



September 5th, 2023

Dear Board of Supervisors,

On behalf of the **#OneContraCosta Coalition**, we write today to celebrate the accomplishments of CC CARES Outreach & Education (CC CARES O&E), uplift the findings of the project, and highlight recommendations for health equity in Contra Costa. Within seven months of outreach, fourteen community-based organizations (CBOs) and three community health centers (the CC CARES O&E Network) accomplished the following:

- Educated over 146,700+ people through canvassing, social media, events, and other outreach methods. As trusted messengers with years of experience caring for immigrants, CBOs were able to leverage their relationships with communities to help undocumented populations overcome systemic barriers and deep-seated fears that excluded them from accessing healthcare services.
- Surveyed 1123 community members, providing pertinent data on challenges and barriers that affect immigrant enrollment into county and state health coverage programs.

As Contra Costa's healthcare systems prepare for the 2024 expansion of full-scope Medi-Cal, the **#OneContraCosta Coalition** urges the Board to study the report and advance the recommendations of the CC CARES O&E Network. The **#OneContraCosta Coalition** advises the Board to prioritize the following three recommendations:

1. Sustain the CC CARES program and shift eligibility requirements to cover undocumented folks who make above 138% the federal poverty level.

According to the CC CARES O&E Report, **financial costs** were the most common reason why surveyed community members were unable to access healthcare services. While the CC CARES O&E program is free, CBOs frequently encountered people working multiple low-wage jobs who made too much money to qualify for CC CARES despite struggling to survive in Contra Costa. Income was also the most common reason community health centers were unable to enroll referred individuals into CC CARES or Medi-Cal during enrollment appointments. To qualify for CC CARES or Medi-Cal, an individual must make less than 138% of the federal poverty level, which is approximately \$20,121 a year for a household of one.¹ This is **less than half the estimated living wage** for a single adult in Contra Costa according to the UC Berkeley Labor Center.² According to the Migration Policy Institute, there are approximately 7,000 undocumented immigrants in Contra Costa who have an income between 150-199% of the federal poverty level, leaving them ineligible for subsidized care.³ There is pending legislation at the state level to instruct and authorize Covered California to create healthcare programs for undocumented folks making above the Medi-Cal income cut off through AB 4. Until this legislation is enacted, Contra Costa's undocumented communities will continue to be excluded from affordable healthcare options for pursuing a livable wage.

¹ Health for California. "Covered California Income Limits." 2023. <https://www.healthforcalifornia.com/covered-california/income-limits>

² Hunter, Savannah, Vivian Vázquez, Enrique Lopezlira and Ken Jacobs. "The State of Working East Bay, 2015-2019." UC Berkeley Labor Center, May 2023. <https://laborcenter.berkeley.edu/state-of-working-east-bay-2015-2019/>

³ Migration Policy Institute. "Profile of the Unauthorized Population: Contra Costa County, CA." 2023. <https://www.migrationpolicy.org/data/unauthorized-immigrant-population/county/6013>

The #OneContraCosta Coalition urges Contra Costa County to sustain the CC CARES program and shift income eligibility to provide care to undocumented communities who are not income eligible for Medi-Cal. By doing this, CC CARES will serve as a bridge program to eventually help communities enroll into Covered California once they become eligible. Until then, sustaining CC CARES and shifting the eligibility requirements ensures that all Contra Costa communities are not denied their basic, universal human right to healthcare services because of their pursuit of a living wage.

2. Continue and expand collaborations between Contra Costa's healthcare systems and community-based organizations and expand the onsite enrollment model.

The #OneContraCosta Coalition urges the Board to encourage the expansion of collaborations between Contra Costa's healthcare systems and CBOs. Throughout CC CARES O&E, community health centers, the Contra Costa Health Plan (CCHP), Contra Costa Health (CCH) and CBOs convened regularly to dialogue and identify solutions to systemic barriers to healthcare access. As a result, systems and CBOs were able to implement innovations such as the **onsite enrollment model**, which allowed community members to enroll in CC CARES and Medi-Cal out of CBO sites or at community events/locations. Now that CC CARES O&E has concluded, we do not want these innovations and opportunities for dialogue to disappear. We hope to continue collaborations between CBOs and Contra Costa Health to **continue outreach and education around Medi-Cal enrollment**. We seek your support in strongly encouraging expanded dialogues between CBOs and Contra Costa's systems. We also seek your support in encouraging systems to expand the onsite enrollment model, which can streamline the expansion of Medi-Cal and also help undocumented communities enroll in other county services such as CalFresh. The onsite enrollment model is an important outcome of CC CARES O&E, but sustaining this innovation and future innovations requires Contra Costa's health care systems to collaboratively engage the community to provide input and develop ongoing partnerships.

3. Hire Patient Health Navigators and Enrollment Staff who can meet the community where they are at to facilitate a seamless transition to Medi-Cal in 2024.

CC CARES O&E highlighted challenges that need to be addressed for our healthcare systems to adequately care for immigrant communities. Here are some examples:

- CC CARES O&E referrals shared personal stories of how they had struggled to access healthcare services because of a lack of guidance/support, limited information on how to get care, and fear/distrust of the healthcare system.
- Many CC CARES referrals struggled to connect with community health centers during clinic hours, as they could not take the time off work for an appointment or phone call.
- Transportation also prevented referrals from traveling to clinics for appointments.

The onsite enrollment model helped referrals overcome these barriers by offering enrollment services conducted by trusted CBO's in community locations throughout the County and on convenient days and times. By hiring Enrollment Staff and Patient Health Navigators who are explicitly instructed to **work evenings and weekends and collaborate with CBOs**, healthcare systems can better meet the needs of our communities. These staff should also represent the communities they will serve.

As the CC CARES population transitions to Medi-Cal, the #OneContraCosta Coalition encourages the Board of Supervisors to closely examine the findings of the CC CARES O&E Report, reflect on the experiences of Contra Costa's immigrants, and encourage County departments to enact the recommendations described above. We know the innovations of CC CARES O&E led to an increase in



CC CARES enrollments. With your support, we can use these strategies and data to advance health equity for Contra Costa's most underserved communities. Please do not hesitate to contact me with any questions.

Sincerely,

Anna Ostrander

CC CARES Outreach and Education Project Coordinator

#OneContraCosta Coalition