CONTRA COSTA CARES FUNDING COMMITTEE PROPOSED FINAL RECOMMENDATIONS

These recommendations were developed for and agreed to by the Funding Committee of CARES which includes Kaiser Permanente, John Muir Health, Sutter Health and Contra Costa Health Services. These recommendations were crafted to reflect a longer-term approach to continuing the CARES program. These recommendations are sequenced from the immediate short-term to a much longer-term timeline which eventually results in statewide coverage expansion for all undocumented adults. Each subsequent recommendation builds on the previous one, expanding coverage to more and more individuals as more stable and additional funding is potentially available for the CARES Program.

- Continue hospital/health system and Contra Costa County funding for CARES through 2020 at current levels. Hospitals will take the recommendation for continued funding forward for governance approval at each of their organizations. The County will include funding for CARES as part of its annual budget process.
- Make annual presentation to hospital/health systems executive leadership in coordination with the Hospital Council and to the Contra Costa County Board of Supervisors about the impact of the CARES program on the community and the safety net.

AND

 Explore with Contra Costa state legislative delegation the possibility of a special appropriations in the California State Budget for FY 21 (July 1, 2020 – June 20, 2021) to support the CARES program for all income-eligible adult undocumented immigrants for 3 years as a pilot project to demonstrate effectiveness and test implementation strategies in anticipation of expansion of coverage throughout California.

AND

- 4. Engage community-wide efforts to design and pass local ballot measures to help fund health and social services which could potentially include fully funding the CARES program until state coverage is available.
- 5. Support efforts by the Administration and the Legislature to expand coverage to undocumented adults statewide.

CONTRA COSTA CARES

FUNDING COMMITTEE

FUNDING AND PATIENTS SERVED:

- According to the best estimates, there are approximately 51,000 77,500 individuals in Contra Costa County ineligible for coverage due to immigration status as identified by two different reports: 2016 CalSIM Regional Remaining Uninsured Projections Report and 2017 Public Policy Institute of California. The UC Berkeley Labor Center indicates that a majority of undocumented and uninsured adults would qualify for a program like CARES. "Most Californians who are both undocumented and uninsured have incomes below the Medi-Cal threshold."
- 2. Since its inception in November 2015, CARES has enrolled 8,020 individuals:
 - 208 patients are 19-25 years old;
 - 7,442 patients are 26-64 years old; and
 - 370 patients are over 65 years.
- 3. Currently, as of October 19, 2019, there are 3,669 individuals enrolled in CARES:
 - 103 patients are 19-25 years old;
 - 3,400 patients are 26-64 years old; and
 - 166 patients are over 65 years.
- 4. CARES participants are served by three community health centers: Brighter Beginnings, La Clinica de la Raza and LifeLong Medical Care. The community health centers provide a medical home for CARES participants. In addition to CARES, the participating community health centers serve additional uninsured and undocumented individuals not covered by CARES or any other public or private programs.

According to the OSHPD Annual Report of Community Clinics for 2018, the three community health center CARES providers reported the following numbers of total uninsured patients without insurance at their sites in Contra Costa County:

- Brighter Beginnings 913 uninsured patients (total patients reported: 2,612)
- La Clinica de la Raza 2,848 uninsured patients (total patients reported: 20,021)
- LifeLong Medical Care 3,760 uninsured patients (total patients reported: 21,321).
- 5. Since its inception in November 2015, CARES has been funded by three hospital/health systems (John Muir Health, Kaiser Permanente and Sutter Health) and by Contra Costa County. To date, a total of \$4,499,880 has been contributed to support the program including a \$5,000 one-time contribution by Walgreens in 2017-2018. Currently each hospital/health system provides a \$250,000 contribution and Contra Costa County provides \$750,000 annually, matching the total contributions of the hospital/health systems.
- 6. The hospital/health systems have donated a total of \$2,873,000 to date for CARES to support the community health centers and the safety net in Contra Costa County.
- Additionally, Kaiser Permanente and John Muir Health have provided a total of \$20,300 in 2017 through 2019 for an annual evaluation of the CARES program. Along with funding received from The California Wellness Foundation in 2018 and 2019, a total of \$44,282 has been spent in the last two years for the annual CARES evaluation.
- 8. As of today, \$3,830,764.00 has been paid out to the community health centers for services to CARES participants since the initiation of the program.
 - Brighter Beginnings \$356,020.00 from CARES
 - La Clinica de la Raza \$1,824,900.00 from CARES
 - LifeLong Medical Care \$1,649,844.00 from CARES
- 9. \$669,116.00 in CARES funding remains to be distributed as of 10/31/2019
 - Brighter Beginnings \$23,576.00
 - La Clinica de la Raza \$177,016.00
 - LifeLong Medical Care \$468.524.00
- 10. 100% of all funds contributed by the health systems and by Contra Costa County go directly toward direct services to patients seen at the community health centers.

- 11. Community health centers are paid \$28.00/per member/per month or \$336.00/year for each patient enrolled in CARES a fee that has remained constant since the inception of the program despite ever-increasing services costs. This fee is well below the average cost per visit that the community health centers receive from the Medi-Cal program.
- 12. Contra Costa Health Plan and the Contra Costa Community Clinic Consortium provide program and financial support to the CARES program at no cost to CARES or its funders.
- 13. At the same time, Contra Costa County has provided services to an additional 12,015 and 13, 712 unduplicated, uninsured patients in FY18 and FY19 respectively, for direct, outpatient medical services. Additional undocumented and uninsured patients are seen via telehealth services, complementary services and inpatient services.
- 14. Contra Costa County's cost for uncompensated care for the uninsured in FY 19 was \$56.6M and is provided through the following programs: Global Payment Program (GPP) of the 1115 waiver, sliding fee scale program, discount program, charity care program, and Policy 1030 (referral of community clinic patients in need of specialty services who are ineligible for Basic Health Services).

IMPACT OF CARES PROGRAM:

- 1. Enrollment in CARES has increased from approximately 2,500 patients in 2017 to more than 3,600 in 2019 despite pressures and fear generated by negative public charge and immigration discussions.
- 2. CARES provides medical homes for its participants and helps connect them to other needed health and social services in the community as well as other benefit programs that they might be eligible for.
- 3. Since the program's inception in November 2015, CARES participants have made 26,988 visits of which 1,525 CARES patients have had 6 or more visits; 64% of enrolled patients have had 1 or more visits.
- 4. Of the 26,988 visits made by CARES participants since its inception, an estimated 6,000 visits have been for chronic conditions approximately 4,500 visits have been related to diabetes, 1,132 visits have been related to hypertension and 446 visits have been related to depression.
- 5. CARES impact analysis over the last 3 years has shown that only 9% of emergency room visits by CARES patients were avoidable compared to the industry standard of 13.7%.

- 6. CARES is an important partnership in Contra Costa County of all health and hospital systems which is not duplicated in any other county in California and directly supports the Contra Costa safety net and the community health centers in particular.
- 7. CARES program allows data sharing across all health and hospital systems through the administrative and financial functions provided by Contra Costa Health Plan (CCHP).
- 8. CARES is aligned with the Contra Costa County Board of Supervisors Welcoming Resolution.

WHAT COULD BE LOST IF CARES IS REDUCED OR ENDS:

- 1. Loss of access to coverage for primary care which could result in people waiting longer for necessary medical care, potentially resulting in preventable illnesses and higher costs.
- 2. Loss of medical homes for CARES participants.
- 3. Loss of CARES could result in an increase in emergency room visits.
- 4. Possible further loss of 'trust' in health institutions and exacerbation of fear of immigration and public charge.
- Community health centers will lose up to \$1.5M annually funding that goes directly to patient care for the uninsured and undocumented without any administrative or indirect costs charged directly to the program – if the CARES Program ends. A smaller loss would depend on how much CARES funding is reduced.

PUBLIC POLICY IMPACT AND FUTURE INITIATIVES:

- 1. Beginning in January 2020, 19-26 years old undocumented residents will be covered by Medi-Cal thereby reducing the number of individuals eligible for CARES. In 2019, that represented 103 CARES patients.
- Previously, the State Legislature covered undocumented children (SB 75) in the Medi-Cal program. It is our understanding from the Acting Director of CDHCS that the Governor and Legislature will propose that the next population to be enrolled in Medi-Cal will be undocumented adults over 65 (currently represented by 166 patients enrolled in CARES).

- 3. We anticipate that the newly created California Health for All Californians Commission which will begin meeting in late January 2020 will consider as one of its first actions further coverage expansion to the remaining uninsured in California.
- 4. The Contra Costa County Board of Supervisors has formed an Ad Hoc Committee to explore the possibility of putting a measure on the November 2020 ballot that would increase the local sales tax for investment in health and social service programs. If such a measure were to pass, we anticipate that funding could be available to support the CARES program.
- 5. There is also a statewide initiative on the November 2020 ballot to change the way businesses are taxed under Prop. 13. If this initiative were to pass, then it is anticipated that counties will receive substantial new revenue which Contra Costa County could choose to use for the CARES program.
- 6. CCHS and CCRMC funding challenges have been raised due to the future status of the 1115 waiver, the Global Payment Program (GPP) and funding of CalAIM. Additionally, a recent CMS Draft Guidance on Fiscal Accountability calls into question the viability of Medi-Cal funding through the use of Intergovernmental Transfers, the MCO Tax and the Hospital Quality Tax Fund (HQAF). Currently CCHS estimates a budget shortfall for CCRMC and CCHP in the \$30M range for the coming fiscal year.
- 7. Other federal policy decisions could also create more vulnerabilities and have a negative impact on the program and its participants including proposals on public charge and an atmosphere of fear about immigration as well as funding restrictions on CalFresh.
- 8. It would be advised for Contra Costa Community Clinic Consortium to make annual presentations to the hospital/health systems executive leadership in collaboration with the Hospital Council and to the Contra Costa County Board of Supervisors about the impact of CARES on the community and on the safety net; and how CARES supports advances in public policy to expand coverage to the uninsured in Contra Costa County.