

Los Angeles Regional Network Meeting

Creating a Latino Health Agenda

Monday, April 7, 2008 12:15pm to 3:00pm

Consejo de Federaciones Mexicanos en Norteamérica (COFEM)

125 Paseo de la Plaza, Los Angeles, CA 90012

Minutes

12:15pm

Registration and lunch

12:45pm

Welcome and Opening Remarks

Vanessa Cajina, Regional Networks Coordinator, Latino Coalition for a Healthy California

- Mission Statement of the Regional Networks, and introduction of LCHC and partner organizations (*see LARN presentation*)

Arturo Carmona, COFEM

- COFEM would like to extend our gratitude on behalf of the Los Angeles Regional Network, to the Mexican Cultural Institute for allowing us to host this meeting in its Art Gallery. Currently, all of the artwork presented in this gallery is by Artist Juan Solis.
- We are very happy to continue our two-year partnership with the LCHC, and we are committed to working together in facing the issues that deeply affect the immigrant community.

12:47pm

Our Responsibility for Children's Health in California

Stefanie Gluckman, The Children's Partnership

- The Children's Partnership is a member of the 100% Campaign (a collaborative effort of Children Now, Children's Defense Fund and The Children's Partnership), and works to ensure that all of California's children gain access to affordable health insurance.)
- The title of this presentation on the agenda states, "Our responsibility for children's health." The emphasis should be on "*our*," because it is everyone's responsibility to get children covered; this is essentially a call to action.
- The current budget crisis leads us to seek a more equitable solution to resolving our state's deficit. We must seek revenue- it's not just about making cuts.
 - Cutting Medi-Cal/Healthy Families not only depletes important and necessary services, but it also sacrifices federal funding. The federal government matches every state in funding for these programs. So if California cuts \$1, we will lose an additional \$1 from the feds, and the program essentially loses \$2.
 - 350,000 children could lose coverage. There will be a 15% increase in uninsured children in California, due to the budget cuts.

- Quarterly Status Reports (QSRs) are another important component of the budget cuts. QSRs would force families to renew their MediCal status on a quarterly basis (every 3 months), as opposed to the current system where they only renew once a year.
 - The Legislators who back QSRs cite the idea that people might change income/eligibility status throughout the course of the year, and it could save the State money if we disenroll them as soon as their status changes.
 - However, the QSR imposes a huge administrative burden on individuals, and thousands of MediCal patients are expected to drop-off, simply because they will be unable to keep up with the paperwork. This means thousands of kids who don't deserve to will lose coverage.
- The budget also proposes cutting “optional benefits” from coverage plans—meaning that adult Medi-Cal beneficiaries will no longer have access to dental, vision, chiropractic, and many more pertinent services.
- While the overall budget is harmful, there are a few good points:
 - SB 437, which will expand coverage to 94,000 kids by creating a pilot program to implement a self-certification of income for Medi-Cal and Healthy Families applicants and streamline the enrollment and recertification processes for the programs.
- What can we do?
 - District visits: Fridays in April and May will be great opportunities, as legislators will not have committee sessions on those days.
 - Plan specific children's coverage events; invite legislators, and families affected by cuts;
 - Attend an existing Town Hall, and follow up on Children's Coverage;
 - Submit Opinion Editorials to local newspapers/ publications—sample letters are available on TCP's website:
<http://www.childrenspartnership.org/>
- Also on the website, TCP has available numbers, regarding county-by-county breakdowns on the effects of this budget. All are welcome to use these figures in presentations—to strengthen our effort in children's coverage.
- Yolanda Vera brings up that LA Health Action is currently working on a county-level web-based health data resource. This is a tool that will visually display how counties are affected by budget cuts and QSRs (for example, the number of individuals in Los Angeles County will be enough to fill Dodger Stadium). See website: <http://lahealthaction.org>
- Vanessa Cajina: the important point about healthcare reform this year will be our action. We will need to make phone calls and send in letters to legislators. This does not just abide by party lines, either. Last year the only Democrat who actually voted “yes” on the health reform package was Senator Mark Ridley-Thomas. All other legislators will need encouragement to do the right thing and serve their constituents.
- Mari Lopez: there is an existing plan to target problem GOP districts. Please contact the California Partnership or Stefanie with the Children's Partnership and let us help you!
- SCHIP Update:

- President Bush has already vetoed the bills to reauthorize the State Children’s Health Insurance Program at a higher level, necessary to keep all eligible kids covered. Bush did, however, extend the program at current-level funding through March 2009.
- The original design of SCHIP allowed for flexibility (i.e. intending to revisit and adjust funding depending on increases/ decreases in the cost of living). Currently, the cost of living has gone up, and the lack of additional funding is attacking our kids.
- Our support and action are especially needed now, since Bush has proposed *cutting* funding for SCHIP, and only allowing participants that are below 200% federal poverty level.
- For more information, please contact the Children’s Partnership, or other Children’s Coalitions

1:16 pm

Healthcare in el estado dorado: 2007 in review, 2008 in focus

Vanessa Cajina, Latino Coalition for a Healthy California

- Before moving forward, we should look back on 2007, and see where we’ve come from.
 - 2007 was dubbed as “the year of healthcare reform”;
 - AB 8, the final legislative healthcare reform bill, passed out of the legislature, but was vetoed by Governor in September;
 - Governor called special session to continue working on the issue;
 - AB X 1 1, the ultimate proposal adopted by the Assembly was held in the Senate;
 - Legislators and advocates are looking at staged reforms in response to HCR’s failure;
 - Considering the state’s budget deficit, it should be noted that any bills with fiscal appropriations have a slim chance of going anywhere.
- 2008 Priority Legislation: Health Disparities
 - AB 2735 (Hernandez), LCHC is sponsoring this bill—it creates a task force to develop a master plan for increasing and diversifying California’s healthcare workforce; strengthens data collection and reporting
 - Status: will be heard on April 17 in *Labor and Employment committee – Send a letter of support!*
 - AB 3027 (de León), LCHC supports—would help inform Limited English Proficient patients of where they could find interpretive services across California’s health care system
 - Status: *Will be heard April 15 in Assembly Health – Send a letter of support!*
- 2008 Priority Legislation: Access to Healthcare
 - SB 564 (Ridley-Thomas), LCHC co-sponsors—would provide the infrastructure needed to expand the number of school health centers and increase access to healthcare services
 - Status: 2 year bill; awaiting next placement

- SB 32 (Steinberg), LCHC supports—creates health coverage program for ALL California children under 300%fpl and ease enrollment process for Healthy Families/Medi-Cal
 - Status: 2 year bill, held in Legislature, awaiting next placement
- 2008 Priority Legislation: Community Health
 - SB 1420 (Padilla), LCHC supports — would require specified food facilities (chain restaurants) to provide nutrition information on their menus
 - Status: passed through Senate health, now to Appropriations
 - AB 2572 (Parra), LCHC opposes — would offer restaurants *the option* of disseminating nutritional information through a number of different venues. This bill is sponsored by the California Restaurants Association
 - Status: *Will be heard April 8 in Assembly Health – Send a letter of opposition!*
 - AB 2474 (Galgiani) LCHC supports — would require DPH to establish a program that implements recommendations for improvement, including obesity prevention programs/ tracking.
 - Status: *Passed Assembly Health, now to Appropriations*
 - AB 48 (Alquist) LCHC supports — expands and supports healthy retail foods in underserved communities, as well as technical support to existing food retailers to improve food choices
 - Status: 2 year bill; held in Senate Appropriations Committee
 - AB 1472 (Leno), LCHC supports — establishes the California Healthy Places Act, which would work together to improve environmental health and provide assistance and funding to local governments.
 - Status: 2 year bill; held in Senate Appropriations Committee

1:29pm

Increasing the Diversity of the Los Angeles Healthcare Workforce

Leslie Flores-Valmonte, Alliance for a Better Community (ABC)

- ABC is known for many issue areas, including Education Reform—something that will impact diversity both in our schools and (hopefully) in our Health Care Workforce
- ABC is working to create a pipeline for students in order to create better workforce opportunities. This program lets children know that their options in the healthcare industry are not limited to doctor or nurse. The pipeline would allow individuals to see the environment and get involved at a young age.
- Multiple Pathways
 - A project that will get individuals involved in professional development. Undertaking this project will require preparing both teachers and students for a new experience: if you wish to teach Algebra to a Multiple Pathways student, you must create a new curriculum that appeals to the student.
 - Public Policy and Advocacy for Multiple Pathways revolve around inequities; ABC fights to obtain better classes and opportunities for underserved schools throughout Los Angeles.

- For example, there was one student who graduated from a LAUSD High School as valedictorian. Upon applying to universities, she realized that she had not completed the mandatory curriculum necessary to get into a UC *or* a CSU!
- In order to understand community advocacy, students need civic engagement and greater opportunities:
 - Soon, movements throughout the community will connect with Community College degrees, coupling education and internships/work experience (i.e. the *Promotora de Salud* Movement)
 - Giving students the ability to match their degrees with careers, rather than having students graduate, without knowing what kind of job to pursue or where to get started.
- As advocates, we need to involve ourselves in public policy that pertains to *younger students*; we can't just stick with High School public policy. Studies are showing that kids begin slipping from the norm as young as 6 years old.
- Liz Garcia (participant) notes that the Charles Drew University Pipeline is working well for Los Angeles area students; this is a possible model of what works.
- Jose Gonzalez (participant) asks why we don't focus more on getting the parents involved. Every organization attending today's meeting should consider adopting an elementary school and get involved. *Prepare* kids and parents for the idea of doing more with their lives than just graduating and getting a job. Prepare them for the idea of becoming a doctor or lawyer, not an "American Idol."
 - Leslie's response: ABC hosts Parent Summits which are a very worthwhile investment in today's children. Although, it is difficult to get parents involved, or even get them in the same room. It is very important that parents raise their expectations and awareness—that they understand what their children are capable of, given the right motivation and proper tools.

1:50pm

Preserving the Local Safety Net: Special Update on Martin Luther King Hospital

José Gonzalez, Latino Care Management

- Los Angeles County agreed to establish a small Task Force (currently working along with a consultant) to discuss re-opening Martin Luther King Hospital.
- The Task Force will release a report, identifying key details on how the Hospital can once again open its doors
 - For example, the report will mention who the Operator of the hospital will be. Right now, Pacific Hospital in Long Beach appears to be one of the most enthusiastic supporters of the re-opening. Daughters of Charity and the University of California have also approached the Task Force to support re-opening MLK.
 - Pacific Hospital is a small community-based organization- not a high-profit entity. They are well funded and see the MLK project as their commitment to help the community.
- The re-opening will be difficult: the facilities were poorly maintained by the county; employees were lost; there are many outstanding state and federal issues that need

to be addressed (i.e. the same state/ federal issues that helped shut the hospital down.)

- The good news is that we are convinced that the hospital will re-open. Behind this cause is a very wealthy and successful doctor, who sees this as a philanthropic endeavor, and who is committed to seeing MLK prosper. There are also many others, including the Task Force who support this cause.
- The bad news is that it will take time to reopen. If we want to do this the right way, resolve all of the previous issues and prevent future closures, it will take time.
- If anyone is interested in participating in the MLK re-opening dialogue, please contact me.
- In regards to other County issues, there was a dramatic initiative proposed three weeks ago, to close eleven community clinics! The Board of Supervisors voted “no,” but the proposal is still out there.
- Advocates and community leaders need to prepare for how they will address these issues, along with budget cuts.

2:09pm

Descansito

2:19pm

Food Security for Latinos in LA: Special update from the USDA Food Stamp Outreach Program

Dennis Stewart, Regional Director of the Food Stamp Program, USDA

Joe Torres, Director of Civil Rights, USDA

- Vanessa Cajina introduces Joe and Dennis as our new coalition members who will help us capture lost Food Stamp funding.
- Dennis begins that Food Insecurity is a major issue. There are long term implications related to poor nutrition and not knowing where your next meal is coming from.
- We (Dennis and Joe) represent the Food and Nutrition Service (which accounts for half of the United States Department of Agriculture budget). It is a real tragedy that communities do not fully take advantage of federally funded entitlement programs. There is no limit to these federal funds; if an individual is eligible for Food Stamps or school lunch programs, they are *entitled* to the benefit
- Missed opportunity: California has one of the worst enrollment practices in the nation. *Every month*, California loses \$20 million of funding because eligible households are not enrolled in federal programs.
- There are 1 million Latino households in California not using Food Stamps where they should. This represents \$35 million/ month being lost by the Latino Community!
- We need community organizations to help the federal government enroll eligible individuals. The USDA cannot reach these individuals without your active involvement
- Undocumented individuals are not eligible for the Food Stamp Program, but many immigrants are.

- California only has a participation rate of 49% among eligible households; whereas other states have much higher rates. Why does it work in other states, but not in California? Community-based organizations are the key. Oregon is a special case, because the Governor pledged that no one in his state would suffer from hunger; food security was his priority.
- Joe Torres steps in to explain that the difference between food security and food insecurity is *hunger*.
- The hunger crisis taking place in the Latino Community is not something that has been widely studied. The National Council of La Raza (NCLR) published a study in 2006, estimating 4 million Latinos going hungry—this number has likely risen over the past few years.
- Latinos especially have a history of not enrolling and not being served by programs—when they should
- The USDA needs your help to develop strategies that will work for your community. We want to make today the beginning of a long-term relationship addressing this issue
- Food Stamps vs. the School Lunch Program: is one working better than the other? Yes, there is high penetration in school lunch programs (although the breakfast program is not as popular). The bottom line is that lunch programs are more easily accessible. However, studies have shown that skipping breakfast as a child leads to obesity as an adult. Kids who regularly miss breakfast will develop poor eating habits that are difficult to reverse throughout their lives.
- Today, we need your help in expanding outreach and enrollment in the Food Stamp program. Not having Food Stamps when you need them leads to staggering economic effects and staggering nutrition consumption
- Along with Food Stamp enrollment, USDA will send nutrition information to educate consumers and push them toward healthy food choices.
- *The best way to for the public to understand what is going on is to hear it from Community-based organizations.* The public needs to hear about Food Stamps from people they *trust*.

2:40pm

California's Budget Crisis

Vanessa Cajina, Latino Coalition for a Healthy California

- Our Budget is in trouble
 - California's budget deficit is structural; many changes need to be made. The Governor had to call an emergency session on the budget to make cuts to the 07-08 budget—leading to emergency cuts in Health and Human Services
 - Rates for Medi-Cal providers were cut 10%... meaning that providers will have to turn away Medi-Cal patients, because it will not be cost effective to serve them.
 - Cash payments to counties were delayed, cutting \$165 million to Medi-Cal Fee for Service
- Some proposed cuts for 08-09:
 - Cutting optional benefits for adult Medi-Cal beneficiaries, such as dental, optometry, and podiatry

- 5% rate reductions to Healthy Families plan
- Increasing Healthy Families share of cost
- \$28.3 million decrease to Dept. of Public Health
- Major decreases to Cal WORKS through a variety of cuts and sanctions
- Please give us your stories; we want to hear how these budget cuts affect you (at home and at work). Legislators need to hear how their decisions will specifically change your life.
- Currently, legislators are going through Budget Hearings to discuss. May 14th marks the day of the May Revise, when taxes come in and the legislators discover exactly how much money they have to give/cut. This is when we will see the true battles over the Budget begin.
- This Budget is historic- it affects all income levels, as well as our healthcare safety net.
- Although the Senate Budget Committee convened today, QSRs (Quarterly Status Reports) were not voted on. Please send in your letters to the Committee while you still have time!
- What can you do?
 - Power of the Pen: sign on to a letter to tell legislators how you feel about this budget!
 - Raise your voice: call your Senator or Assemblymember
 - Share your stories with other advocates—let us know how this budget hurts your community.

¡Digame! Organizing for Budget Equity

Mari Lopez, The California Partnership

- The Governor’s Budget proposal affects *everyone*. The fact that he proposed a 10% cut across the board makes it easy for more people to want to organize and fight cuts in the budget. This has facilitated the recent formation of a Statewide Budget Coalition
 - Broad-based budget coalitions are a good thing, because we all work together. We should never be played against one another (i.e. one shouldn’t say, “I represent Health Care, and since I don’t want cuts to health, you should cut education or something else instead.”) We need to work together and let Legislators know that no cuts are acceptable.
- Rather than focus on an “all cuts” budget, we need to close tax revenue loopholes. Tax credits are being given to corporations that are not paying their fair share. Right now, California is losing \$17 billion in tax loopholes!
- This Coalition is long-term, since we fight the budget cuts *every year*
- It is important for each of us to organize locally and pressure local electeds. California is one of only three states that require a 2/3 vote... so every vote counts.
- If you are interested in participating, all of the healthcare, hunger, and education coalitions will have their lobby/advocacy days throughout April and May—stay tuned. Join local coalitions and get involved!

Mari and Vanessa then began to ask individuals in attendance what their specific perspective was on the budget and how their lives are affected by cuts.

We heard from an individual who works with seniors, saying that the budget cuts have left many elderly citizens without coverage, because their doctors will no longer be able to accept Medi-Cal.

Another participant mentioned how pharmacists face a 10% cut in sales, because costs will prevent the production of goods.

Another participant mentioned that cuts to Health and Human Services leave community clinics vulnerable to closure; we could lose the very clinics that serve our underserved communities.

- Another sad product of the budget cuts is the disproportionate burden it places on children. Our kids get hit multiple times: cuts to parks and recreation, education, and Healthy Families → that does not just represent a 10% cut across the board, but a 30% cut to our kids.

3:17pm
Adjourn