

Date: October 30, 2020
To: Napa County Legislative Subcommittee
From: Michael Tou, Executive Director, Government & Public Affairs
 Providence St. Joseph Health
Re: **Recommendations for Napa County’s 2021 Policy Platform**

On behalf of Providence and Queen of the Valley Medical Center, I would like to thank the Napa County Legislative Subcommittee for the opportunity to share our recommendations for the 2021 Napa County Policy Platform.

We have divided our recommendations into three sections: General Policy Platform, Federal Policy Platform and State Policy Platform. The General Policy Platform recommendations reflect the four priority areas identified by stakeholders in our Community Health Needs Assessment (CHNA) for Napa County. These assessments are conducted every three years by Queen of the Valley Medical Center to identify community needs, develop community health investment strategies, and form partnerships to address key concerns.

If you have any questions about our recommendations, please do not hesitate to contact me at michael.tou@providence.org or (818) 512-4837. Thank you for your consideration.

General Policy Platform
<p>Issue: Health Equity</p> <ul style="list-style-type: none"> Health inequities and systemic racism are preventing Black, Brown, Indigenous, and People of Color (BBIPOC) communities, particularly the Latino/a community, from accessing opportunities and living their healthiest lives. Covid-19 has disproportionately impacted the Latino/a population, highlighting the health inequities they experience. <p>Actions:</p> <ul style="list-style-type: none"> <i>Understand barriers to accessing health and social services.</i> <i>Invest in strategies to address and reduce barriers. Leverage resources through collaboration and partnerships.</i> <i>Advocate to protect at-risk populations and implement programs targeted at reducing inequities.</i> <i>Educate and increase awareness related to health inequities, including racism and discrimination.</i>
<p>Issue: Homelessness and Housing Instability</p> <ul style="list-style-type: none"> A lack of affordable housing leads to over-crowding and poor living conditions. Housing is foundational to all other needs; once people are housed securely, they can address other needs related to their health and wellbeing. Two groups are of particular concern: the Latino/a community and older adults. <p>Actions:</p> <ul style="list-style-type: none"> <i>Invest in strategies to address and reduce barriers to safe, affordable housing.</i> <i>Leverage resources through collaboration and partnerships to increase housing stock and supportive services for those at risk of or experiencing homelessness.</i> <i>Advocate to protect at-risk populations.</i>

- *Educate and increase awareness related to the health impacts in the absence of safe and affordable housing*

Issue: Expanding mental health and substance use services

- Behavioral Health has been an identified priority health need for many years. The Covid-19 pandemic and trauma related to local fires has only intensified this mental health crisis. Populations of concern include school-aged children, older adults, Latino/as, and undocumented individuals.

Actions:

- *Invest to increase capacity to address mild-moderate, bilingual/bicultural mental health and substance use services.*
- *Leverage resources through collaboration and partnerships.*
- *Advocate for more prevention and early intervention programs.*

Issue: Improving access to health services

- Limited specialty care, transportation services, and bilingual/bicultural providers of all services have prevented many individuals from receiving needed and timely health care. Specific populations of concern are older adults, those who are undocumented, the un- or uninsured (including loss of insurance during the Covid-19 pandemic) and Latino/a individuals and families. The expansion of telehealth has created further barriers for those without access to technology, internet, and/or privacy at home.

Actions:

- *Invest in strategies to address and reduce barriers to care. Leverage resources through collaboration and partnerships*
- *Advocate to protect at-risk populations.*

Federal Policy Platform

Issue: Affordable Health Care Access and Coverage

- While Napa County ranks as one of the top California counties for quality of overall health, the uninsured and underserved populations are in need of access to care.
- According to U.S. Census data (2019), 8 percent of Napa County residents under the age of 65 lack health insurance coverage.
- There are over 32,000 Napa County residents deemed qualified for Medi-Cal (June 2020).

Actions:

1. *Preserve gains in health insurance coverage, especially for those who depend on Medicaid and Medicare.*
2. *Support expansion of affordable commercial coverage and stabilization of state health insurance markets.*
3. *Oppose efforts to decrease provider reimbursements.*
4. *Increase pharmaceutical affordability and protect the 340B drug pricing program.*

Issue: Mental Health

- Every day in our communities there is a need for more and better coordinated mental health care and services.
- More than 2 million children, adults and seniors in California are affected by a potentially disabling mental illness every year.

Actions:

1. *Increase appropriate access to mental health and substance use care with focused, community-based solutions.*
2. *Response to the growing opioid crisis and reduce suffering from addiction.*

Issue: Protect and Expand Telehealth Coverage

- In response to COVID-19, significant telehealth policy changes were temporarily enacted on the federal and state level.
- Although California had a policy landscape more favorable to telehealth than many other states did, California was not completely without barriers at the start of COVID-19, particularly in how Federally Qualified Health Centers (FQHCs) and Rural Health Clinics (RHCs) were able to utilize telehealth.
- Once the public health emergency ends, policy will revert to the pre-COVID-19 state that could leave many patients who relied on receiving services via telehealth going without, and providers and clinics who have invested in telehealth with lost investment.

Actions:

1. *Support policies that work to “bridge the digital divide” and close gaps in access to telehealth services in Napa County and for all Californians.*

Issue: Climate Action

- For several years, California has been devastated by thousands of wildfires, claiming dozens of lives, destroying or damaging tens of thousands of homes and millions of acres of land, and costing billions of dollars. Climate change has played a significant role in these devastating wildfires across the state, including some of the largest wildfires in the North Bay.
- Carbon pollution from fossil fuel combustion is the leading cause of climate change. Toxic air pollutants from fossil fuel pollution have been shown to cause respiratory illnesses, neurological damage, heart disease, stroke, cancer, and premature death. In the United States, air pollution causes about 200,000 early deaths each year.

Actions:

1. *Reduce carbon and associated pollutants from fossil fuel combustion to mitigate and prevent climate impacts on human health and the environment.*
2. *Increase access to affordable, clean energy and accelerate investments in energy efficiency and renewable energy.*
3. *Support development of climate-smart buildings, facilities and infrastructure, and build community resilience focusing on food, transportation, waste, and water issues.*

State Policy Platform

Issue: California Advancing and Innovating Medi-Cal (CalAIM)

- More than 13 million children and adults, or one in three Californians, depend on Medi-Cal for regular health care. It serves as a vital safety net that has been hard pressed during the COVID-19 pandemic.
- CalAIM is a multi-year initiative by the California Department of Health Care Services (DHCS) to implement broad delivery system, program and payment reform across the Medi-Cal program. The major components of CalAIM attempt to build upon the outcomes of various pilots from the previous federal waivers in order to improve the quality of life for Medi-Cal members as well as long-term cost savings/avoidance for the state.
- CalAIM has three primary goals:

- Identify and manage member risk and need through whole person care approaches and addressing social determinants of health;
- Move Medi-Cal to a more consistent and seamless system by reducing complexity and increasing flexibility; and
- Improve quality outcomes, reduce health disparities, and drive delivery system transformation through value-based initiatives, modernization of systems, and payment reform.
- DHCS postponed CalAIM implementation timelines in order to allow the department to address COVID-19. DHCS plans to seek federal approval of the CalAIM proposals in 2021 and is seeking an extension of the existing 1115 waiver through 2021.

Actions:

1. *Support a federal waiver that identifies and manages risk and need through whole person care approaches and addresses social determinants of health.*
2. *Promote significant improvements to case management and care coordination at all levels of care and role clarity to ensure accountability for access to and provision of care and services to Medi-Cal members.*

Issue: Emergency Preparedness

- California’s hospitals must comply with the nation’s strictest hospital building requirements – ensuring that every hospital building in the state remains standing after an earthquake.
- Hospitals have invested billions of dollars and decades of work to upgrade or replace facilities to ensure that patients, employees and visitors will be safe when the next earthquake strikes.
- As a result, by 2022 all hospital buildings in California will be able to withstand a major earthquake. This means within two years, all hospitals will have achieved the highest level of safety possible for patients, employees and visitors alike.
- Current law – written 25 years ago – requires hospital buildings that provide acute-care patient services in California to “remain operational” after a major earthquake by January 1, 2030.
- This means the very law intended to ensure people have access to care after an earthquake, may, in fact, force some hospitals to shutter even before the next earthquake occurs.
- The RAND Corporation completed a comprehensive look at California’s hospital seismic mandates and confirms the enormous cost of meeting the seismic requirement – estimated to be up to \$143 billion if every hospital building has to be rebuilt.
- More than half of all California’s hospitals will face significant financial hardship if the current outdated seismic safety requirements are not updated. Today, nearly 40 percent of hospitals operate in the red. That number could swell to more than 50 percent if the 2030 seismic standards are not modified, leaving many communities across the state with reduced access to care.

Actions:

1. *Support legislation to modernize the state’s seismic standards so hospitals can keep their doors open to care for all Californians in all ways, whatever disaster may come.*

Issue: Protect and Expand Telehealth Coverage

- In response to COVID-19, significant telehealth policy changes were temporarily enacted on the federal and state level.
- Although California had a policy landscape more favorable to telehealth than many other states did, California was not completely without barriers at the start of COVID-19, particularly in how Federally Qualified Health Centers (FQHCs) and Rural Health Clinics (RHCs) were able to utilize telehealth.

- Once the public health emergency ends, policy will revert to the pre-COVID-19 state that could leave many patients who relied on receiving services via telehealth going without, and providers and clinics who have invested in telehealth with lost investment.

Actions:

Support policies that work to “bridge the digital divide” and close gaps in access to telehealth services in Napa County and for all Californians.

Issue: Housing

- Safe, secure housing is essential to health and well-being. Community assessments keep showing that homelessness and unsafe or unstable housing are key needs in many California communities.
- Affordable housing has been reported by nonprofits nationally as the top community need for the since 2012 (The Nonprofit Finance Fund State of the Sector Survey). The effects of a difficult housing market have also been felt in Napa County, and exacerbated over the last year as a result of the Napa Complex Fires in October 2017.
- Many Latino immigrants experience housing hardships in the form of crowding and high rent or ownership burdens; others commute from neighboring counties where housing is less expensive. Placed based services are becoming more complicated to provide, given that individuals and families increasingly live, work and send their kids to schools in different communities.
- Additionally, homelessness is perceived by local leaders to be a growing problem that is not currently well addressed.
- The vacancy rate for tenant housing has dropped to 1 percent, according to the results of a city survey of housing complexes last month.

Actions:

1. *Support legislation to streamline the development of housing that is affordable.*
2. *Support legislation that brings resources to the community to provide housing that is affordable.*

Issue: Quality and Affordable Child Care

- Only 21% of children 0-12 years old with parents in the labor force have access to a licensed childcare slot.
- The annual cost of full-time infant care in a center is \$14,839 (based on the 2016 Market Rate Survey from the California Resources and Referral Network). The cost to have an infant at a licensed family child care home is \$9,733. For many working families, childcare is unattainable.

Actions:

1. *Support bills that further the accessibility of childcare and simplify the administrative requirements of the corresponding supporting systems.*
2. *Promote the economic benefits of high-quality early care and education programs.*
3. *Support the accessibility of high-quality early care and education program for all young children.*

Issue: Food insecurity

- Approximately one in 10 people in Napa County struggles with hunger; among children, the prevalence of food insecurity is even higher and affects one in five children.
- Emergency food service providers provide cash aid and free and low-cost food to increase access; however, use of these services is low in Napa County.
- The number of people living below 185% of the Federal Poverty Level in Napa County who are in need of help is over 35,000.

- There is a direct relationship between the rising cost of rent and growing rates of food insecurity, especially among families with children.
- Access and ability to utilize healthy, nutritious food is a social determinant of health. Food insecurity is linked to developmental, behavioral, and academic delays in children, as well as the development of chronic diseases in adults.

Actions:

1. *Support access to healthy food for all residents as an essential part of future policy and planning activities.*
2. *Establish policies to promote local food procurement, evidence-based nutrition standards for County-run programs, and edible food recovery.*

Issue: Climate Action

- For several years, California has been devastated by thousands of wildfires, claiming dozens of lives, destroying or damaging tens of thousands of homes and millions of acres of land, and costing billions of dollars. Climate change has played a significant role in these devastating wildfires across the state, including some of the largest wildfires in the North Bay.
- Carbon pollution from fossil fuel combustion is the leading cause of climate change. Toxic air pollutants from fossil fuel pollution have been shown to cause respiratory illnesses, neurological damage, heart disease, stroke, cancer, and premature death. In the United States, air pollution causes about 200,000 early deaths each year.

Actions:

1. *Reduce carbon and associated pollutants from fossil fuel combustion to mitigate and prevent climate impacts on human health and the environment.*
2. *Increase access to affordable, clean energy and accelerate investments in energy efficiency and renewable energy.*
3. *Support development of climate-smart buildings, facilities and infrastructure, and build community resilience focusing on food, transportation, waste, and water issues.*

Issue: Workforce

- Seven million Californians, the majority of them Latino, African American, and Native American, already live in Health Professional Shortage Areas — a federal designation for counties experiencing shortfalls of primary care, dental care, or mental health care providers.
- In just 10 years, California is projected to face a shortfall of more than 4,100 primary care clinicians and 600,000 home care workers, and will have only two-thirds of the psychiatrists it needs.
- People of color will make up the majority of Californians by 2030, but they remain severely underrepresented in the health workforce. While Latinos are now nearly 40 percent of the state’s population, for example, they compose only 7 percent of physicians.
- In February 2019, the California Future Health Workforce Commission issued a report that identified a strategy to help strengthen the state’s health workforce by 2030.

Actions:

1. *Support policies that achieve the following objectives and the Commission’s 10 priority actions:*
 - *Increase opportunity for all Californians to advance in the health professions.*
 - *Align and expand education and training to prepare health workers to meet California’s and Napa County’s health needs.*
 - *Strengthen the capacity, effectiveness, well-being and retention of the health workforce.*