

MOBILIZING FOR HEALTH EQUITY TRAINING SERIES

Budget & Legislative Advocacy Part 1

February 28, 2019



Let's Learn Together

MOBILIZING FOR HEALTH EQUITY TRAINING SERIES

What is Health Equity?	Jan 31
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Community Organizing	Aug 22
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Data & Evaluation	Oct 24



Housekeeping

- We encourage this to be a learning environment – please use the questions feature to **share questions, your perspectives, and resources**
- You are in listen-only mode
- The webinar will be recorded. Slides and recording will be shared after today's webinar
- Please take 1 minute to complete an evaluation after the webinar



Your CPEHN Resources



**Keerti
Kanchinadam**
Policy and
Outreach
Manager



Mihae Jung
Community
Advocacy
Director



Saili Willis
Community
Advocacy
Associate



Jillian Rice
Communications
Manager



Today's Resources



Linda Tenerowicz
Policy Advocate
California Pan-Ethnic Health Network
ltenerowicz@cpehn.org



Budget & Legislative Advocacy Part 1



CPEHN: Together We're Stronger

APIAHF
ASIAN & PACIFIC ISLANDER
AMERICAN HEALTH FORUM



CBHN
CaBlackHealthNetwork.org
Creating healthy communities
now and for the future.



CPEHN ensures health justice and equity are on the agendas of policymakers and that communities are part of the policymaking process



California Pan-Ethnic Health Network

We build people power to educate and influence policymakers through lived experience, disaggregated data, and community expertise for better health equity centered policies and systems



We pass, change, and implement policies that reflect community needs for better health



We invest in communities of color to build leadership, sustainability, and advocacy strength

We connect data, stories, partners, and regions to build knowledge, relationships, and understanding across cultures



To create equitable conditions that promote health equity and allow communities of color and all residents to thrive and prosper



Budget & Legislative Advocacy Overview



Lay of the Land

- Bicameralism—California Legislature has two houses the Senate and the Assembly.
- The **Senate** has 40 members who represent larger districts of about 931,349 people.
- The **Assembly** has 80 members who represent smaller districts of about 465,000 people.
- Term limits as of 2012—12 total years in office in any combination between the two houses. (Senate terms are 4 years each and Assembly terms are 2 years)
- Bills must be passed by each house and in the same form.



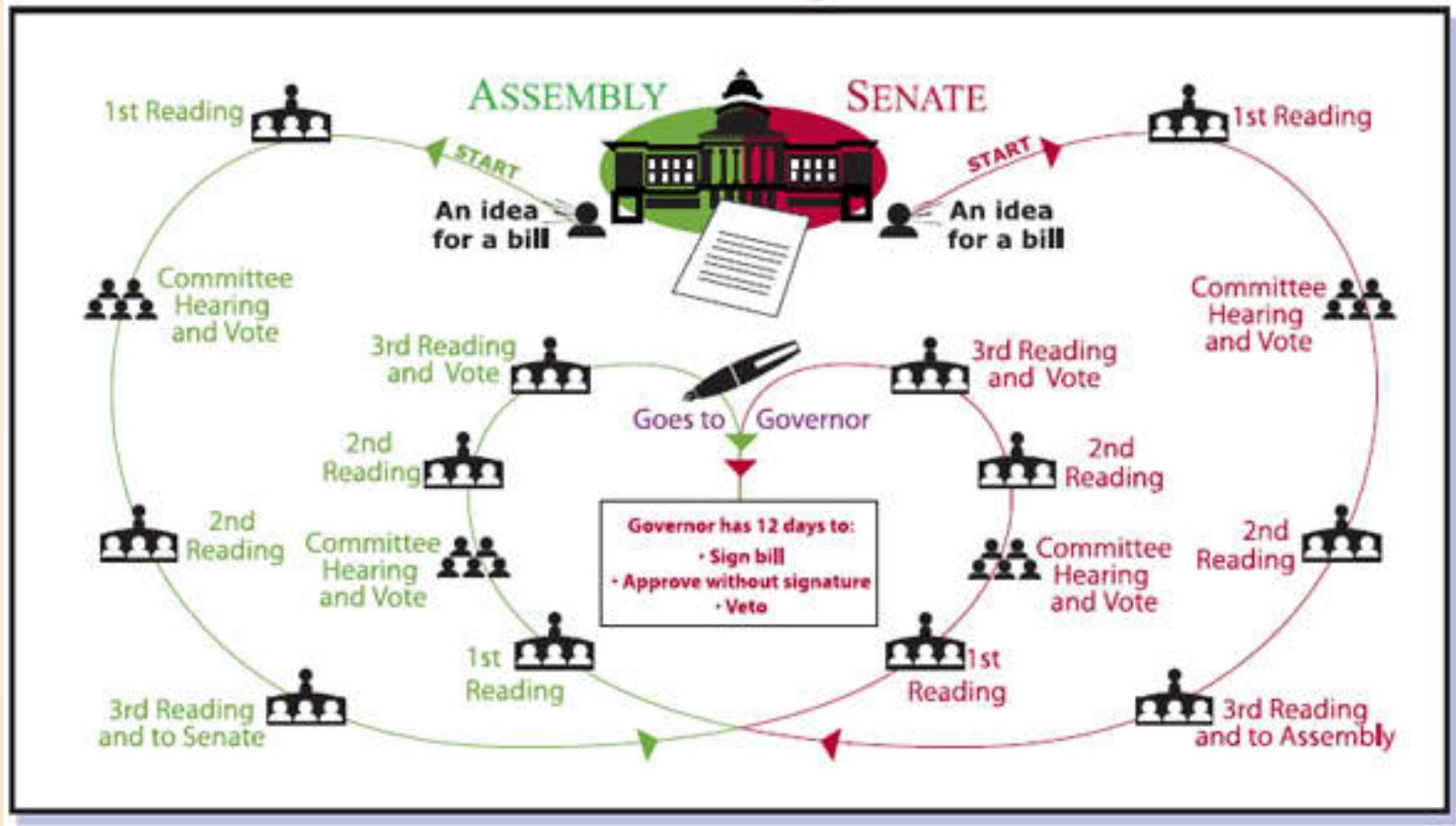
November 2018 Election Results

- Both houses in the CA Legislature have Democratic supermajorities
- **Senate**
 - 29 Democrats, 11 Republicans
 - 3 seats flipped from Republican to Democrat
 - 3 newly elected Democratic women
 - Special election to fill Sen. Lara's (D) seat March 26
- **Assembly**
 - 61 Democrats, 19 Republicans
 - 5 seats flipped from Republican to Democrat
 - 5 newly elected Democratic women



A Bird's Eye View

The Lawmaking Process



Legislative Cycle: A Closer Look

First House

Jan-Feb

Bills introduced

Mar-May

Policy committee
hearings

Spring recess

May

Fiscal committee
hearings

Floor session

Second House

Jun-July

Policy committee
hearings

Summer recess

Aug

Summer recess

Fiscal committee
hearings

Sept

Floor session

Governor

Sept-Oct

Governor signs or
vetoes bills



Policy Committees

- In each house, there are congruent policy committees (health, education, transportation, etc.) to vet and vote on bills
- Legislators are designated to serve on these policy committees
- The legislators who serve on that committee are responsible for passing or defeating bills brought before that committee through a majority vote



Policy Committee Assignments

- The Speaker of the **Assembly** and the Pro Tempore of the **Senate** determine Committee chairmanships and membership.
- They were both elected by their peers in the Capitol to lead the majority party in both houses.

Assembly Speaker Anthony Rendon



Senate Pro Tem Toni Atkins



Fiscal Committees

- The Senate and the Assembly both have fiscal committees called the Appropriations Committee
- This committee is responsible for evaluating the cost to the state to implement legislation
- This committee can advance or defeat legislation based on costs
- Lobbying the Appropriations Committee chairs is important

Opportunities to Leverage

1st House: January-May | 2nd House: June-July | Governor's Office: September

Outside the Capitol

- ☐ Build a campaign
- ☐ Form coalitions
- ☐ Submit letters
- ☐ Engage with media/social media

Inside the Capitol

- ☐ Meet with legislators and their staffs
- ☐ Provide public comment/testimony in a policy committee hearing

Advocacy Tips

- Research the legislator you'll be speaking with
- Be mindful of the time
- Answer why this bill matters to the community
- Leave with a direct ask
- Provide resources (fact sheets, contact info, websites, etc.)
- Offer to follow up with staff



The Budget Process



Budget Process

Jan 10 – May 14

- **Governor** releases proposed budget on Jan 10
- **Legislature - Budget subcommittees** hold hearings to review proposed budget
- **Advocates** – meet with decision-makers, testify at hearings, submit letters

May 14 – Jun 15

- **Governor** releases revised budget
- **Legislature - Budget subcommittees** hold hearings on revised proposals
- **Legislature - Budget conference committee** meets to finalize differences
- **Advocates** – meet with decision-makers, testify at hearings, submit letters



Governor Newsom's Proposed Budget

- Total Budget: \$209 Billion
- General Fund Spending: \$144 Billion
- Total Spending for Health and Human Services: \$158.6 Billion
- Rainy Day Fund: \$4.8 Billion (bringing fund to \$19.4 Billion by 2022-2023)



Gov. Newsom's Budget -- Health Equity Investments

Investment	Amount	Description
Health4All	\$260 million	To build on Health4All Kids by expanding Medi-Cal to 138,000 undocumented young adults ages 18-25.
Medi-Cal Quality	\$360 million (Prop 56 funds + federal match)	For value-based payments to encourage Medi-Cal managed care providers to meet better health outcome goals and reduce disparities in chronic disease, infant/maternal care, and behavioral health
Trauma-Informed Care	\$52.5 million	To provide early developmental and ACEs screenings for children and adults in Medi-Cal. Proposal allows providers to receive additional payments for providing these services
Black Infant Health Program	\$7.5 million	To increase participation in the Black Infant Health Program which provides case management and home visiting maternal care
Home Visits	\$23 million	Expand home visiting for CalWorks pregnant women with children under 2, with priority given to first time parents

Gov. Newsom's Budget -- Other Key Investments

Investment	Amount	Description
Census	\$54 million	For statewide outreach efforts to ensure robust participation in the 2020 Census. Brings total state funding up to \$140.3 million
Immigration	\$100 million	To help CBOs and non-profits provide rapid response services at the border and support with DACA, naturalization, and other immigration-related services.
Cal EITC	\$1 billion	Doubles CalEITC to cover 400,000 families with young children
CalWork Grants	\$347.6 million	Raises CalWorks grant levels to 50 percent of the 2019 federal poverty level
Affordable housing + homelessness	\$7.7 billion	To address the shortage of affordable housing and support growing number of homeless and displaced Californians by providing shelter, providing supportive housing, and incentivizing development
Safe Drinking Water	\$4.9 million + new tax	To implement short-term measures for communities without safe drinking water and places a water, fertilizer, and dairy fee to pay for long-term programs

Budget Subcommittees

- Budget subcommittees are issue-specific committees that vet the Governor's proposed budget by topic (Health, Education, Transportation, etc.)
- They report recommendations to the full Budget Committee
- Example: Health Budget Subcommittee Chairs



Assemblymember Dr. Joaquin Arambula
Assembly Budget Subcommittee #1
Chair of Health and Human Services



Senator Dr. Richard Pan
Senate Budget Subcommittee #3
Chair of Health and Human Services

Full Budget Committee Chairs

Assemblymember Phil Ting
Assembly Budget Chair



Senator Holly Mitchell
Senate Budget Chair



- The budget *subcommittee chairs* report their recommendations from their committees to these two budget chairs
- Both chairs oversee the creation of the Assembly and Senate versions of the state budget bills and shape the priorities that will be reflected in them.
- Both the full Senate and Assembly Budget committees vote to approve their respective versions of the budget.

Key Budget Players

- Once each house passes their version of the budget, negotiation begins among the “Big 3” to join them together into a single bill.

The **BIG** Three:

Assembly Speaker Rendon



Governor Newsom



Senate Pro Tem. Atkins



Final Approval

- The compromise budget bill then gets voted on before the full Senate and Assembly
- The budget bill goes to the Governor's desk for final signature and approval by the constitutional June 15th deadline



Advancing Health Equity in 2019



California's First Surgeon General



Dr. Nadine Burke Harris

California Surgeon General will lead all Californians in addressing the root causes of serious health conditions, such as adverse childhood experiences and the social determinants of health.



Having Our Say!

Communities of Color's Stake in Health Care Reform



California Pan-Ethnic Health Network



State Policymaker Visits



HOS Coalition 2019 Priorities

1. Access	Securing sustainable and innovative funding for <u>outreach, enrollment, and care coordination</u> work in order to ensure communities of color access and utilize available health care programs.
2. Quality	Increasing <u>culturally competent and quality care</u> through increased funding for CBO services, expanded provider recruitment, and reliable access to in-language services and trained interpreters, etc.
3. Coverage	Passing <u>Health4All</u> , which expands access to Medi-Cal for all Californians regardless of immigration status.
4. Social Determinants	Supporting policies that promote public health and prevention including, housing affordability, transportation access, asthma prevention, and additional <u>social determinants of health.</u>
5. Census	Supporting advocacy and community education to ensure that Census workers are adequately resourced and appropriately trained to ensure a <u>robust 2020 Census.</u>

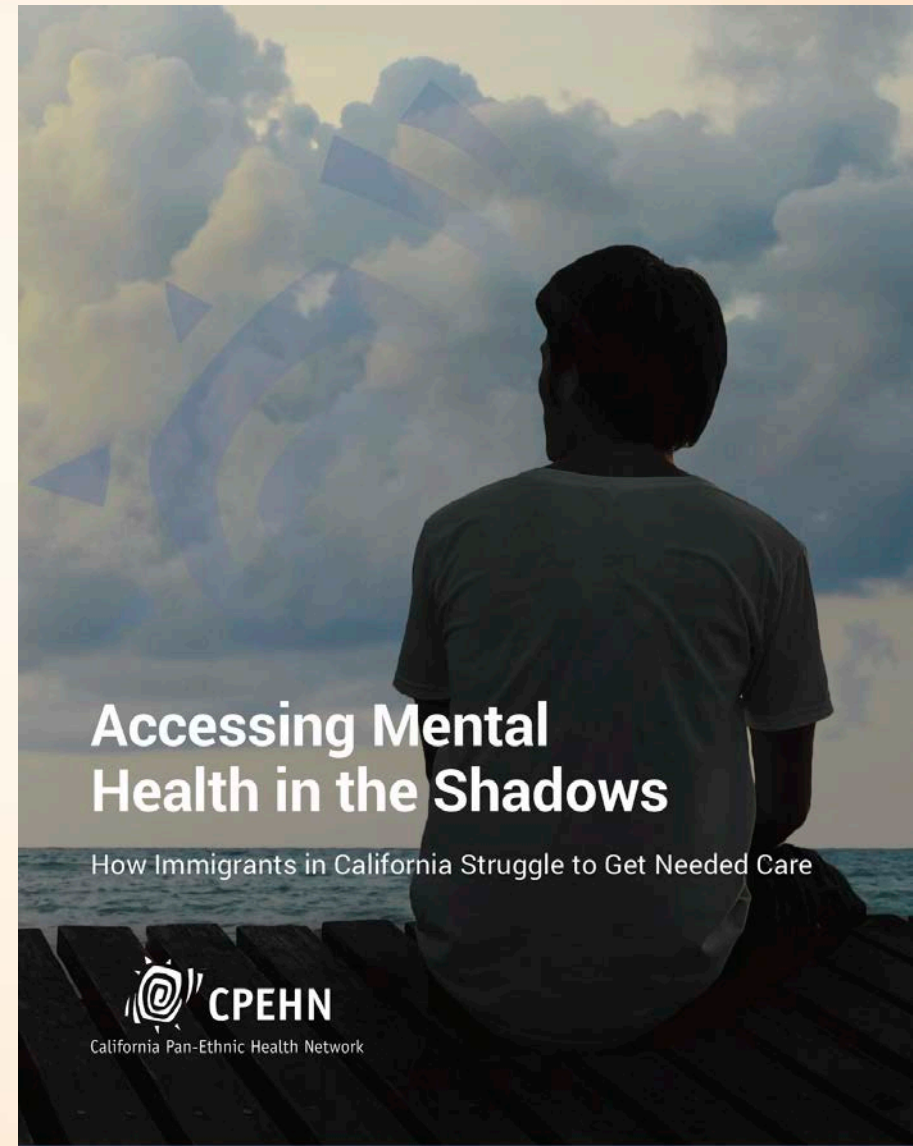
Budget Advocacy: \$30 million for Health Navigators

- Health care is complex to navigate!
- Fear of immigration consequences further deter people from applying, retaining, or using coverage
- CBOs support community members with:
 - Enrollment
 - Renewals
 - Accessing doctors
 - Finding translators
 - Coordinating appointments
- State/federal funding ended in 2018



AB 512 (Ting) Cultural Competence in Mental Health

- Requires counties to report on additional criteria in their cultural competency plans
- Requires DHCS to annually review and monitor quality improvement and mental health disparities reduction
- Requires counties, DHCS, and stakeholders to develop performance targets that reduce disparities and improve mental health quality



AB 537 (Arambula) Medi-Cal Quality

Medi-Cal Enrollment

	Fresno	California
Percent of Residents Enrolled	49.8%	33.7%
Number of Residents Enrolled	483,437	13,336,491

This bill would reduce health disparities by:

- Requiring annual quality improvements and performance targets for health plans
- Defining health disparities reduction for health plans and publicly rating them on whether their services result in more equitable health outcomes
- Creating a public stakeholder process to establish performance targets and financial incentives



AB 318 Readability of Medi-Cal Documents

This bill would improve culturally appropriate care by:

- Requiring field testing for readability and cultural appropriateness of all translated materials
- Requiring DHCS to conduct a readability workgroup
- Requiring DHCS to revise and reissue documents based on the workgroup's recommendations



SB 207 (Hurtado) Breathing Easier: Improved Asthma Outcomes for Medi-Cal

**Nearly 1 in 6
CA kids lives
with asthma.**

See the percent of kids with asthma in your county:
<https://bit.ly/2T6m78o>

#BreatheEasier

1. Allow Medi-Cal to reimburse for asthma education and home trigger assessments provided by community health workers
2. Increase financial support for environmental trigger remediation in the home



How to Support Health Equity

- Submit letters of support for policies at the local, state, and federal level
- Collect + share stories
- Legislator district visits
- Social media
- Local rally, press events
- Sacramento advocacy days
 - Equity on the Mall – March 6
 - Health4All Day of Action – March 20



Questions?



Thank you! For more info:

CPEHN PRESENTS:

MOBILIZING FOR HEALTH EQUITY TRAINING SERIES

This webinar series is for the **Having Our Say Coalition** and other community-based organizations who want tangible tools to mobilize their communities and advocate for a healthier California.

**LEARN ABOUT THE MANY FORMS OF ADVOCACY:
LEGISLATIVE, BUDGET, ADMINISTRATIVE,
DIRECT ACTION, AND MORE.**

Webinars are FREE to attend
but you must register in advance.

Visit bit.ly/HOStrainings for more information!

Keerti Kanchinadam

Policy and Outreach Manager
California Pan-Ethnic Health Network

kkanchinadam@cpehn.org

Linda Tenerowicz

Policy Advocate
California Pan-Ethnic Health Network

ltenerowicz@cpehn.org

(916) 447-1299

