



Contra  
Costa  
County

To: Board of Supervisors  
From: William Walker, M.D., Health Services Director  
Date: November 3, 2015  
Subject: Contra Costa CARES

---

**RECOMMENDATION(S):**

1. ACKNOWLEDGE that the Board of Supervisors on September 22, 2015 approved and authorized the Health Services Director to establish a Contra Costa CARES program for the purpose of providing primary healthcare services to adults not covered by the Affordable Care Act.
2. ACKNOWLEDGE that the Board approved and authorized the Health Services Director or designee to execute a contract with Contra Costa Community Clinic Consortium (Consortium) to accept funds in an amount up to \$500,000 for the purpose of disbursing payment to community clinics providing primary healthcare to enrollees in the Contra Costa CARES program on a per-participant, per-month basis contingent on final approval by local hospitals of their contribution of \$500,000 to this program, which has occurred.
3. APPROVE Appropriation and Revenue Adjustment Nos. 5012 and 5013, attached hereto, authorizing the transfer of appropriations in the amount of \$500,000 from County Reserves to the Health Services Department Contra Costa Health Plan for the purpose of disbursing payment for primary care services provided under the Contra Costa CARES program.

☒ APPROVE

☐ OTHER

☒ RECOMMENDATION OF CNTY  
ADMINISTRATOR

☐ RECOMMENDATION OF BOARD  
COMMITTEE

---

Action of Board On: **11/03/2015** ☒ APPROVED AS RECOMMENDED ☐ OTHER

Clerks Notes:

**VOTE OF SUPERVISORS**

AYE: John Gioia, District I Supervisor  
Mary N. Piepho, District III Supervisor  
Karen Mitchoff, District IV Supervisor  
Federal D. Glover, District V Supervisor

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: November 3, 2015

David Twa, County Administrator and Clerk of the Board of Supervisors

NO: Candace Andersen, District II Supervisor

Contact: William Walker, M.D.  
(925) 957-5410

By: June McHuen, Deputy

cc:

4. AUTHORIZE the Health Services Director, or designee, to direct Contra Costa Health Plan to issue enrollment cards to the Contra Costa CARES participants.

### FISCAL IMPACT:

100% County General Fund in the amount of \$500,000. Proceeds from the State's one-time payment of the County's State Mandated Funding claim (SB 90) will be utilized.

### BACKGROUND:

Passage of the Affordable Care Act (ACA) increased access to health coverage for most low-income adults and children living in Contra Costa County. An estimated 19,000 adults living in Contra Costa are ineligible for Covered California or full-scope Medi-Cal. Contra Costa CARES will provide comprehensive primary health care coverage and medical homes to approximately 3,000 low income, uninsured adults residing in Contra Costa who do not qualify for full-scope Medi-Cal or Covered California. The program will take full advantage of PRUCOL (Permanent Residence Under Color of Law) and other state coverage programs. Eligible participants must apply for state programs such as FamilyPACT, Every Woman Counts, and Breast Cancer Early Detection Program.

The program will cover uninsured adults 19 years of age or older living in Contra Costa who are ineligible for full-scope Medi-Cal or Covered California and whose household gross income does not exceed 138% of the Federal Poverty Level (Household of 1 individual = \$16,105; Family of 4 = \$32,913 annual income).

The program will cover primary care services including basic laboratory and radiology services. Specialty care, dental, vision, emergency care and hospitalization are not covered benefits of the program.

Participating primary care providers are La Clínica de la Raza, LifeLong Health Care, Brighter Beginnings, and Axis Health Care. Providers will receive on a capitated basis \$28.00 per-participant, per-month for a total annual cost of \$336.00. The program anticipates enrolling up to 3,000 individuals. The Consortium will manage the program by educating new enrollees about the benefits of the program and the use of their medical home. Upon Board approval, Contra Costa Health Plan will be responsible for issuing membership cards to participants, providing advice nurse services, and providing enrollment information electronically to primary care providers and hospital emergency room staff.

The proposed Contra Costa CARES program was developed through an extensive planning process representing many local stakeholders over the past year with leadership provided by Contra Costa Health Services, Hospital Council of Northern & Central California and the Contra Costa Community Clinic Consortium including representatives from Kaiser Permanente, Sutter-Delta Medical Center, John Muir Health, La Clínica de la Raza, LifeLong Medical Care, Brighter Beginnings, and Planned Parenthood. The planning process was funded by grants from the Blue Shield of California Foundation and John Muir/Mt. Diablo Community Health Fund.

The Boards of Directors of local hospitals recently took action to contribute cumulative

funding of \$500,000 to establish Contra Costa CARES. Attached hereto, is the letter from the Hospital Council of Northern and Central California confirming a combined one-time contribution of \$500,000 from John Muir Health, Kaiser Permanente and Sutter Delta Medical Center for the proposed Contra Costa CARES program. There is strong support among the business community, labor community, and numerous community based and faith organizations.

#### CONSEQUENCE OF NEGATIVE ACTION:

Low income, uninsured adults residing in Contra Costa County who do not qualify for full-scope Medi-Cal or Covered California will not have access to primary, preventative care services and may utilize more expensive hospital emergency departments for their care.

The uninsured have lower screening rates for preventable health conditions and experience poor health outcomes for chronic diseases such as diabetes, hypertension and other conditions. Lack of access to care puts residents at higher risk of serious health problems and premature death.

Infectious diseases such as influenza, measles and tuberculosis may not be detected early before affecting populations living and working in the County. Preventative and primary care are significantly less expensive to administer than it is to treat severe chronic illness and diseases. Having access to primary care not only benefits patients but also system-wide in the form of cost savings to the County's public health, hospital emergency departments, and the general public.

#### CLERK'S ADDENDUM

*Speakers: Edith Pastrano, Alliance of Californians for Community Empowerment (ACCE).*

#### ATTACHMENTS

Adjustment No. 5012

Adjustment No. 5013

Hospital Council CC CARES Letter