

Assembly Bill 1494: Declared Emergencies Assemblymember Cecilia Aguiar-Curry



OVERVIEW

Today, roughly 1,330 community health centers (CHCs) in California provide high-quality comprehensive care to 6.9 million people – that’s 1 in 6 Californians. CHCs provide care to everyone, regardless of their ability to pay, their immigration status, or their individual circumstances.

CHCs have a mission to represent and serve vulnerable and medically underserved communities. They offer linguistic and culturally appropriate services to ensure that patients receive high quality care. CHCs and staff have earned the trust of the communities they serve, and therefore often have the greatest opportunity to make contact in the event of an emergency to ensure any needed services are obtained.

DECLARED EMERGENCIES & COMMUNITY HEALTH CENTERS

Throughout the past two years, over 30 California health centers and the communities they serve have been deeply impacted by emergencies ranging from destructive wildfires and mud slides to the Oroville Dam crisis. In addition to first responders and government officials, CHCs have been on the front line, treating non-emergency patients, providing resources to victims of the fires and other declared emergencies, and serving communities as they rebuild.

CHCs continue to uphold their mission of providing needed and vital care to their communities by expanding clinic hours and staff at unaffected sites, deploying mobile units, and sending providers and staff to assist evacuees at shelters. CHCs also utilize alternative modes of care delivery such as telephonic and telehealth visits to ensure timely access to care for the most vulnerable patients.

THE PROBLEM

AB 2576 (Aguiar-Curry), signed by Governor Jerry Brown in 2018, was a critical first step to ensure that communities continue to receive timely access to care when disaster strikes. However, challenges remain for

CHCs who wish to offer services outside of their actual health center location during an emergency.

For example, during the Tubbs Fire in 2017, Santa Rosa Community Health center was able to provide 1,412 telephonic visits between their providers and their patients during the fire but due to the lack of clarity in the law, they have yet to be reimbursed for the care provided.

Any health care provider that is licensed, registered, or certified should be able to provide services during a declared emergency without restrictions to location or care delivery platform.

THIS SOLUTION

AB 1494 (Aguiar-Curry) is critical to ensure that communities continue to receive timely access to care when disaster strikes. This bill aims to address the following challenges during a declared emergency:

- **TELEPHONIC VISITS:** During an emergency, this is the most efficient way to provide care. AB 1494 will clarify state law to ensure that providers can have telephonic appointments (“visits”) with patients.
- **CARE AT SHELTERS:** While many health centers already have cooperative agreements with their county and local partners to provide services in shelters, greater clarity is needed to guarantee health centers can bill for these services.
- **CARE AT HOME:** People who struggle with transportation or disabilities are especially vulnerable during disasters. While health centers may use telephone visits to care for these patients, the ability to provide, and be reimbursed for, home visits would create the necessary flexibility to keep patients healthy at home and avoid unnecessary strain on emergency service. This bill will also allow for greater flexibility in the utilization of telehealth, and, in so doing will support homebound patients and patients displaced by disasters and unable to otherwise access their medical home

FOR MORE INFORMATION

**Assembly Bill 1494:
Declared Emergencies
Assemblymember Cecilia Aguiar-Curry**



Christy Bouma/Meagan Subers: (916) 227-2666
Andie Martinez Patterson: (916) 503-9130