

REPORT TO THE  
BOARD OF SUPERVISORS  
ON HEALTH ACCESS  
AND  
THE UNINSURED

# REPORT TO THE BOARD OF SUPERVISORS ON HEALTH ACCESS & THE UNINSURED

## THE PROBLEM:

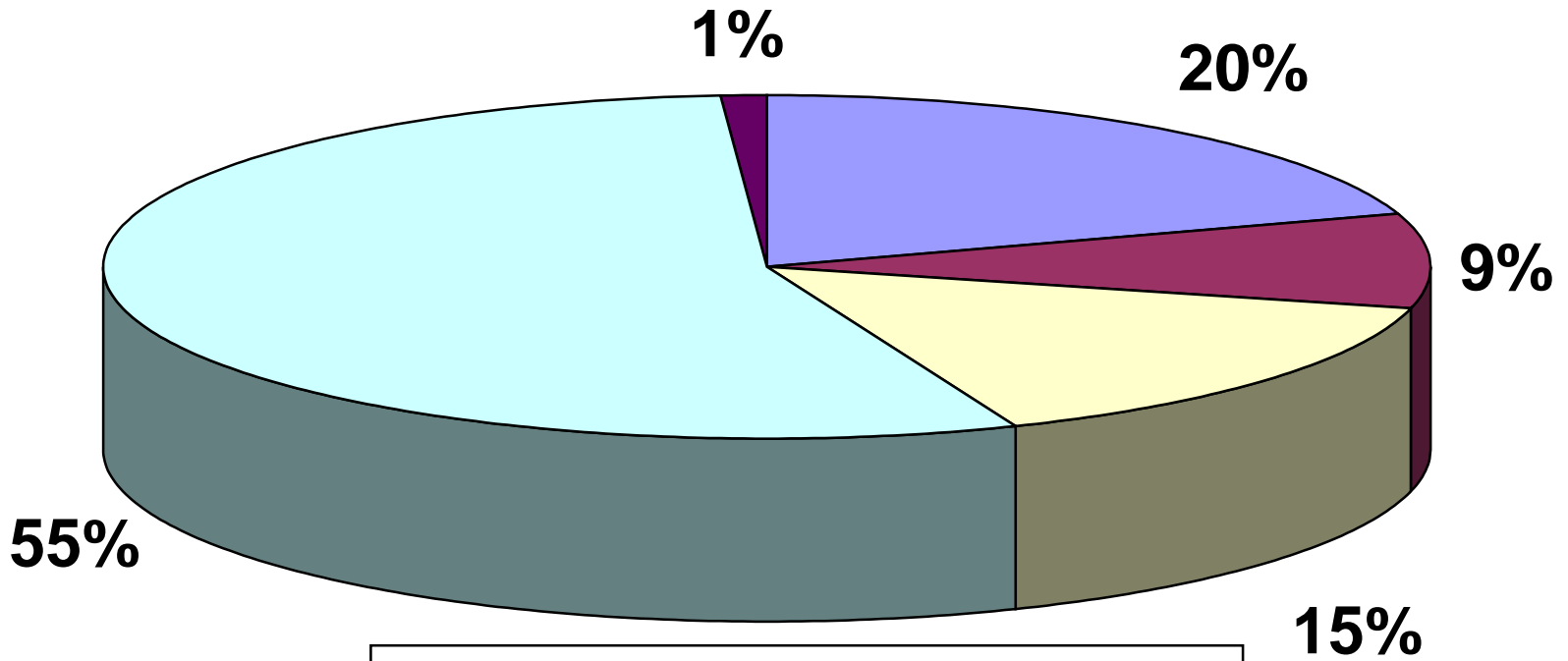
40 Thousand People Uninsured in SC County,  
Part of National Problem (7 million without  
coverage)






- Half of them working
- Many part-time, seasonal workers
- Specific businesses are more likely to have  
no  
Insurance or very expensive insurance  
(Agriculture, Service Industry, Hospitality  
Industry, temporary help workers)
- Small Employers more likely to not have  
affordable insurance

## Santa Cruz Profile:

20% Uninsured  
9% MediCal  
1% Healthy Families  
15% Medicare  
55% Employment Linked Insurance

# Santa Cruz Profile



-  Uninsured
-  MediCal
-  Medicare
-  Employment Linked Insurance
-  Healthy Families

### Local Danger Areas:

Number of Specialists Low in some specialties  
Emergency Room Financing & Coverage Strained  
Many industries with health coverage problems

### Trends:

- \*Government Sponsored Programs Increasing (MediCal, HF)
- \*Employer Linked Insurance Decreasing, even without recession
- \*Shrinking State funding for indigent care through Prop 99
- \*Increasing Health Challenges such as Hepatitis C without funding

### Local Community Efforts:

- Health Care Outreach Coalition
- Access Agreements with Dominican, Sutter, and Watsonville Hospitals
- Quality Community Clinics: Salud Para La Gente, Planned Parenthood, Women's Health, County Clinics
- Health Outreach to the homeless through federal grant
- Children & Families Commission goals on health and dental benefits
- Strong Advocacy in Sacramento & Washington for expanded benefits

# Next Steps to Health Insurance Coverage In Santa Cruz County

Direct HSA staff to forward this report to Federal and State elected officials and discuss the recommendations with them that require Federal and State action to improve access to health coverage-

## **Federal Next Steps List:**

1. Expand Medicaid Options by increasing income limits;
2. Unify Federal Health Insurance programs to families and children to establish seamless coverage (Medicaid, Healthy Families, Child Health & Disability Program (CHDP) and others; Support innovative local pilots to try this new consolidated model;
3. Provide tax incentives and sliding scale funding for small employers, families, and individuals do be able to afford health insurance coverage;
4. Support Coalitions which are trying improve health access such as the proposal made by the Health Insurance Association of America (HIAA), Families USA, and the American Hospital Association.
5. Make a clear separation between health insurance and “welfare to work” programs to reduce stigma.
6. Approve Federal waivers that provide innovative flexible use of existing federal dollars to enhance access and coverage.

## **State Next Steps List:**

1. Continue efforts to simplify application and eligibility processes for MediCal and Healthy Families programs; and do advertising and brochures for small employers;
2. Take advantage of new federal options for expanded services and eligibility in MediCal which California could utilize to reduce numbers of uninsured;
3. Increase MediCal period of continuous eligibility and use automatic enrollment for presumptive eligibility such as for persons who also qualify for food stamps and school meals;
4. Replace complex inequitable eligibility requirements for State programs (including those linked to the Federal government) with a simple income-based eligibility standard for all publicly-funded health insurance programs.

5. Working with Federal and County governments and the business community, develop a program for uninsured employees and their dependents with subsidies covering the additional costs of insurance linked to a sliding scale.
6. Encourage employees to share information on Healthy Families with low income employers if they do not provide coverage for dependents.
7. Request waivers for flexible use of federal dollars which might facilitate more access to benefits.
8. Optimize opportunities for use of State Prop 10 and Tobacco funding to provide and improve insurance opportunities.
9. Establish State Commission on Health Care Access that brings all stakeholders to the table to work on the problem of the uninsured.
10. Hold non-profit health entities accountable to meeting their charitable missions or risk losing their non-profit status.

**COUNTY NEXT STEPS TO IMPROVE HEALTH CARE COVERAGE:**

1. Develop a funding plan to continue efforts of the Santa Cruz Health Care Outreach Coalition after the Packard and Federal funds expire;
2. Build on the success of the Health Care Outreach Coalition to bring small businesses and insurance brokers to the table to help explore improvement in affordable insurance options for individuals and families who are working. This could include sharing information on Health Families and MediCal and the small employer purchasing pool, Pacific Health Advantage.
3. Continue monitoring County contracts for charity care and access with local hospitals;
4. Develop innovative consolidated models of existing publicly funded health insurance programs that improve flexibility and affordability. Develop proposals for consideration by State and Federal Government as well as Foundations.
5. Explore with the Alliance Board insurance options with the Mid-Coast Alliance for Health for local uninsured working groups such as childcare workers, service industry workers, etc.
6. Pursue grants which would allow for increase benefits advocacy, community outreach and enrollment (such as Prop 10 funds for 0-5 children and their parents).

7. Advocate for stable, adequate funding for existing programs for the uninsured. The CHIP program and MISP program, which the State uses to fund local indigent services, are the most under funded and unstable programs which State government uses to fund local indigent services.

Monitor innovative activities in other counties to address health care coverage and work with CSAC and CHEAC to share and promote these strategies with other counties. Work with State and Federal officials where appropriate to leverage funds to support local innovations.



# County of Santa Cruz

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## HEALTH SERVICES AGENCY

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### AGENCY ADMINISTRATIVE DIVISION

#### News Release

Date: 2/5/01

Contact: Bob Varty or  
Rama Khalsa

For Release: Immediately

Phone: 454-4000

#### HEALTH DEPARTMENT REPORTS ON HEALTH CARE ACCESS & UNINSURED IN SANTA CRUZ COUNTY

The Santa Cruz County Board of Supervisors will hear a presentation from the County Health Department on how local citizens' fare in their efforts to access health care and the reasons why many individuals and families have no health insurance. The report on this subject can be found at [www.santacruzhealth.org](http://www.santacruzhealth.org) and includes information on health care trends from 1986 to the present.

Currently the County has approximately 40 thousand individuals without health coverage. The reasons for this lack of insurance include being unemployed, working for small businesses without affordable coverage, doing temporary and seasonal work, and working in industries, which often do not offer affordable health care to their employees and their dependents. Approximately half of these individuals are part of working families.

Federal, State, and local insurance programs to provide a safety net for low-income children, adults, seniors, and disabled individuals are reviewed and analyzed. These programs include

Medicare, MediCal, Mediacruz and Healthy Families Insurance. There are also a number of specialized programs targeting specific diseases and populations. These programs are overly complex with different eligibility criteria, scope of benefits, and rules. The application processes can be very confusing. Recommendations are made to re-structure and consolidate these programs and expand eligibility to more people over time.

Trends in employment-linked insurance are also discussed. The mobile workforce of today is often without coverage particularly if they are doing contract or temporary work. Employers are also burdened with escalating costs of health care which has again begun to increase far beyond inflation. Managed care programs have also created a number of financing problems in hospital emergency rooms, with specialists, and created animosity with many consumers.

The Board will have presented a number of recommendations to expand coverage and insure access to care. These include local initiatives and partnerships with Federal and State officials as well as local businesses.