



## Maternal and Child Health Access

# Monthly virtual meeting

This Thursday, March 18, 2021 10:00 am to 12:00 pm

### Where?

10:00 AM to 12:00 PM  
This is a virtual meeting  
Do Not come to our location!

After you register (at RSVP below) for this event, look for the Zoom link in your registration confirmation email

questions?  
213 749 4261  
[info@mchaccess.org](mailto:info@mchaccess.org)



### Speaker/Topic:

We missed February's Dental Health Month, so this month:

**Susan Flores, Senior Policy Coordinator**

California Pan-Ethnic Health Network (CPEHN)

Access to Care for Oral Health –  
How to plug in to oral health issues  
in Los Angeles

Remember: Experts: [Prevention Critical as Dental Visits Plummet During Pandemic](#)

**PUBLIC CHARGE – back to 1999  
The American Recovery Act –  
what's in it?**

Meeting Notes – Thursday February 18 - click [HERE!](#)

**Guest Speaker: Hermes Padilla  
Community Engagement Specialist  
Strategic Actions for a Just Economy**

SAJE, Strategic Actions for a Just Economy, works on tenant rights, equitable development and healthy homes. Hermes walked us through housing protections brought about by AB 3088 and SB 91, with SB 91 (just passed at the end of January, 2021) extending California's previous eviction moratorium (AB 3088) through June 30, 2021.

SB 91 also creates a framework for distributing rental assistance for qualifying tenants who cannot pay rent because of COVID-19. Applications were to be out March 15, but the city's website now says March 30. See also the state's [Housing is Key](#) or [Stay Housed LA County](#)

Los Angeles County will have the state administer their funds, while in Los Angeles City, the [Housing and Community Investment Department \(HCID\)](#) will administer

The assistance is regardless of immigration status.

The most urgent of SB 91's provisions is a requirement that landlords must send a notice **by February 28** describing changes in the law to all tenants who are behind in rent for the period of March 1, 2020 to February 1, 2021. Failure to send the notice by the February 28 deadline may affect landlords' ability to exercise remedies against tenants.

The process is complex and MCHA urges agencies to help clients or send the to organizations funded to assist – some are linked [here](#) as well as [SAJE](#) itself and [Eviction Defense Network](#)

See Herme's slides at our website for more detail on qualifying for SB 91 and AB 3088 relief.

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**MCHA reviewed changes in health coverage for the pandemic**, mainly in Medi-Cal. We have produced two materials on COVID-19 related care, one more text and explanation and one a piece in color in Spanish and English versions:

[Three important Medi-Cal programs to help with COVID-19 testing and treatment \(including in-patient hospitalization\), regardless of immigration status](#)

[Medi-Cal and Medi-Cal Access Program \(MCAP\) Protections During the Public Health Crisis](#)

Your feedback and questions welcomed!

### **Three Reminders - Medi-Cal During COVID:**

**1. No Negative Action through end of the year** - The ONLY ways that Medi-Cal should be cut off is if a beneficiary requests, or dies, or moves out of state! Please note that thousands are still inadvertently or through systems issues being cut off, but the state moves to put them back on Medi-Cal. Please contact DPSS or have your client contact DPSS's Customer Service Line if this happens.

**MAYBE STAYING ON MEDI-CAL IS BETTER THAN MOVING TO OTHER INSURANCE POSTPARTUM** – Discuss it with the client! If there are problems using that Medi-Cal postpartum, let MCHA know! Restricted Medi-Cal covers all medically necessary services, including dental and mental health.

2. **“COVID Uninsured** – neither income nor immigration status matter, covers COVID testing, treatment, hospitalization. No public charge for any COVID-related service. See the state’s page [here](#). but also MCHA’s information above.

3. **“Waive”, or Get Rid Of, Medi-Cal Premiums During the Pandemic** Few Medi-Cal enrollees know that during the public health emergency, premiums paid monthly can be waived for MCAP, Optional Targeted Low-Income Children’s Program and the Medi-Cal Access Infant Program (infants born to a person covered by MCAP for the pregnancy), County Children’s Health Initiatives and the 250% Working Disabled Program. MCHA and other advocates have made suggestions about the posting, language and distribution of notices regarding the waived premium issue. The clearest link right now is this one: [Premium Waiver Due to COVID-19](#) - November 4, 2020 on the [COVID-19 page](#). But no one has to HAVE COVID in order to get the waiver  
Here is a link to the notice MCAP enrollees should be getting:  
[Monthly Contribution Waiver for Medi-Cal Access Program](#)

## New Since Meeting

### Vaccine Eligibility Expanding to Persons in LA County with Qualifying Medical Conditions (information from LA County)

On March 15th, people aged 16-64 who have underlying health conditions or disabilities are now eligible to receive vaccines, as their conditions put them at the highest risk of becoming very sick from COVID-19.

These conditions include:

- Cancer, current with weakened immune system
- Chronic kidney disease, stage 4 or above
- Chronic pulmonary disease, oxygen dependent
- Down syndrome
- Solid organ transplant, leading to a weakened immune system
- Pregnancy
- Sickle cell disease
- Heart conditions, such as heart failure, coronary artery disease, or cardiomyopathies (but not hypertension)
- Severe obesity (Body Mass Index  $\geq 40$  kg/m<sup>2</sup>)
- Type 2 diabetes mellitus with hemoglobin A1c level greater than 7.5%

OR

- If, as a result of a developmental or other significant, high-risk disability, one or more of the following criteria applies:
- A COVID-19 infection is likely to result in severe life-threatening illness or death;  
OR
- Acquiring COVID-19 will limit the individual’s ability to receive ongoing care or services vital to their well-being and survival; OR
- Providing adequate and timely COVID care will be particularly challenging as a result of the individual’s disability

Persons who are newly eligible and qualify for a COVID-19 vaccine due to a medical condition should note that during registration for a vaccine appointment, they will be asked to state that they have a high-risk medical condition or disability.

**To protect confidentiality, they will not be asked to disclose the specific condition.**

People getting vaccinated must provide documentation at all appointments with either a letter from a healthcare provider, a personal physician or an agency providing services or, if not available, the eligible person or their caretaker will be asked to sign an attestation. **(See Los Angeles County's form [here](#).)**

All eligible persons will also need to provide identification (government ID not required) and proof that they live within LA County at their appointment.

Appointments at Los Angeles County run sites for those with qualifying medical conditions will be made available starting March 15. It is recommended you follow @lapublichealth on [Facebook](#), [Twitter](#) or [Instagram](#) for when appointments will be made available.

Additional information posted on [www.VaccinateLACounty.com](http://www.VaccinateLACounty.com)

Additional Essential Workers Now Eligible for COVID-19 Vaccine

This past week, several new essential workforce groups were added to those eligible for the COVID-19 vaccine. Below are the current eligible sectors for the vaccine.

Eligible Sectors for the COVID-19 Vaccine by Occupation

- Food & Agriculture
- Healthcare Workers
- Emergency Services
- Education and Early Childcare
- Public Transit (New)
- Janitorial/Custodial (New)

A full breakdown of the occupations by sector is available at our webpage [How to Make an Appointment](#).

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Vaccine assistance websites (NOT county or state-sanctioned):

<https://www.findmyvaxla.com/>

<https://vaccinefinder.org/>

<https://www.gotsla.org/>

**New Estimates of U.S. Pregnancy Rates Show Long-Term Trends Across Age-Groups**

Overall pregnancy rates in the United States reached their lowest recorded levels in 2017, according to estimates released by the Guttmacher Institute in a new report, [Pregnancies, Births and Abortions in the United States, 1973–2017: National and State Trends by Age](#), by Isaac Maddow-Zimet and Kathryn Kost.

The data, which portray long-term trends for all age-groups, demonstrate long-standing declines in pregnancy rates among young people and steady increases among older age-groups. Additionally, the data show strong regional patterns. The report summarizes these findings and provides a series of interactive figures through which users can explore how the reproductive lives of women have changed over time.

The data set is publicly available, and select estimates are also available through [Guttmacher's Data Center](#).

### **Key findings**

In 2017, the most recent year for which comprehensive data are available:

- Pregnancy rates for women of reproductive age reached their lowest recorded levels, with 87 pregnancies per 1,000 women aged 15–44.
- Pregnancy rates for women aged 24 or younger also reached their lowest recorded levels, continuing a long-standing decline in pregnancy rates among young people. There were 14 pregnancies per 1,000 women aged 15–17, down from a peak of 75 in 1989; 57 pregnancies per 1,000 women aged 18–19, from a peak of 175 in 1991; and 111 pregnancies per 1,000 women aged 20–24, from a peak of 202 in 1990.
- The pregnancy rate for women aged 40 or older reached a historic high of 19 pregnancies per 1,000 women. This finding exemplifies the increasing rates of pregnancy among older age-groups over the past 40 years.
- Pregnancy rates among women aged 15–19 and 20–24 were generally highest in the South and Southwest. Among women aged 30–34, 35–39, and 40 or older, pregnancy rates were generally highest in the Northwest and Northeast.

View the full report, including interactive figures, and access the data set at [Guttmacher.org](#).

## **ALERT: Important Change to Public Charge Rule**

Since March 9, the public charge rule in place under the Trump administration will no longer be enforced. The [U.S. Citizenship and Immigration Services \(USCIS\)](#) will not consider **participation in Medi-Cal (except for long-term care), public housing, or CalFresh** as part of the public charge determination. See also [DHCS website](#)

Advocates are approaching the state about rapidly changing their materials and messaging. Stay tuned!

**State of California  
HEALTH AND HUMAN SERVICES AGENCY**

**State Health and Human Services Leaders Issue Joint Statement on Federal Public Charge Changes**

SACRAMENTO – California’s health and human services leaders today issued the following joint statement on the Biden Administration’s announcement that it will no longer enforce the 2019 public charge final rule.

Joint statement from California Health and Human Services Secretary Dr. Mark Ghaly; California Department of Social Services Director Kim Johnson; California Department of Public Health Director and State Public Health Officer Dr. Tomás Aragón; and California Department of Health Care Services Director Will Lightbourne:

“Immigrants and their loved ones across California can seek and accept medical care, food assistance and public housing without fear or confusion, thanks to changes in federal policy. They won’t be forced to choose between getting help for basic needs and their ability to stay with their families in the United States.

To immigrant families in California, we want you to know that California fought to end this shameful policy and you should continue to use available public services that help you and your family thrive and be healthy. Remember that medical testing, treatment and preventative services for COVID-19, including vaccines, will not be considered for public charge purposes. If you have questions, you can find [a list of nonprofit organizations providing legal immigration services](#) on the California Department of Social Services website.

To providers across California administering health and social services programs, thank you! We are grateful for all you do to ensure that everyone has access to basic services. Your efforts further our collective work to build a healthy, vibrant, and inclusive California for All.”

For more information on federal changes to the public charge rule click [here](#).

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*The following statement is from Jacey Cooper, State Medicaid Director and DHCS Chief Deputy Director for Health Care Programs:*

“We welcome the federal decision to stop treating Medi-Cal as a public charge. Diseases, including deadly pandemics like COVID-19, ignore borders and legal distinctions between people, so it’s in everyone’s best interest that all individuals get the care they need.”

## Join the Women's Policy Institute

Ready to flex your local policy muscles? [Applications are due April 8th](#) for Women’s Policy Institute Local - our locally-focused and experiential policy advocacy training program.

WPI-Local is an experiential, year-long fellowship open to community-based advocates from all 58 counties in California who want to address the inequities embedded in public

institutions. The fellowship delivers training and tools, builds networks, and develops leadership skills to advance local policy campaigns and build power throughout the state. **To apply you will need a team of three or four collaborators** and an idea for a local-level policy project that will advance racial, economic, and gender justice.

**Thursday, March 25th: Women’s Policy Institute Local Informational Webinar**  
[English at 10 am PT](#)

## Resources

**Low-cost internet, devices or a free computer course**, SAJE is partnering with the nonprofit organization human-I-T to provide low-cost internet resources needed to get connected. Human-I-T is also here to help those low-income seniors who are not connected or are paying too much for the internet, those who need computing devices, and those who’d like to improve their digital literacy.

Call 888-391-7249, text 562-372-6925 or see website [www.human-i-t.org](http://www.human-i-t.org) Under “community services”

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### Free Tax Prep

Angelenos will again be able to rely on the Citywide FamilySource Centers (FSCs) to assist them with their tax filings through the Free Tax Prep Los Angeles (FTPLA) Program. The FTPLA program has been an effective program helping working families and qualifying individuals claim their cash refunds.

The FTPLA assists income-qualified residents in claiming their tax refunds. Also, for the first time ever, immigrant filers with an [ITIN](#).

- City residents can [visit](#): to find the nearest locations and hours of operation.
- Tax filers can also use secure drop-off services which require appointments. Assistance is available in English, Spanish and Korean at various locations.
- Self-filers! Tax filers can file their own simple returns for free online with services in English and Spanish at <https://www.myfreetaxes.org/>

For additional resources visit <https://hcidla2.lacity.org/covid-19>

## Save the Date

**Wednesday March 17, 2021 – SPA 4 Regional Meeting 10:00am – 11:30am**

**Register for the event [HERE!](#)** As a community partner, we are inviting you to join us for the first meeting of the year focused on providing an update on COVID-19 vaccines and the public charge rule.

Please join us to hear more information on the COVID-19 vaccinations; get the latest updates on the vaccine roll out; get the facts about public charge as it relates to

accessing COVID-19 testing, treatment, and vaccinations; and more announcements from DPH and our community partners.

**Maternal Mental Health Now:**

The “**2021 Perinatal Mental Health Conference for Black Birth Workers, Providers, and Clinicians**” will take place virtually over four weeks, 4/30, 5/7, 5/14, and 5/21, from 9:00 am to 12:30 pm each day.

This training aims to build the capacity and competency of Black clinicians and providers in Los Angeles County in order for Black families to find specialized perinatal providers who look like them and with whom they can relate. This conference will provide foundational knowledge on perinatal mental health care through a culturally-informed lens to help providers build concrete skills and tools to more adequately address the mental health needs of Black women and birthing people specifically within the Los Angeles County area.

Tickets are **free to Black birth workers in the Los Angeles** area. In compliance with the grant funders for this project, we are currently only able to offer conference seats to those working in Los Angeles County or serving communities Los Angeles County. We hope to extend the training and content to others in various ways over the upcoming year.

For questions please contact Erin Sricharoon at [erin@maternalmentalhealthnow.org](mailto:erin@maternalmentalhealthnow.org)

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