

# Protecting Access for Californians With a Compromised Socioeconomic Status



## Essential to Access, Essential to Health

Private Essential Access Community Hospitals

**Homelessness is a major contributor to the socioeconomic status (SES) of individuals.** SES is measured by a number of factors including education, income, type of occupation and place of residence. While the number of homeless individuals is growing, the Medi-Cal program has not adjusted for the complexities that accompany this population.

### SES is a Contributing Source of **HEALTH INEQUITY**

There is substantial research demonstrating the correlation between SES and health.

SES has long been related to health, those higher in the social hierarchy typically enjoy better health than do those below.

### Community Safety-Net Hospitals



Provide a disproportionate share of health care services to vulnerable populations, including homeless adults with a lower SES.



Have not received a Medi-Cal payment increase for over 7 years, since the implementation of the current risk-based methodology in 2013 (APR-DRG).



Have received \$100 million less in Medi-Cal payments despite the increased complexities that are not accounted for in the current formula.



This burden creates longer lengths of stay for the patient and disproportionate costs for the community safety-net



While medical complexity is accounted for in determining Medi-Cal payment rates, social complexity is not considered

#### Contact:

Nicette Short  
NL Short Public Affairs  
916.549.2853 mobile

#### Representing:

PEACH  
Private Essential Access  
Community Hospitals  
1107 9<sup>th</sup> Street, Suite 1001  
Sacramento, CA 95814  
916.446.6000

**THE SOLUTION:** The Legislature can help to reduce health disparities, ensure access to health care for vulnerable homeless adults and preserve services at community safety-net hospitals by including a \$50 million General Fund investment for direct grants to community safety-net hospitals.