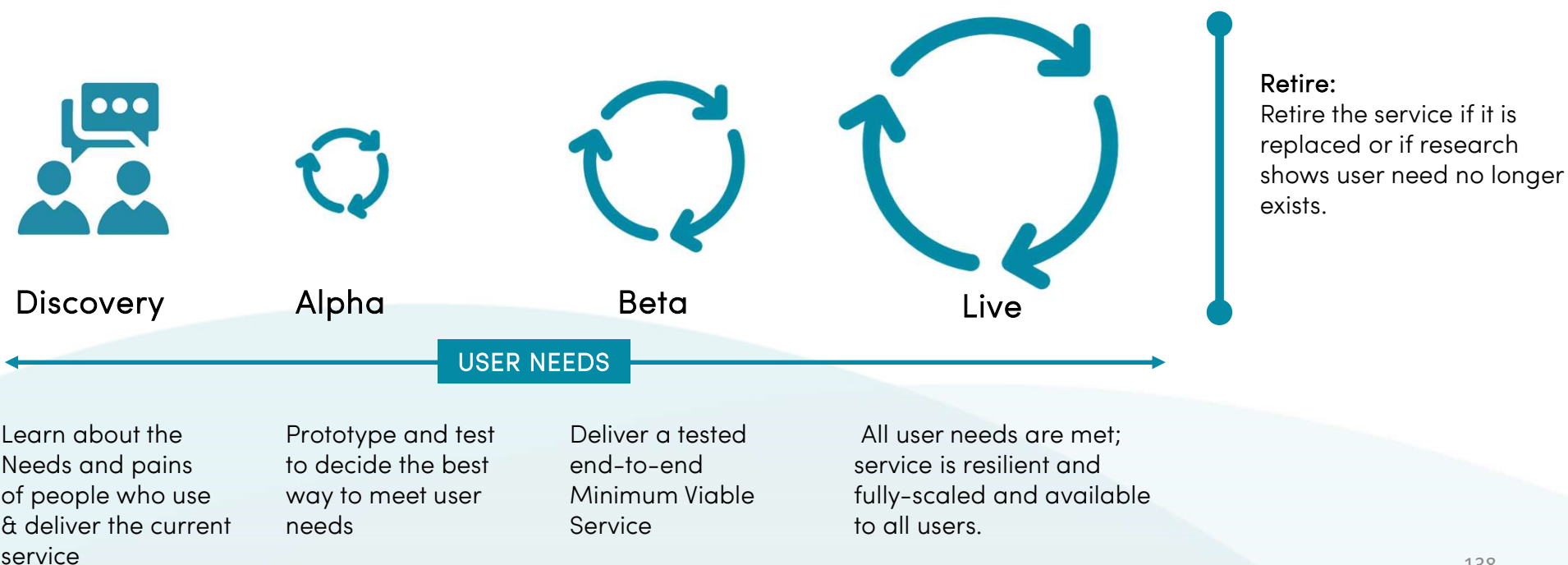
Launch



User Needs?

# Rethinking How Government Works

Digitally transformed governments around the world work differently. They put user needs at the start. They work in small cross-functional teams using human-centered methods to drive the holistic design of policy and technology. Budget is released as risk is reduced through research and testing. Services launch quickly and evolve over time until the service is retired.



**“The legislation was written when we wanted to keep people out...vs wanting to bring them in.**

- Stakeholder Participant

**“We now exist in a world where we compete on the quality of our services, not the strength of our messages.**

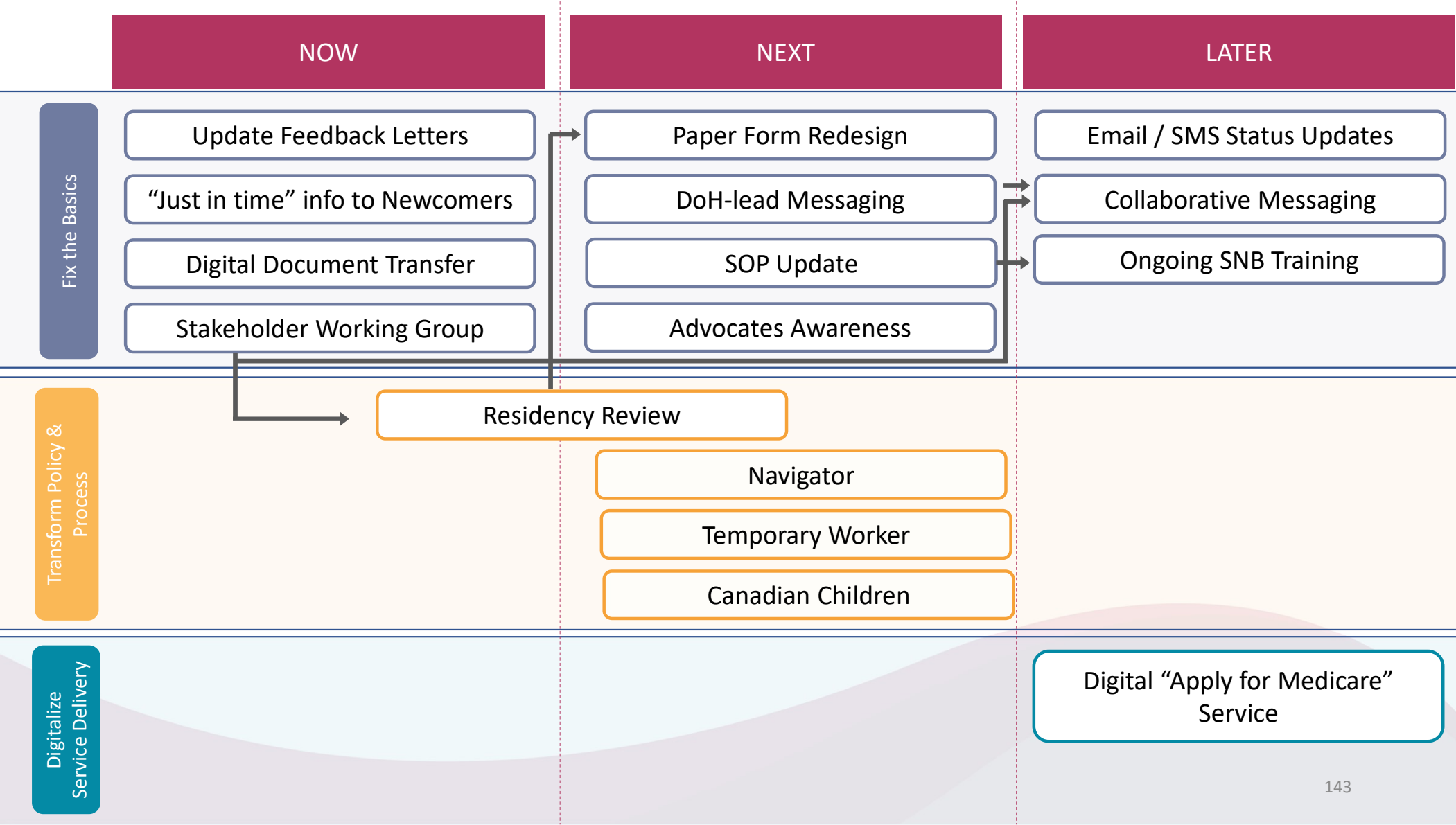
- Lou Downe, Former Design Director of the UK Government

# Any Questions?

3 mins

# Roadmap

The bottom of the page features a decorative graphic consisting of several overlapping, wavy, light-colored shapes in shades of pink and beige, creating a soft, abstract border.



“

**I wish this interview helps some people upstairs realise what is going on and maybe decide to help us, the people that arrive here and don't have anywhere to go.**

**Thank You**