

Assembly Bill 1494 (Aguiar-Curry) Declared Emergencies

April 11, 2019



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. In many rural communities throughout California, community health centers serve as the only source of medical and wellness care for middle- and working-class families in the region. 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.

THIS SOLUTION

Building on existing law, Assembly Bill 1494 (Aguiar-Curry) is the critical next step to ensure that communities continue to receive timely access to care when disaster strikes by guaranteeing that CHCs can continue to provide, and be reimbursed for, services for their patients that have been impacted by a declared emergency.

Specifically, this bill aims to address:

- TELEPHONIC VISITS: AB 1494 will clarify state law to ensure that providers can have telephonic appointments (“visits”) with patients, which is the most the most efficient way to provide care during a declared emergency.
- 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. 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.

AB 1494 would also require the Department of Health Care Services to establish a stakeholder process to assist with developing guidance for providers regarding the services they can provide and be reimbursed for during a declared state of emergency.

FOR MORE INFORMATION

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Talking Points / April 11, 2019



COMMUNITY HEALTH CENTER BACKGROUND

- Today, more than 1,330 community health centers serve the state of California, and provide comprehensive, high quality care to 6.9 million people – or 1 in 6 Californians.
- Community health centers provide the full spectrum of care, from primary care to dental to behavioral health care and a variety of enabling and wraparound services.
- In many rural communities throughout California, community health centers serve as the only source of medical and wellness care for middle- and working-class families in the region.

2018 FIRE EXPERIENCE AND IMPACT

- The 2018 fire season was the worst in California history and took a devastating toll on impacted communities, including community health centers.
- Over a four-month period in late 2018, nearly a dozen health center corporations, serving a 6 county region, were impacted by fires.
- In addition to fire fighters, police officers, and government officials who have worked together to coordinate relief efforts for fire-affected areas, community health centers have been on the front line, treating non-emergency patients, providing resources to victims of the fires, and serving communities as they rebuild.
- In the immediate aftermath, they extended hours to treat their established patients as well as fire evacuees. Even those health centers directly impacted by the fires continued to go above and beyond to assist their community.
- Not only have health centers continued to provide primary care services, they are also addressing the complex behavioral health needs of both their resilient patients and staff champions.

THE SOLUTION: ASSEMBLY BILL 1494

- In 2018, the Governor signed AB 2576 which was a necessary first step to ensure that communities continue to receive timely access to care when disaster strikes. Despite advances made, barriers to community health centers' ability to provide health care during a declared emergency remain.
- During a disaster, communities may be unable to receive vital health services at their healthcare facility due to evacuations, sheltering-in-place or their primary care facility being closed, damaged or worse destroyed.
- Building on existing law, AB 1494 is the critical next step to ensure that communities continue to receive timely access to care when disaster strikes by guaranteeing that CHCs can continue to provide, and be reimbursed for, services for their patients that have been impacted by a declared emergency.
- AB 1494 will also require the Department of Health Care Services to establish a stakeholder process to assist with developing guidance for providers regarding the services they can provide and be reimbursed for during a declared state of emergency.
- We owe our communities better. We need clarity in the law to guarantee that community health centers may continue to provide services by utilizing alternative methods to connect with their patients that have been impacted by a declared emergency.