### **Maternal and Child Health Access**















# Monthly Virtual Meeting Thursday, July 20, 2023 - 10:00 am to 12:00 pm

#### 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:

Group B Strep - What is it? Why do we care about it during pregnancy?

Donna Russell

Group B Strep Parent

Group B Strep Parent Global Health Consultant

## Marti Perhach

CEO/Cofounder Group B Strep International

Updates on Medi-Cal renewals; resources

**July is Minority Mental Health Month** 

Notes from Monthly Meeting June 15, 2023 (website)

# Speaker: Sharon L. Rapport Director, California State Policy - Corporation for Supportive Housing (CSH) The Housing Benefits in Medi-Cal's CalAIM Program

Ms. Rapport took us through some of the history of CalAIM. In 2015, the federal Centers for Medicaid and Medicare recognized the role of housing in health, and that Medicaid can pay for housing-related services. CalAIM "replaced" the state's Health Homes and Whole Person Care initiatives but that the numbers are much smaller under CalAIM. CalAIM is intended to streamline services rather than having them received from a number of state agencies, and broaden services that may be considered to address social determinants of health. CalAIM is made up of some seven different programs; two specifically can address people experiencing homelessness – Enhanced Care Management and Community Supports. The streamlining and consistency has not really taken place.

Enhanced Care Management (ECM) is an entitlement – but it is more care coordination. It doesn't fund the actual services that are needed. So some services will be through ECM and others needed are through Community Services, which are NOT an entitlement and which are voluntary for plans to provide. So only one or none of the plans in a county may provide the service needed. ECM services must be authorized and community services must be authorized separately, which can be difficult for people experiencing homelessness. The 14 Community Services are "In Lieu Of" meaning the plan would not normally be provided, but can pay for the services and more costly health care services can be avoided.

Ms. Rapport took us in more detail through specific housing-related Community Services Day Habilitation; recuperative care/medical respite – a safe place for those leaving the hospital who receive nursing care while there. Housing transition and navigation services has multiple elements – help people navigate. The housing navigator should assess what is needed to move into housing and what will be needed there and work with that individual to come up with a support plan - connecting with treatment, recovering documentation, a food plan, income, etc. - and addressing those needs. From the housing search all the way to move-in – furniture and pots and pans as well. Housing deposits – these are one-time funds up to \$5000 for security deposits and utilities, even back bills, first-last month, and other one-time expenses. Housing tenancy and sustaining services – are ongoing evidence-based services that have been found important to housing stability. Since most people are homeless due to economic reasons, 20-30% may need more intensive support to stabilize in housing, especially if they have been homeless for years and have experienced years of trauma, or have cycled in and out of living situations like jail or group homes. They may not have independent living skills. Services include case management, creating goals, budgeting, plans for meeting goals, working with the landlord, and even crisis management. The model is very different for homeless service providers who are used to grants and maybe even up-front payments. These are payments for services after the fact and a contract and authorizations may be set up with different timelines and reauthorizations and documentation. Funding may come 30-90 days later. Administratively it can be a nightmare for many service providers. Some counties

have contracted with the managed care plan and then subcontracted to the homeless service providers and that seems to work more smoothly.

# Aaron Lester Outreach Specialist - CA State Treasurer The ScholarShare Investment Board/CalKIDS Program – Savings for Kids

Mr. Lester spoke to us of the funds available to children born as of July 1, 2022, regardless of income OR who are an eligible low-income public school student in grades 1-12\* in California.under the CalKids program <a href="https://calkids.org/">https://calkids.org/</a>. The funds require registration.

Even more funding is available if the funding is put into/received into a Scholarshare account - <a href="https://www.scholarshare529.com/">https://www.scholarshare529.com/</a> This account must be opened and linked to the savings – two steps. It's free money that California's families can utilize for college for kids.

Research shows that if families have even \$500 of savings, or less, they are three times more likely to enroll in college and nearly four times more likely to graduate than children with no savings. CalKIDS provides a starting point for that savings. Newborns:The CA Dept of Public Health informs of the birth so that families 90 days or so post-birth can register, then the deposit is automatic. \$25 is given at birth, then once a child registers, another \$25. The family must link to a scholarShare account to receive the last \$50. Secondly, low-income public school students 1st-12th grade are identified by lists of benefits received, for example, and their school having students of low income. They are eligible for up to \$1500. The initial amount received is \$500, if they are homeless they receive another \$500, and if they are in foster care, another \$500. The funds are tax free/tax deferred.Mr. Lester discussed how the funds are dispersed – they must be used when the child is between 17-26 years old.

# Make sure people get "full breadth" Medi-Cal during pregnancy and for the year after!

Please let us know of any questions or issues you have with aid codes and/or providers not accepting Medi-Cal after the 60+ day postpartum period. Encourage your clients to use their Medi-Cal – to get their eye and dental exams, mental health screenings and treatments, and whatever else is needed. MCHA can help! See our newest resource, "Make sure people get "full breadth" Medi-Cal during pregnancy and for the year after" to know when to report a pregnancy. Clients post-pregnancy who are renewing Medi-Cal may not be protected from discontinuance and may not get their full 365 day eligibility if the County/Medi-Cal does not know they were pregnant!

Pregnant people can report a pregnancy postpartum if they have not already, in order to get the full-breadth/scope postpartum benefits as well as the Deemed Eligibility for their newborn. We have learned of (maybe just one) DPSS District in Los Angeles that

is denying adding on Aid Code 76, which is a necessary postpartum aid code for some parents, such as in M2 and M4, because DPSS may not know they are pregnant. The District said that pregnancy cannot be reported postpartum, which is incorrect. When the cases are reported, they are corrected – but many pregnant people may not have an advocate! Have you seen this incorrect language or similar?

"Your inquiry has been reviewed. Please note per MediCal Policy Aid Code: 76 is afforded when Pregnancy is reported prior to Live Birth. In this case DPSS does not have any record of the Client reporting Pregnancy for \_\_\_\_\_ therefore unfortunately she does not qualify for aid code: 76"

Please let me <u>lynnk@mchaccess.org</u> or Liz Ramirez <u>lizr@mchaccess.org</u> know – thank you – and thanks to the advocate who brought this to our attention!

## **New Since Last Meeting**

Failures at L.A. hospital led to patient's death after Csection, state finds and Cedars Sinai faces federal civil rights investigation over treatment of Black mothers

The article below has links to the deaths at Centinela in Inglewood, and Cedars Sinai as well.

A state investigation faulted California Hospital Medical Center in Los Angeles for faulty practices that led to the death of a patient.

(Mel Melcon/Los Angeles Times)
BY EMILY ALPERT REYES
STAFF WRITER
JULY 13, 2023 9:48 AM PT

Faulty practices at a Los Angeles hospital led to a patient hemorrhaging to death hours after giving birth by cesarean section, a state investigation found.

California Hospital Medical Center in downtown L.A. failed to recognize signs that the patient was bleeding internally, which resulted in the woman returning to the operating room four hours after those signs began to emerge, according to the California Department of Public Health.

The patient, who was at high risk for bleeding, died the same day in March as her C-section, according to the state report. An autopsy found the cause of her death was hemorrhagic shock — severe loss of blood causing inadequate delivery of oxygen to the cells — along with an impaired ability for the blood to clot and stop bleeding, the report indicated.

State investigators called an "immediate jeopardy" situation at the hospital, which means that its failure to meet requirements had caused or would likely cause serious harm or death. The label was removed after California Hospital Medical Center turned in a plan that included reeducating staff in its labor and delivery department on detecting and treating hemorrhages, according to the **state report** on its findings.

**HEALTH CARE** 

# 2023-24 Budget Wrap-Up (Thanks to the Western Center on Law and Poverty for below)

The Governor and Legislature reached their <a href="2023-2024 budget">2023-2024 budget</a> agreement, including a package of implementing bills detailing how California will spend \$310 billion in revenues, manage a deficit, and maintain reserves for future uncertainty. After years of a budget surplus, California is forecasting a downturn in funding due to a combination of capital gains losses and delayed tax filings due to natural disasters, but California remains strong. The final budget reflects \$37.8 billion in total budgetary reserves and additional funds from the Managed Care Organization tax.

**Health4All:** The budget maintains full funding to **expand full-scope Medi-Cal eligibility to all income eligible adults ages 26-49** regardless of immigration status on January 1, 2024.

Managed Care Organization (MCO) Tax: The budget includes a larger and accelerated MCO tax with an earlier start date (April 2023 through the end of 2026). This results in \$19.4 billion in total funding, which will offset the General Fund with the majority going to Medi-Cal investments. Medi-Cal investments include increasing reimbursements rates to 87.5% of Medicare rates for primary care, birthing care, and non-specialty mental health care. Other provider reimbursement will be decided and spent over a 4-to 5-year period instead of 8- to 10- year period originally proposed by the Administration.

Covered California Affordability Funding: The budget rejects the proposed sweep of individual mandate penalty funds to the General Fund. Funds will be used as intended to lower costs of Covered CA plans and provides \$82.5 million (\$165 million ongoing) from penalty funds to lower copays and deductibles for about 900,000 Californians beginning January 1, 2024. The budget includes a \$600 million loan from the Health Care Affordability Reserve Fund to the General Fund, to be repaid in 2025-26.

Medi-Cal Transitional Rent: Funding to Medi-Cal plans under CalAIM community supports to allow up to six months of rent or temporary housing to eligible individuals experiencing homelessness or at risk of homelessness.

**Medi-Cal Asset Test Clean-up Language:** The budget includes cleanup language from the 2022 Budget that expands Medi-Cal access for older adults and people with disabilities by eliminating the Medi-Cal asset test effective January 1, 2024.

Community Assistance, Recovery, and Empowerment (CARE) Act: The budget includes additional funding to support the implementation of the CARE Act, including funding for earlier implementation for Los Angeles County and to double the number of hours per participant for legal services from 20 hours to 40 hours.

#### **HOMELESSNESS**

The Budget invests \$3.5 billion in additional funding for homelessness programs, including \$1 billion for the Homeless Housing, Assistance and Prevention grant program, which funds housing, outreach at encampments, emergency shelters and more. While there were no cuts, these investments represent a small portion of what it would take to tackle the crisis. With an estimated 171,521 unhoused residents living on

the streets or in their cars, California is home to nearly one-third of the country's entire homeless population. Looking forward, we will continue to advocate for ongoing long-term investments to ensure that deeply affordable housing units do not continue to languish in the pipeline, unhoused Californians need not wait months or years to access an affordable and accessible housing option, and we stem the inflow of Californians into homelessness through protecting their rights and preserving their affordable housing options.

2023-24 Homelessness Investments include:

Behavioral Health Bridge Housing Program: \$1.5 billion over three years. Behavioral Health Continuum Infrastructure Program: \$2.2 billion over five years for the Behavioral Health Continuum Infrastructure Program, of which \$50 million in 2022-23 is for the Department of General Services, with short-term statutory exemption, to deploy an estimated 1,200 small homes in the City of Los Angeles, County of Sacramento, City of San Jose, and County of San Diego as rapidly as possible.

**CalAIM Transitional Rent:** \$175.3 million (\$40.8 million General Fund, \$114.9 million federal funds, and \$19.6 million Medi-Cal County Behavioral Health Fund) at full implementation to allow up to six months of rent or temporary housing to eligible individuals experiencing homelessness or at risk of homelessness.

**Encampment Resolution Funding Grants**: \$400 million in one-time General Fund for a third round of Encampment Resolution Funding grants.

#### **HOUSING**

The 2021 and 2022 Budget Acts invested a combined \$21.5 billion over multiple years to advance the greater availability of housing throughout California. The 2023 Budget largely maintains a portion of these commitments and includes a housing package of \$14.7 billion for 2023-24. Overall, the proposal includes \$500 million continued annual investment in the state Low-Income Housing Tax Credit program, \$100 million for the Multifamily Housing Program, and \$100 million for the Portfolio Reinvestment Program. These programs have a proven track-record of addressing housing affordability and homelessness across California.

2023-24 Housing Investments include:

**Multifamily Housing Program**: \$100 million in 2023-24 for the Multifamily Housing Program for a total of \$325 million in 2023-24.

Dream For All:\$500 million one-time General Fund to the California Housing Finance Agency for the Dream for All program, which provides shared-appreciation loans to help low- and moderate-income first-time homebuyers achieve homeownership. CalHome:\$350 million one-time General Fund (\$250 million in the 2022 Budget Act and \$100 million committed for 2023-24) for the Department of Housing and Community Development's CalHome program, to provide local agencies and nonprofit agencies with grants to assist low- and very-low-income first-time homebuyers with housing assistance, counseling and technical assistance. The Budget withdraws \$50 million one-time General Fund in 2023-24, leaving \$300 million for this program.

Foreclosure Intervention Housing Prevention Program: The 2021 Budget Act included \$500 million one-time General Fund for the Foreclosure Intervention Housing Prevention Program, which provides funds to various non-profit organizations to acquire foreclosed property and operate as affordable housing. The Budget defers \$330 million of the \$500 million one-time General Fund over four fiscal years—for a

revised allocation of: \$82.5 million in 2023-24, \$85 million in 2024-25, \$100 million in 2025-26, and \$62.5 million in 2026-27.

Downtown Rebound Program: The 2000 Budget Act included \$25 million one-time General Fund for the Department of Housing and Community Development to provide funding for adaptive reuse of commercial and industrial structures to residential housing. The Budget reverts \$17.5 million in unexpended funding that remained in this program after the Notice of Funding Availability.

One-time investments, especially at this limited scale, are not sufficient to meet our state's affordable housing and homelessness needs. While the final budget falls short of our requests to meet the housing and homelessness crisis at scale, we look forward to continuing our budget advocacy in the coming years to encourage the Governor and Legislative leadership to prioritize a comprehensive, long-term investment strategy that prioritizes significant, ongoing funding to solve homelessness and ensure that every Californian has a safe, stable home that they can afford. Ongoing investments can address the disproportionate harms of skyrocketing housing costs, housing instability, and homelessness on Black, Indigenous, and people of color, people living in poverty, and other marginalized communities.

#### PUBLIC BENEFITS AND ACCESS TO JUSTICE

**CalWORKs:** The budget includes a **3.6% increase** to CalWORKs grants to continue efforts for No Child in Deep Poverty and makes permanent the 10% grant increase that took effect last October so no longer subject to a cut in 2024. Additionally, the budget requires CalWORKs grant display to account for households where the Assistance Unit does not account for all the people in the family, which applies to 60% of CalWORKs households. Unfortunately, the budget does not include Legislature's proposal to implement the first phase of *Reimagine CalWORKs* despite UCSF's **new report** that shows economic shocks are a key driver of homelessness that can be mitigated by reforming sanction.

Food Assistance: The budget maximizes the new Summer EBT program, which will provide \$40 per month in summertime food benefits to approximately 4 million children beginning in Summer 2024, bringing about \$480 million in federally funded food benefits to California; initiates the CalFresh Minimum Nutrition Benefit Pilot Program, a \$15 million pilot program to raise monthly minimum food benefits to \$50 minimum from the current minimum of \$23; approves the expansion of the California Food Assistance Program for adults age 55 and older, regardless of immigration status, to begin in late 2025, instead of January 2027; and approves improvement to EBT card security to protect CalFresh and CalWORKs families from theft. SSI/SSP: The budget includes an 8.6% increase to SSI/SSP grants and Cash Assistance for Immigrants (CAPI) program. Effective January 2024, this allocation will provide recipients with an increase in grant levels to \$1,134 per month and \$1,928 per month for couples.

**Humanitarian support**: The budget approves \$150 million for the Rapid Response program, which funds sheltering and humanitarian support at the Southern border. **Safety Net Reserve:** The budget rejects the May Revision proposal to draw \$450 million from the safety net reserve.

#### Resources

CalFresh recipients are included on the list of eligible households for the Federal Communications Commission's (FCC's) "Affordable Connectivity Program" (ACP).

The Affordable Connectivity Program is an FCC benefit program that helps ensure that households can afford the broadband they need for work, school, healthcare and more. Eligible households can receive a discount of up to \$30 per month toward internet service (up to \$75 per month for households on qualifying Tribal lands), and a one-time discount of up to \$100 on a computer or tablet from participating providers.

More information can be found about eligibility, how clients can enroll, and other program details <u>HERE</u>. Please be sure to share this information with your subcontractors and any other applicable contacts within your network.

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**2023 KIDS COUNT DATA BOOK** - 2023 STATE TRENDS IN CHILD WELL-BEING The 34th edition of the Annie E. Casey Foundation's *KIDS COUNT® Data Book* describes how the country's lack of affordable and accessible child care negatively affects children, families and U.S. businesses.

This year's publication continues to present national and state data across four domains — economic well-being, education, health and family and community — and ranks states in overall child well-being. The report includes pre-pandemic figures as well as more recent statistics, and shares the latest information of its kind available.

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# Coalition for Economic Survival Tenants' Rights Clinic Every Saturday at 10 AM PT Via Zoom

- Individual, one-on-one counseling
- Registration required no later than 5 PM on Friday
- Serving renters in the entire Southern California area
- Accommodations for Spanish and Russian speakers provided
- Request a registration link via email at <a href="mailto:helpinglarenters@gmail.com">helpinglarenters@gmail.com</a>

#### SAVE THE DATE

**Weds July 19, 1:30 -3:30 PM** "Cultural Stigmas Hindering Our Health". Virtual Community Provider Forum, **recognizing Minority Mental Health Awareness Month.** 

Speakers from LA County Department of Mental Health and other agencies will be joining LADA's Bureau of Victim Services (BVS) Claims Supervisor Clint Molezion and Bureau of Communications Field Deputy Shari Farmer to discuss how cultural stigmas impact inequities in health outcomes for minority communities and why it's important to address these stigmas.

REGISTER IN ADVANCE AT: Cultural Stigmas Hindering Our Health

**July 20th, 2023, 12-1 PM** (right after our meeting!!) **Perinatal Cannabis:** Creating a Resilience Analysis, rooted in harm reduction and birth justice. Offered through Maternal Mental Health Now.

Please click on this **link** to register for the free webinar

Thurs July 27 7:30-9:30, \$10 "The True Cost" – documentary hosted by Fair Trade LA at The Valley Salt Cave 20929 Ventura Blvd. #12, Woodland Hills, 91364

GET YOUR TICKET

The True Cost offers an eye-opening look into the clothing we wear, the people who make them, and the fast fashion industry's impact on our world. Directed by Andrew Morgan and starring Livia Giuggioli, Vandana Shiva, and Stella McCartney, the movie shares the story of the Rana Plaza garment factory collapse in Bangladesh while raising the question, 'Why are we still allowing the people to be mistreated for cheap prices?'

Guests will have the unique experience of watching the documentary while enjoying the health and wellness benefits

**August 28-29, 2023 Black Birth Equity Summit** – Hybrid – virtual and in-person at The California Endowment

Join Black birth equity leaders and stakeholders from across California as they come together for actionable solutions and meaningful collaboration to support healthy and thriving Black families.

Learn more and register at CA Black Birth Equity Summit: 2023

## Job opportunities available!

Please click on the job title you are interested in to view the full job description and the application process. And provide a cover letter and current resume with your application that specifically outlines your employment history experience aneducational background for which you're applying.

MCHA is an Equal Opportunity Employer; women and people of color are strongly encouraged to apply.

- Finance Director
- Administrative Assistant Training and Education
- Parent Coach Bilingual English & Spanish
- Health Programs and Benefits Trainer
- IT Support Technician

### **Maternal and Child Health Access**

350 S. Bixel St., Suite 150 Los Angeles, CA 90017 213 749 4261 phone 213 745 1040 fax

## www.mchaccess.org info@mchaccess.org









