





## Maternal and Child Health Access

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#### SAVE THE DATE

August 15, 2012 - 8-10 AM

"California Children's Services Demystified" South Chapter Infant Development Association. \$20-25 See IDA website

November 20, 2012 - the Health Exchange Board meets in LA! Stay tuned for site, issues! See article on Health Exchange.

#### RESOURCES

2010 Maternal Infant Health Assessment (MIHA) Data Now Available

The Maternal, Child and Adolescent Health Program of the California

# **Next MCH Access Monthly Meeting:**

Thursday, June 21, 2012 10 AM - 12 noon

#### LOCATION:

MCH Access
Patricia Phillips Community Room
1111 W. 6th St., 3rd Floor
Los Angeles, CA 90017
(6th St., and Bixel St.)

#### SPEAKERS/TOPICS:

Identifying Military/Veteran Families Among your Clients: Recognizing their Special Needs and How You Can Help

Kathleen West, Public Health Consultant

Also: Budget, Health Program and Legislative Updates

#### **PARKING:**

Free at MCH Access; enter on 5th St. to 2-story parking (between Lucas and Bixel) and walk across the alley to our building

Please contact our office with any questions regarding this email or visit our website for further information about our organization.

No meeting was held in May.



# **Budget update**

As our mailing goes out, the Democratic Assembly and Senate are meeting their legislated responsibility to submit a budget to the Governor by June 15, balancing the 15.7. million deficit. For what that budget contains, see various newspaper reports, as it has been changing, see the **Democratic Senate page** and the **Democrats Assembly page**. Governor has until June 30 to sign or veto the budget - More detail at our meeting!

# **Health Exchange Board News**

The Health Exchange Board (HBEX) is charged with implementing health care reform details - benefits, enrollment, education and advertising. They have been busy making decisions on marketing and outreach and "navigator" roles and

Department of Public Health is pleased to announce the release of the 2010 MIHA data in easy-to-use tables, maps and charts. MIHA, the Maternal and Infant Health Assessment, is a population-based survey of women with a recent live birth in California that collects information about maternal experiences, attitudes and behaviors before, during and shortly after pregnancy. For the first time, in 2010, MIHA results are available at the county level for the 20 California counties with the greatest numbers of births.

2010 MIHA county, regional and statewide data are available on the newly revised MIHA website.

Please share this announcement with others interested in maternal and infant health in California. For more information about MIHA, or to be added to our distribution list, please contact us at MIHA@cdph.ca.gov.

Keep your eyes open for upcoming alerts about new fact sheets on breastfeeding and other topics!

### No Amount of Air Pollution Reduction Is Too Small!

Air Quality Management
District hosted their first
Lawnmower Exchange
program in LA County on
Saturday, June 9, at the
Rose Bowl in Pasadena.
Information on the
Lawnmower Exchange
Program is available
HERE. PSA for the
Lawnmower Exchange is
on YouTube HERE, the
English flyer HERE

responsibilities. Revised plans were posted this week about which comments will be taken, deadline today but continue to send in comments as the issue may continue, with "possible" decisions at next Tuesday, June 19 meeting. The Board is submitting a grant request to the federal government on Friday, June 29 which has some possibilities for streamlining enrollment. MCHA has been following what has been requested in prior federal requests. Learn More at the California Health Insurance Exchange Website.

Send Comment Letters: <u>info@hbex.ca.gov</u> Attend Meetings in person or via the webcast (in Sacramento except where listed):

- June 19, 2012
- July 19, 2012 (Bay Area)
- August 23, 2012
- September 18, 2012
- October 16, 2012
- November 20, 2012 (LA)
- December 18, 2012

# **Dental Managed Care Heats Up**

An MCH Access client and our advocacy were profiled in a story about Medi-Cal dental managed care problems for children in Los Angeles. The story appeared in The *Sacramento Bee*, the *Press-Telegram* (Long Beach), the *Daily Breeze* (Torrance), and other press outlets publishing results of investigation by the **CHCF Center for Health Reporting** and **The Sacramento Bee**. The reporter, Emily Bazar, ran additional articles asking legislators about their interest in increasing abysmal visit rates for kids in dental managed care in Los Angeles. Dental managed care utilization rates for children 0-20 only reached 24% in Los Angeles County in FY 2010-11, while rates for 0-3 year olds are only 13% There were over 42,000 children enrolled in that age range for which the dental managed care plans received capitation.

See Emily Bazar's blog **HERE** and a list of the dental-related stories **HERE**:

The Department of Health Care Services has already sent "Immediate Action Item" letters to dental managed care plans in LA, as DHCS did for Sacramento managed care. The state will start receiving data at the beginning of July and results will be posted online. Stay tuned for more progress. State officials are working with us and other organizations to plan a dental stakeholder workgroup for reforms in Los Angeles.

How you can help: Contact your Legislators and join efforts to demand reforms from the State Department of Health Care Services (which oversees Medi-Cal dental managed care). Remember that currently only Sacramento and Los Angeles offer dental managed care - no expansion of dental managed care should take place to additional California counties! Do you see issues

the Spanish flyer **HERE**.

The nomination form for the 2012 Clean Air Awards is now available **HERE**, and needs to be postmarked by July 13.

**Join Our List** 

Join Our Mailing List!

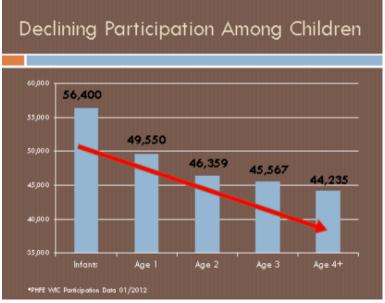
with dental managed care plans? Please talk to Monica Ochoa, Oral Health Advocacy Coordinator, at (213) 749-4261 ext. 360.

# WIC Extends How Often Children Need to be WIC Certified from Six to 12 Months!

WIC regulations currently provide that children participating in the WIC Program shall be certified at intervals of approximately six months, ending with the last day of the month in which a child reaches his/her fifth birthday.

A new legislative provision now allows a participant child, at the State agency's option, to be certified for a period of up to one year. This increased flexibility will provide administrative relief for participant children's parents, as well as for State and local agencies. In some cases, it will also allow a local WIC agency to certify a toddler, a breastfeeding mother, and an infant in the same household for the same relative period of time, as all three categories of participants may now be certified for up to one year if the State agency ensures that health care and nutrition services are not diminished.

In California, the new change took effect in March, 2012, after the State WIC Branch was able to set up new protocols and reprogram the WIC electronic system and local WIC agencies were able to prepare for the changes and train staff. So far, some WIC agencies have seen a lower "drop-out" rate among our children. In the past, WIC would see a drop in children participating on the WIC Program beginning at age 1 and then continuing as children get older.(See the graph.)



WIC appreciates your support in continuing to refer all eligible individuals to enroll on the WIC Program, and encourage them to come to WIC regularly. For more information, click **HERE**.

## **Insuring Those Who Served**

# Report Examines Veterans' Uninsurance Rates and Assesses ACA's Potential Impact

A new report finds that one in 10 of the country's 12.5 million nonelderly veterans report neither having insurance coverage, nor using Veterans

Affairs care. Released by the Robert Wood Johnson Foundation, the report is the first-ever to provide estimates of uninsurance among veterans and their families both nationally and at the state level, and to assess the potential for the Affordable Care Act (ACA) to reduce their uninsurance rates.

Researchers at the Urban Institute found that:

- An estimated 1.3 million veterans and nearly 950,000 members of their families are uninsured, together making up 4.8 percent of the nation's 47.3 million uninsured in 2010.
- Forty-one percent of uninsured veterans report having unmet medical needs, while nearly 34 percent have delayed care due to cost.
- Just four states have (veterans) uninsurance rates below 6
  percent-Massachusetts, Hawaii, Vermont, and North Dakota.
  Meanwhile, four states-Louisiana, Oregon, Idaho, and Montanahave uninsurance rates above 14 percent.
- The authors conclude that with ACA's implementation, nearly half of uninsured veterans could have access to coverage through Medicaid expansions and another 40 percent could potentially qualify for subsidized coverage in newly created health insurance exchanges, provided they do not have access to affordable employer-sponsored coverage.
- Read the report.

## Fighting US's worst teen pregnancy rate in Mississippi

Published - May 29 2012 11:47AM PST

LAURA TILLMAN, Associated Press

MARKS, Miss. (AP) - With her hair in a ponytail and her smile quick and wide, it's hard to tell that high school junior Donyell Hollins has been pulling all-nighters for most of the semester to take care of her infant daughter.

Her situation isn't unusual in the small Delta town of Marks, home to one of the highest teen pregnancy rates in the state that leads the nation in the statistic. But unlike teen mothers in previous decades, 18-year-old Hollins is benefiting from a change in attitude that's paving the way for frank discussions about parenting skills, career goals and contraception.

Instructors from the Delta Health Partners Healthy Start Initiative come to Hollins' high school monthly to teach lessons that incorporate some of the newest theories on the relationship between poverty and teen motherhood. It's a far cry from decades past, when women in Hollins' situation were given little guidance and often left to drop out and languish.

Part of the goal is to change patterns of communication about sex that have persisted for years.

"I'm going to talk to her more about it, inform her," Hollins said of her 5-month-old daughter. "'Cause I didn't have that talk with my mom. I had to learn on my own."

Read more **HERE**.

## Pink Ribbons, Inc.

Many of you may know that each year in October, MCHA focuses on prevention, rather than awareness, of breast cancer. In the past we had guest speakers from Breast Cancer Action and then from Physicians for Social Responsibility. Now a documentary has been made that looks at how the breast cancer movement has moved from activism to consumerism and challenges viewers to rethink their assumptions about the meaning of breast cancer in our society. Pink Ribbons, Inc. is a hard-hitting documentary that pulls back the pink curtain to reveal why we aren't making progress in ending the breast cancer epidemic. The film spotlights BCAction's Think Before You Pink® campaign and BCA's own former executive director Barbara Brenner.

It's no news to BCAction members that breast cancer and pink ribbon marketing has become big business for corporations and organizations whose motives don't always put patient needs before financial gain. As one woman living with breast cancer says in the film, "Our disease is being used for people to profit. And that's not OK."

See the official website for dates and cities **HERE**.- it's at Long Beach **Art Theatre** on July 1

## Medi-Cal gets high marks in general

While Medi-Cal faces tough fiscal challenges, current recipients give the state health program for low-income Californians high marks in general. In a survey released Thursday, about 90 percent of enrollees described the program as "very good" or "pretty good" and 69 percent said it offered access to high quality care.

The survey, commissioned by the California HealthCare Foundation in Oakland, was released as Medi-Cal, the state's Medicaid program that insures 7.5 million residents, is bracing for a potential influx of as many as 3 million more in 2014 - if the federal health legislation is upheld by the U.S. Supreme Court.

At the same time, the state budget crisis has already forced the elimination or reduction of benefits with the threat of more cuts on the way. Although the federal government will help support the expansion in the short term, in the long term the funding situation remains murky.

"If the coverage expansions in the Affordable Care Act are implemented as enacted, then Medi-Cal will go through some historic changes," said Chris Perrone, deputy director of the California HealthCare Foundation's health reform and public programs initiative.

The survey, considered the largest of its kind, was conducted in late 2011 and early 2012 of nearly 1,100 Medi-Cal recipients under 65. It did not include people covered by both Medi-Cal and Medicare. Some discontent

The response was generally positive, but the survey found enrollees with disabilities or health problems who had less favorable experiences with Medi-Cal. Nearly half of those who described themselves as in fair or poor health said they had trouble getting an appointment to see a specialist. Read more here...

## **Maternal and Child Health Access**

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