

**Healthcare Services for Undocumented Immigrants  
Stakeholder Meeting  
May 27, 2015**

**Participants:**

Advocates – Cindy Foltz, David Ramirez, Annie Tat, Gabby Trejo, Nenick Vu, Amy Williams, Kelly Bennett-Wofford, Kim Williams (absent – none)

FQHCs – Michelle Cardoza, Bob Kamrath, Jennifer Stork, Miguel Suarez (absent – Jim Ellsworth, Jonathan Porteus, Britta Guerrero, Chuck Wiesen)

Hospitals/Medical Society – Ashley Brand, Ellen Brown, Holly Harper, Brian Jensen, Rosemary Younts, Kris Wallach, Bob Waste, Jennifer Zachariou (absent – none)

UCD TEACH – Tonya Fancher, Mark Henderson, Fred Meyers (absent – Craig Keenan, students)

DHHS Primary Health: Sandy Damiano, Marcia Jo, Karen Giordano

**Introductions and Welcome**

**Agenda Review**

- Marcia offered several comments about the processes involved in planning this program:
- County budget process started last December with considerations for how FY 15-16 might differ from prior years and how this process is ongoing
- Board of Supervisors had a series of workshops on key issues.
- The Board item scheduled for May to provide feedback on the undocumented program is still in process.
- The stakeholder process has been fast, and there were comments at last meeting at the very end about process, and about the program design. The group did not have time to discuss fully.
- Marcia explained that the process for the County staff has been to take ideas from these meetings, meet with contracted healthcare finance expert (Stan Rosenstein) and attempt to reflect the values of the larger group and was within the budget parameters required. This process may not have been clear to all members of this group.
- Marcia encouraged stakeholders to share their thoughts early and often today.

**Budget/ Workshops**

- Intensive process: special workshops coinciding with County Budget process. Board held special workshops based on Stakeholder feedback from the June budget hearings: Healthcare for Undocumented Immigrants, Mental Health Rebalancing (not a workshop but an important area of focus), Homeless Workshop, Disproportionate African-American Deaths, Law Enforcement Workshop (Sheriff, DA, Probation). County CEO held a Budget workshop for the Board May 13<sup>th</sup>, which outlines the County budget/fiscal situation. Budget documents are available on the Board website under May 13th:
  - \$2.6 million General Fund (discretionary); there is less this year than last year
  - Increase in Realignment Funds (special, categorical funding) not able to use for healthcare. It is protective services or mental health realignment.
  - Public Health Realignment decrease as noted in last year's budget

- Budget will be public June 5th
- Budget Hearings will be held June 16th and 17<sup>th</sup> (no schedule for departments yet)

### **Board Item**

- Board item May 19<sup>th</sup> this item was pulled for discussion. June 2<sup>nd</sup> will be a consent item (receive and file). This is not a budget hearing. CEO will make recommendations for the Board to consider. Sandy outlined components of the letter which is not yet final.
- Sandy will send an email when posted on Friday.

### **DISCUSSION**

- Discussion regarding emergency Medi-Cal (about 16,000 in Sacramento when we reviewed data from the State in March; unable to break-out any categories). Estimates vary and are not reliable at local levels; only State levels. Approx. 50,000 (regardless of age or income)
- All DHA staff can complete PRUCOL. Part of Medi-Cal application. Applicant must sign an attestation which may intimidate. Some may not know about PRUCOL.

### **BHC Proposal: Nenick Vu**

- Comes from a value based model.
- Uses a block grant, similar to EAPC model
- Strong navigation component, includes transportation and translation/interpretation services
- All clinics can apply if want too; has accountability mechanism built into design, (OSHPD reports); fund existing specialty telemedicine within each clinic, focus treatment on top 5 specialty care needs, establish half-day clinics for all clinics to access; clinicians use a 50-50 match of Medi-Cal and uninsured; potentially hire new specialists at PCC.

### **DISCUSSION**

- Specialty access problems in Sacramento – all concurred.
- Dr. Meyers – Cardiovascular disease, diabetes, hypertension are all on the top 10 list of chronic diseases. Have trainees in specialty areas.
- FQHCs wish to expand primary care. All want accountability.
- Discussed use of donated services from hospitals, SPIRIT and TEACH. Also discussed telemedicine which may help maximize specialty in an innovative way. Would also need to set up at County IBH TEACH.
- Ashley – specialty care is an issue. Most challenges occur with getting in primary care (scheduling clients sometimes appointments are out several months).
- Holly – lack of access is consistent
- Amy – If need to get services out of the area, they need transportation (for Medi-Cal GMC). We need to have workgroups to address specialty care and telemedicine specialty care, regardless of what program we design, and review program progress, accountability, etc. Rosemary – agreed with Amy and would like to include data review as well during these meetings.
- Sandy – in the proposal, are the FQHCs sharing specialty care services? Miguel – specialty care that is currently offered within each clinic, there is a huge waiting list from within the own clinic. At this point in time, it's not possible now to share specialty care. Bob Kamrath – concurred with Miguel.

**Next Steps:**

- Send BHC Proposal to County Leadership – done
- Send information / link regarding Board item
- Hospitals/Medical Society to meet re: specialty. Include Sandy when indicated
- Next meeting - TBD