

Maternal and Child Health Access



Monthly (Virtual) Meeting
Thursday, September 19, 2024 - 10:00 am to 12:00 pm

This fall voters will decide on a number of health-related ballot measures. We will hear from speakers on four of them, and provide at least some information on Prop 32, which raises the minimum wage in CA and Prop 4, a bond measure which among other things raises money for safe drinking water, and Measure A to increase sales tax for funds for housing and homelessness.

Where?

This is a virtual meeting



10:00 AM to 12:00 PM

After you register, look for the Zoom link in your registration confirmation email

Speaker/Topic:

Kristen Golden Testa – The Children’s Partnership – Prop. 35 – Permanent tax on managed care health plans for specific purposes

Monica Davilos, California Budget and Policy Center – Prop. 36 – Increase Penalties for Theft and Drug Trafficking

Susie Shannon, of Yes on 33, No on 34 - Prop 33 – Allow rent control and Prop 34 – Require certain providers to use prescription drug revenue only for strict patient care and not on housing or other low-income programs

Updates

Notes from Monthly Meeting August 15, 2024

www.mchaccess.org/meetings.htm

**Speakers: Tiffany Rivera, Climate Health Project Coordinator,
[Physicians for Social Responsibility-Los Angeles \(PSR-LA\)](#)
Heat Relief for LA - what's happening, how you can be involved, and what
you can do to help the community you work with!**

It was a welcome relief to have Ms. Rivera speak to the MCHA meeting on heat in LA.

Extreme heat has direct and indirect impacts – causing premature death, increased risk of premature birth, increased hospitalizations, mental and physical health issues. Heat disrupts power, water and transport leading to public health problems; more accidents results in increased emergency calls and overburdens our health care system. Diseases are more easily transmitted and flourish in hotter climates. And there are increased accidents and risk for workers, especially if they are outside. See infographics in [English](#) and [Spanish](#) and cooling resources in [English](#) and [Spanish](#) on our website.

Physicians for Social Responsibility is one of the six backbone organizations of Leap LA. Leap LA is a collaboration among deeply allied Los Angeles-based Indigenous, community environmental justice, public health, and climate advocacy organizations -- Physicians for Social Responsibility-Los Angeles, Esperanza Community Housing, Communities for a Better Environment, Strategic Concepts in Organizing and Policy Education (SCOPE), Pacoima Beautiful, and Sacred Places Institute for Indigenous Peoples -- who came together to advance an integrated community-driven approach to the climate crisis and local crisis of toxic exposure and environmental racism. This collaboration helped establish the Climate Emergency Mobilization Office, or CEMO in 2022.

City, County and Community-level initiatives exist – the City has a Heat Action and Resilience Plan (HARP), which the CEMO leads, the County has LA County Heat Action Plan (CHAP) and community representatives through CEMO serve on the boards for each of these. CEMO also provides community education workshops. The County's CHAP engagement plan has a number of activities for the key goals of cooling and protecting outdoor realms, creating heat-resilient indoor spaces and expanding heat safety communication, resources and emergency actions. The first workshop on these goals was held on Tues Aug 20 at the Natural History Museum.

There is work to create a safe maximum temperature threshold for residential units, though no one seems to think it is adequate at 82 degrees. Ms. Rivera told us of local work in research and organizing taking place with university partners.

Finally, organizations can get involved by

1. Attend the open-invite workshop for CHAP
2. Participate or nominate an organization for a CHAP working group
3. Host your own Heat & Health Workshop
4. Serve as a cooling center & resource hub
5. Partner with other organizations doing local policy work

**Health Program and Coverage Updates – Liz Ramirez, Director,
Training and Education MCHA**

Liz showed us the revised and updated [MCHA 2024 Health Care Countable Monthly Income Comparison Chart](#) for health coverage. We've had a version posted but Liz updated it to show new income levels that are used more often and has taken out some less used and obsolete. We have a 250% column for Working Disabled and the column for Covered CA notes that people with income up to 400% can qualify for premium tax credits, but they can qualify

even over that income level if premiums are over 8.5% of income – subsidies will lower the premiums to that amount, considered affordable.

Liz has also updated the famous colorful bar chart that is now the flip side of the income chart and updated the special chart for [pregnancy](#) health coverage to show MCAP, Covered California and the various Medi-Cal programs that cover pregnancy. Check out these resources!

[Kaiser Permanente Community Health Care Program - enrolling with Special Enrollment and November Open Enrollment](#) - Celia Valdez, MCHA, Director of Health Coverage Outreach and Navigation

- a. Free
- b. To 300% of Federal Poverty Level - so kids 266-300%, adults 138 -300% (below that should be eligible for Medi-Cal)
- c. Not eligible for other health insurance
- d. Enroll through a community organization - easiest and most chance of success (MCHA is one of the orgs...)

Remember enrollment is also year-round IF someone loses existing insurance but must apply within 60 days of losing insurance.

Current enrollees must renew annually! Community Health Care Program members whose subsidy will expire on December 31, 2024, should have received reapplication information. You MUST provide Kaiser Permanente the signed form, proof of household income, and other applicable documents by October 1, 2024, to determine if you still qualify for financial help in 2025.

Newborn Hospital Gateway Enrollment – how is it going? Lynn Kersey, MCHA ED

MCHA passed and the state did not implement the Newborn Hospital Gateway in 2003. We are thrilled to see it finally being implemented, July 1, 2024, but there are glitches to work out.

Participating in the Gateway is mandatory if a hospital accepts Medi-Cal or MCAP for deliveries and participates in any Medi-Cal PE program – Hospital PE, PE for Pregnant People (the state still hasn't changed to this name on their websites) or Children's PE that took over for the CHDP Gateway on July 1. See state information for patients [here](#) and in [All County Letter I24-09](#). The hospital must enroll the newborn within 72 hours of birth or 24 hours of discharge, whichever is sooner.

The Newborn Gateway is an electronic enrollment transaction that:

- Establishes eligibility in real-time for 12 months of continuous coverage from the date of birth
- Assigns a Client Index Number (CIN)
- Generates a temporary Immediate Need card which can be used to get services right away
- Mails a State of California Benefits Identification Card (BIC) to replace the temporary Immediate Need card

In order for this process to go smoothly, the parents must be ready with the baby's name and spelling and the hospital must ask that information. Nothing else is needed. The Immediate Need card can be used for provider visits and the managed care packet arrives or someone helps sign up for the provider the family wants for the baby. 8U for Medi-Cal and E8 for MCAP (new) alerts the county of the birth. Eligibility under these aid codes is continuous from the

newborn's date of birth until the first birthday. Also, "Counties are reminded that enrollment of a Deemed Infant constitutes as the reporting of the individual's pregnancy and requires that the County maintain the postpartum individual in coverage during the 365-day postpartum period following the infant's date of birth." Therefore, we should see no requests for renewals for post-pregnancy individuals if the newborn has been reported. (MCHA is seeing this still).

Unfortunately, hospitals are allowed to list the mother's last name and leave the baby's name blank, or use "Baby boy/girl" and the last name. Then the card must be corrected with DPSS. In addition, other entities are jumping in and enrolling babies who have been enrolled; somehow this is resulting in two cards – one may be correct, both may be incorrect. Please encourage the hospital you work with to establish a process for enrolling the newborn as correctly as possible – as they do when ordering the newborn's birth certificate.

New since last meeting:

The California Food Assistance Program (CFAP) Newsletter

The California Food Assistance Program (CFAP) has developed an Implementation Newsletter that will be published quarterly (Fall, Winter, Spring and Summer) leading up to the CFAP expansion implementation (expanding to non-citizens, 55 and older, now delayed until October 1, 2027).

The newsletter will provide a summary of the expansion progress and may include data, participant stories, timelines, and important dates. The Newsletter will be available in both English and Spanish and you can find it on the [CFAP](#) webpage.

Please contact us if you have any questions about the CFAP expansion at CFAP@dss.ca.gov.

[Doctors Give Black Women Unneeded C-Sections to Fill Operating Rooms, Study Suggests](#)

Healthy Black women with low risk factors were far more likely to get C-sections than white women with similar medical histories, a large new study found.

By [Sarah Kliff](#)

Sept. 10, 2024

Obstetricians are more likely to give Black women unnecessary cesarean sections, putting those women at higher risk for serious complications like ruptured surgical wounds.

That's the conclusion of a [new report](#) of nearly one million births in 68 hospitals in New Jersey, one of the largest studies to tackle the subject.

Even if a Black mother and a white mother with similar medical histories saw the same doctor at the same hospital, the Black mother was about 20 percent more likely to have her baby via C-section, the study found.

The additional operations on Black patients were more likely to happen when hospitals had no scheduled C-sections, meaning their operating rooms were sitting empty. That suggests that racial bias paired with financial incentives played a role in doctors' decision-making, the researchers said. [Read more...](#)

Mixed-Status Families and Immigrant Families with Children Continued Avoiding Safety Net Programs in 2023

income members of immigrant and mixed-status families, including children, continue to miss out on needed benefits and services, and experience high rates of material hardship. According to [a new Urban Institute report](#), nearly one in four adults in mixed-status families avoided safety net programs because of green card concerns in 2023 and more than one in seven adults in immigrant families with children avoided safety net programs because of green card concerns.

DMHC Fines Blue Shield of California \$250,000 for Illegally Billing Members for Contraceptive Health Care Services

(Sacramento) – The California Department of Managed Health Care (DMHC) took [enforcement action](#) against California Physicians' Service (Blue Shield of California), including a \$250,000 fine, for illegally billing health plan members for contraceptive health care services. The plan paid the fine, and made \$228,254 in reimbursements, interest and penalty payments to 334 members who were incorrectly charged.

“Under the law, health plans must cover contraceptive health care services for all members without imposing a deductible, coinsurance, copayment or any other cost-sharing requirement,” said **DMHC Director Mary Watanabe**. “The plan violated the law when it charged members for covered contraceptive health care services.”

BACKGROUND: California law requires health plans to cover contraceptive drugs, devices, and products approved by the federal Food and Drug Administration at no cost to the health plan member. This includes follow-up services related to the drugs, devices, products, and procedures, including but not limited to management of side effects, counseling for continued adherence, and device removal. In this case, a health plan member was billed cost-sharing by Blue Shield of California for the removal of a hysteroscopic intrauterine device (IUD), which should have been covered at no cost under the law. The member filed a grievance with the plan, but the plan upheld its decision to bill the member. The member then filed a complaint with the DMHC Help Center which led to a broader investigation by the DMHC.

IMPACTED HEALTH PLAN MEMBERS: During the DMHC’s investigation, Blue Shield of California conducted an audit and identified 334 other health plan members who were wrongfully charged a cost share related to covered contraceptive health care services between 2016 and 2019. The plan reimbursed the impacted members, including interest.

WHAT HEALTH PLAN MEMBERS CAN DO: The DMHC encourages health plan members experiencing issues with their health plan, including billing issues or denials of health care services, to file a complaint, also called an appeal or grievance, with their health plan. If the member does not agree with their health plan's response or the plan takes more than 30 days to fix the problem for non-urgent issues, the DMHC Help Center can work with the member and health plan to resolve the issue. If a health plan member is experiencing an urgent issue, they should contact the DMHC Help Center immediately.

Health plan members can file a complaint or apply for an Independent Medical Review with the DMHC Help Center at www.DMHC.ca.gov or 1-888-466-2219.

Young People Need Condoms – Support SB 954

It's on the Governor's Desk! See, "[A Chance to Protect High School Students Health: Free Condom Distribution](#)". These statistics just say it all:

- [Young people aged 15-24 accounted for 53%](#) of new cases of sexually transmitted infections (STIs) in 2020.
- [Nineteen percent of all new HIV cases in 2021](#) were among young people between the ages of 15-24.

Voter Information Websites

[REGISTER TO VOTE!](#) In 10 languages... In California, the deadline to register to vote for any election is 15 days before Election Day, so please register early! Registration must be postmarked or submitted by October 21 for the Nov. 5 election!!

Voter guides:

[LAist Voter Game Plan](#) – with key dates, in-person voting sites, [Courage Campaign](#)

League of Women Voters of California – [Easy Voter Guide](#)

Office of the City Clerk – [Ballot Measures](#)

Ballotpedia – [2024 Voter Toolkit](#)

CalMatters: [Statewide Ballot Measures](#)

Official Secretary of State – Qualified Statewide Ballot Measures

RESOURCES

Liberty Hill Foundation – Environmental Leadership! Applications are now open for the second cohort of our [Environmental Leadership Initiative \(ELI\)](#)—a statewide fellowship that offers leaders advancing Environmental Justice a transformative experience in their leadership journey. We will be hosting a series of Application Overview [Webinars](#) to help with any questions about the program and/or application. Participants may ask questions through a Q&A. Webinars will be recorded and made available on the website.

Upcoming Informational Webinars

Tuesday, September 17th at 4 p.m. ([Register](#))

Wednesday, September 25th at 12 p.m. ([Register](#))

Housing Rights Center – Project Place. Please enjoy the **September 2024** edition of the Housing Rights Center's [Project Place](#).

Project Place is a free monthly listing of rental properties for low-income, senior, and veteran residents throughout Los Angeles and Ventura Counties. Please contact housing and service providers directly.

Need help? Call 211 or find resources starting on page 40.

NEW: [Project Place Toolkit](#) is a free resource guide for tenants to use when searching and applying for housing. Download your copy today and learn more about how to find available housing, the basics of renting, source of income discrimination and more!

Save the Date

September 25, 2024 1:00 to 3:00 - Abortion is Health Care Training – Virtual, by Zoom.
Register [here!](#)

For health coverage navigators, case managers, clinic personnel – anyone who assists pregnant people to find and access any kind of abortion, from medication to high-risk. Please feel free to contact Rosie, rosier@mchaccess.org or Liz, Lizr@mchaccess.org with questions.

Monday, October 7, 2024, 12:00pm - 1:30pm Virtual Event, Bridging Divides with Empathy: A Webinar on Understanding and Inclusion with Kena Chambers, BA I/ECMH-C & Kirsten Sippel-Klug, PT MPP, I/ECMH-C. Sponsored by Infant Development Association
In this webinar, we offer insights into building strong and inclusive partnerships across racial divides based on the personal experiences of a parent and an early intervention provider. Our speakers will delve into their journey, spotlighting the challenges and triumphs of working through and beyond the impacts of structural racism. See information and registration [HERE:](#)

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