The California Pan-Ethnic Health Network (CPEHN) is a statewide multicultural health advocacy organization dedicated to the advancement of health justice through racial equity. Since 1992, CPEHN has served California's Black, Indigenous, Communities of Color (BIPOC) by bringing together and mobilizing historically excluded communities to advocate for public policies that advance health equity and improve health outcomes.

While California leads the rest of the nation in groundbreaking expansions to increase access to health and social safety nets, BIPOC Californians continue to experience disparities in health coverage, mental health, oral health, and public health. CPEHN envisions a world in which all Californians regardless of race, ethnicity, sexual orientation, disability, or immigration status have opportunities to thrive and live healthy lives.

As California's leaders work to advance health equity, it is critical to ensure racial equity is at the core if we truly wish to live in a society where your race, income, and zip code are no longer determinants of your health prognosis.

**SB 1019 (Gonzalez): Strengthening Access to Medi-Cal Mental Health for Diverse Communities**

Mental health remains one of the most underutilized services by communities of color. Whether it is stigmas, lack of awareness, confusion, language barriers, or general difficulty navigating benefits, these challenges have led to blatant and widening disparities to mental health. SB 1019 would require Medi-Cal Managed Care Plans (MCPs) to offer linguistically and culturally relevant outreach materials to those enrolled in their health plan. These materials will provide Californians with information on how to find providers, navigation of MCP websites, and inform individuals of their right to timely access to mental health care. Additionally, this bill would also require MCPs to collect direct patient experiences for the purposes of tracking and reducing barriers and require the Department of Health Care Services (DHCS) to work with stakeholders, both statewide and community-based, to develop best practices and recommendations for eliminating barriers to access.

For more information and background materials on CPEHN’s Legislative Priorities, please refer to our website. If you have further questions, please contact Andrea Rivera, CPEHN’s Senior Legislative Advocate, at arivera@cpehn.org.
SB 1033 (Pan): Advancing Health Equity with Data
Incomplete demographic data continues to impact the state’s ability to properly identify and then address racial and ethnic health disparities, gender and sexual orientation disparities, address social determinants of health, and improve quality of care for Californians. SB 1033 would require commercial health plans to establish demographic profiles of individuals they serve, establish standardized categories for demographic data and reporting, as well as require health plans to use best practices, in coordination with stakeholders like community groups, when collecting data from patients. SB 1033 would create a fund using fines and penalties from plans to provide technical assistance on how to improve data collection, its legality, and how to work with patients.

AB 2680 (Arambula): Medi-Cal Health Navigators
Navigators serve Californians by assisting people with navigating and understanding their health care benefits. AB 2680 would establish an ongoing Medi-Cal Health Navigators program that will provide outreach, enrollment, retention, and utilization assistance for community members that are eligible for Medi-Cal benefits. As the COVID-19 pandemic continues to ravage communities of color and the state expands Medi-Cal to more undocumented Californians, Medi-Cal will be experiencing an influx of individuals and Navigators will be essential to ensuring we get people enrolled in urgently needed services.

AB 2697 (Aguiar-Curry): Community Health Workers
Community Health Workers (CHWs), also known as promotoras, are one of the most effective community-driven strategies helping BIPOC Californians. CHW/Ps are frontline workers that come from the very communities they serve, bringing a personal understanding of the community, needs, and barriers through shared life experiences and therefore are better positioned to work with individuals and families to break cycles of injustice. AB 2697 ensures culturally and linguistically appropriate outreach is conducted to Californians enrolled in Medi-Cal, increasing awareness of the CHW/P benefit and the availability of services provided by this important workforce. By ensuring millions of Californians understand their ability to work with a CHW/P, these health workers will continue to provide critical cultural and linguistically responsive care in order to support millions of Californians with chronic conditions, preventive health care needs, and address the social determinants of health.

SB 644 (Leyva) Covered California Access
As Californians continue to experience the ongoing effects of the pandemic and BIPOC communities face increased levels of job loss and financial insecurity, it is critical that the state offer eligible individuals information about Covered California health plans. SB 644 would require Covered California and the Employment Development Department to share contact information of individuals who have applied for unemployment assistance, or other related benefits. The information collected will be used to conduct outreach to Californians who are eligible to purchase health care coverage through Covered California. This information sharing will reduce the number of Californians that forgo health care.