

Special Audio Report Transcript

Headline: After National and State Elections, California Health Care Stakeholders Look to the Future

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Text:

The 2012 general election brought a sense of certainty about the Affordable Care Act to many health policy advocates and officials in California. Now, stakeholders are preparing for a year of vital, detailed health policy creation. This is a special report for *California Healthline*, a daily news service of the California HealthCare Foundation. I'm Rachel Dornhelm.

(Clinic background sound): "Just raise your hand up here please, thank you."

At the partially government-funded LifeLong Medical Care clinic in Berkeley, a client's blood pressure is being taken.

(Clinic background sound): "I'm just waiting for a room to get ready, it's only going to take a minute. OK."

Joe Lee is LifeLong's Community HealthCorps program coordinator. He says for a clinic like his that serves people who face barriers to medical care, the national and state elections brought relief.

(Lee): "The election results were very positive. And this is very positive for the future of health care reform."

Lee says many of the clinic's uninsured patients should receive coverage as a result of the Affordable Care Act, which is on its way to full implementation with the re-election of President Obama. And for services dependent on state funds, Lee says the passage of California's Proposition 30 also was good news.

(Lee): "We used to have two adult day health centers. They unfortunately closed down because of health care services funding that was cut at the state level. We're hoping with health reform and propositions like Prop. 30, we're hoping that more funds will funnel and channel through."

California State Controller John Chiang (D) echoed those upbeat budget sentiments. After speaking at a trade meeting in Oakland, Chiang said the continued implementation of the ACA has big fiscal implications for the state.

(Chiang): "Over a nine-year period of time, the difference between President Obama and the implementation of the Romney/Ryan plan is \$122 billion coming into the state of California ... that's incredibly significant."

However, some health advocates note that the election will not completely cure the state's health care budget woes. Vanessa Cajina, a legislative advocate at the Western Center on Law and Poverty, says the health services that have been stripped away in recent years -- like dental services for low-income residents and adult day health care for seniors -- might not return anytime soon.

(Cajina): "There's still no blank check. This governor is incredibly austere, and we know that the federal government knows that they have due diligence to the taxpayers and the people who elected them."

Cajina says because there are many decisions to be made, it's vital policymakers get to work right away.

(Cajina): "We have so many decisions to make and given our own governor's focus on Prop. 30, there are a lot of conversations that we would have wanted to have over the past year in terms of figuring out different benefits design, for what the Medi-Cal expansion looks like, who is going to qualify for it, we would have liked to have those conversations sooner rather than later."

Alex Briscoe, director of the health care services agency in Alameda County, agrees that 2013 is a watershed year for health policy.

(Briscoe): "An extraordinarily important year. So much is in flux, there is so much opportunity before us."

But Briscoe says funds are still tight and there are several issues he'll be watching: the rollout of the California Health Benefit Exchange, the expansion of Medi-Cal, the transition from Healthy Families to Medi-Cal and the coordinated care initiative. But he is also worried about the future of indigent care for those who will remain uninsured after the ACA implementation. Briscoe says right now, the county pays for indigent care from 1991 realignment funds.

(Briscoe): "The state has signaled its intent to take the money it gives to counties to cover its share of the increased cost of the

Medicaid expansion. And as a local health director, I strongly oppose any such movement or any such claim on 1991 funds."

Briscoe says his county currently has 200,000 to 250,000 uninsured residents. He estimates that as many as 150,000 still could be uninsured after the ACA implementation. The remaining uninsured include those who fall through eligibility cracks, don't purchase insurance or are undocumented.

William Walker is the head of the Contra Costa County health system, which includes the county's hospital. He says that public institutions make up 6% of the hospitals in California but historically have provided 50% of the care for uninsured populations.

(Walker): "Obviously those clinics and county facilities also depend on a variety of sources of funding, and so the real issue will be how much of a dent any removal of realignment funding would make on those institutions. Again we're not talking numbers at the present time, but again that's the conversation we're entering into."

Walker says officials are trying to estimate the number of uninsured residents who might try to access indigent care come January 2014. Like many of his health policy colleagues, Walker said he is moving on from the election and now is focusing on figuring out how to make the health care system work best.

This has been a special report for *California Healthline*, a daily news service of the California HealthCare Foundation. If you have feedback or other issues you'd like to have addressed, please email us at CHL@CHCF.org. I'm Rachel Dornhelm, thanks for listening.