



**PUBLIC REQUEST TO ADDRESS  
THE BOARD OF SUPERVISORS  
COUNTY OF LOS ANGELES, CALIFORNIA**

MEMBERS OF THE BOARD

HILDA L. SOLIS  
HOLLY J. MITCHELL  
LINDSEY P. HORVATH  
JANICE HAHN  
KATHRYN BARGER

**Correspondence Received**

The following individuals submitted comments on agenda item:				
Agenda #	Relate To	Position	Name	Comments
110.	51	<b>Favor</b>	Kira Sano	
		<b>Item Total</b>	<b>1</b>	
51.		<b>Favor</b>	Andy Yam	<p>My name is Andy Yam and on behalf of Rising Communities, I am speaking in support of Agenda Item 51 - County Code, Title 11 - Health and Safety Code Ordinance Amendment. Rising Communities is proud to co-facilitate the LA County Medical Debt Network alongside a number of other community-based and legal service organizations united in the fight against medical debt.</p> <p>While the negative impact of medical debt on our most vulnerable LA County communities is widely understood, we currently lack a detailed picture of the state of debt collection and financial assistance efforts happening in LA County hospitals. Requirements set forth by this ordinance if passed will directly solve this challenge, creating an accurate snapshot of who and who wasn't able to access financial assistance and ended up in collections.</p> <p>We believe that the data from this ordinance will help set the foundation for collaboration between community organizations, the Board of Supervisors, LA County DPH, and the numerous LA County hospitals. Together, I believe that we can develop innovative best practices and solutions to eradicate medical debt. After all, good data supports good policy.</p> <p>But in order to reach this lofty goal, this ordinance is the first of many steps that need to be taken. With the recognition of medical debt as both an economic and a public health issue, we ask for your support to move this ordinance forward.</p>



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51.		<b>Favor</b>	Brigette Montgomery Wallman	<p>Hello. My name is Brigette Montgomery Wallman. I am with Communities Actively Living Independent and Free, a non-profit that helps people with disabilities and seniors connect to resources to live independently. I want to express my sincere gratitude to the board for their invaluable and continued support in addressing the medical debt epidemic in Los Angeles. Your support is crucial in our efforts to help those who experience the stress of medical debt.</p> <p>Our organization serves a wide range of clients, including people with disabilities and seniors in Central and South Los Angeles. We have encountered situations where individuals are unable to access necessary care due to insurance limitations. Some clients miss out on taking their prescribed medication because of unexpected medical bills or excessive prices of the main-brand medication when generic isn't available due to short supply. Another example is SSI recipients who use an ambulance may receive a direct bill, not realizing that Medi-Cal covers the cost. The lack of awareness and data contributes to financial challenges for people with disabilities and seniors on a fixed income.</p> <p>Authorizing the Department of Public Health (DPH) to collect and publish data will allow for catching some of the miscommunication and develop other means of addressing medical debt. That's why CALIF is in Favor of the agenda item 51 ordinance. Thank you so much for your time.</p>



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51.		<b>Favor</b>	Christopher A Noble	<p>My name is Chris Noble and I'm the Organizing Director with Health Access California, the statewide consumer health advocacy coalition. I want to start by thanking the Board for your continued leadership in addressing the medical debt crisis in Los Angeles starting with the purchase and elimination of medical debt for 150,000 residents and the recognition of needing to address the upstream drivers of medical debt to prevent it from accruing in the first place.</p> <p>Currently more than one in three Californians with medical debt owe \$2,500 or more, 78% of people with any kind of medical debt reported skipping care due to cost with an increased impact on low-income, Black, and Latino Californians.</p> <p>The Ordinance in discussion today is a step in the right direction to better understand the cost-drivers of medical debt and to ensure that essential debt relief programs are being effectively implemented with equity and transparency in mind.</p> <p>Los Angeles has the opportunity to continue to be a leader in medical debt relief efforts that we hope can be a model to be emulated in other counties, states, and even nation wide.</p> <p>Thank you for your leadership and we hope for your support in this ordinance and future efforts to address the root causes of medical debt for LA residents.</p>
			Dr Christopher Scannell	<p>I am a primary care physician and have firsthand experience of working with patients dealing with high healthcare costs and suffering from financial distress. I am in favor of this ordinance as I feel it will help improve the financial assistance provided by hospitals. I believe this measure is patient-centered and will provide an exemplar for other counties to follow when it comes to prioritizing patients' financial well-being.</p>
			Giselle J Melendez	<p>My name is Giselle Melendez, the Operations Coordinator of Haven Neighborhood Services, a leading non-profit offering Financial Capability Services in Los Angeles County. Many of our clients live paycheck to paycheck and their medical debt ends up in collections, leading to negative consequences such as damaged credit scores. We strongly support the proposed ordinance amending Title 11 – Health and Safety of the Los Angeles County Code to address medical debt through data collection. This ordinance promotes transparency, supports lower-income patients, reduces financial distress, and ensures enforcement and compliance by requiring hospitals to report debt and financial assistance activities. By enhancing transparency and accountability, it helps protect vulnerable populations from the debilitating effects of medical debt. We urge the Board to adopt this important ordinance. Thank you.</p>



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51.		Favor	Henry Rogers	<p>On behalf of the Los Angeles County Medical Association (LACMA), I am writing to express our strong support for the proposed amendment to County Code, Title 11 - Health and Safety Code, particularly the addition of Chapter 11.41, Addressing Medical Debt Through Data Collection.</p> <p>LACMA, established in 1871, is one of the largest and most active local medical associations in California. We represent over 7,000 physicians from every medical specialty and practice setting. Our mission is to promote the science and art of medicine, the care and well-being of patients, the protection of public health, and the betterment of the medical profession.</p> <p>The issue of medical debt is of paramount importance to our organization and the patients we serve. Medical debt is a significant barrier to healthcare access and can have long-lasting impacts on individuals' financial stability and overall well-being. It often leads to delayed or foregone medical care, exacerbating health conditions and increasing long-term healthcare costs. As physicians, we witness firsthand the detrimental effects of medical debt on our patients' health outcomes and quality of life.</p> <p>We are particularly encouraged by the ordinance's focus on data collection and transparency. By authorizing the Department of Public Health to collect and publish data on debt collection practices and financial assistance policies, this amendment will shed light on the scope and nature of medical debt in Los Angeles County. This increased transparency is crucial for identifying systemic issues and developing targeted solutions.</p> <p>LACMA is looking forward to collaborating with the Los Angeles County Department of Health Services in addressing this critical issue. We believe that the data collected under this ordinance will provide valuable insights that can inform policy decisions and improve healthcare delivery systems.</p> <p>Moreover, the enforcement authority granted to the Department of Public Health will ensure accountability and compliance with reporting requirements. The ordinance's emphasis on financial assistance policies is particularly noteworthy. By increasing transparency in this area, we hope to see improved access to financial aid for patients in need, potentially reducing the incidence of medical debt.</p> <p>In conclusion, LACMA strongly supports this amendment as a significant step towards addressing the medical debt crisis in our community. We believe it aligns perfectly with our mission to protect public health and improve patient care. We stand ready to assist in any way we can to ensure the successful implementation of this important initiative.</p>
			Jelga Ramirez	Please keep health navigator programs. These services are crucial to the community. Community agencies provide a vital work in keeping families in Medi-Cal
			Jessica Marsella	
			Joy Dockter	



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51.		<b>Favor</b>	Kira Sano	
			Mairelise Robinson	Medical debt is an important topic for healthcare affordability and reducing the financial burden for the AAPI and LEP communities. Increased transparency in medical debt data collection and publication will help us understand the negative impacts on our communities and provide us with more data to understand healthcare affordability. Making the process more transparent and making sure that hospitals are actually reporting data on medical debt will also help communities who may not have a sufficient understanding of the healthcare system and/or resources available to advocate for themselves.
			Malena C Bell	I am a lifelong Angeleno and college student, and the content of this ordinance is a topic that is extremely personal to me. I have firsthand experience with medical debt and the challenges navigating it imposes on myself and my family. I think being able to collect this data from hospitals for the first time will be beneficial as it will increase transparency and allow the public to understand what happens in the facilities meant to serve us across the county. As such, I urge the Board of Supervisors to vote in favor of this ordinance amendment. Thank you.



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51.		Favor	Mihae Lozano	<p>My name is Mihae Jung Lozano. I'm currently residing in Long Beach, the 4th district of LA County. I am representing myself - a proud Angelino- and also the California Pan-Ethnic Health Network, CPEHN. CPEHN is a statewide health policy organization that advocates for the health and well being of BIPOC and LGBTQ+ communities. I'm in support of the medical debt ordinance.</p> <p>Any Americans, Any Californians, and Any Angelinos can fall into the never ending cycle of medical debt induced poverty. On November 8th 2013, my husband Mike Lozano was riding his motorcycle from a grocery store and was hit by a car in front of Galleria at a four way intersection. The car that hit my husband made a sharp and immediate left turn into the Galleria mall, struck Mike, causing him to fly onto their hood, shattering their windshield with his head, and landing in the street. Needless to say, Mike was severely injured in the accident, fracturing his spine, dislocating his right shoulder, among other severe abrasions of arms and legs. At this time, Mike had a gap in his health coverage because he'd finished school and started a new job. So, he was taken to the LA County USC Hospital from the accident. Immediately, the medical bill from the three day stay at LA County USC Hospital was nearly \$10,000 including the ambulance, two different MRIs, CAT Scans, and X Rays. Despite the whopping \$10,000, the physicians at the County Hospital did not properly diagnose the severity of his neck injury, discharging him without good instructions. As pain increased, Mike got a second opinion at the Providence Saint Joseph Medical Center in Burbank due to his family's advocacy. Upon evaluation, the doctors were horrified at the improper diagnosis and ordered an emergency spinal fusion right away. Surgery was performed on November 22nd, 2013. After his stay at Saint Joseph Medical Center, he received a bill. It was a whopping \$147,000. Every 15 minutes in the surgical room cost \$4000; each MRI cost \$5000 and he needed five of them. Within 30 days after his accident, Mike had incurred a medical bill of \$204,000 he was responsible for. He was lucky though- the person who hit him had good insurance and it wasn't a hit-and-run. Many of us aren't so lucky. In LA county, the total medical debt burden is greater than 2.9 billion and it disproportionately affects people of color. A 2019 study found that close to 60% of all consumer bankruptcies involve medical bills.</p> <p>All of us are one car accident away and one paycheck away from the entrapment of medical debt due to our complete nonsensical healthcare system. We cannot "go-fund-me" our way out of this issue and this ordinance is the first step to take action. And you have the opportunity today to stand with the people of Los Angeles, not institutions or the private sector. Please support the medical debt ordinance.</p>

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51.		<b>Favor</b>	Robert Park	<p>My name is Robert Park from the American Cancer Society Cancer Action Network, and I am here to express our strong support for this ordinance. Tackling medical debt is a national priority for ACS CAN this year, and we are extremely proud that LA County is leading the way. Cancer patients, in particular, face significant financial challenges due to the high cost of treatments and associated care. Medical debt often forces these patients to delay necessary treatments and screenings, and struggle with basic necessities like food and housing. In a recent survey conducted of cancer patients and survivors, about 50% of those surveyed reported incurring medical debt in order to pay for their cancer care, and almost 100% of them had medical insurance. While a majority of cancer patients and survivors surveyed (63%) were aware that most hospitals and many other health providers have financial assistance programs, one-quarter (25%) were not. Just over a third of those surveyed (36%) were offered or applied for financial assistance and 68% of those successfully received it. Critically, among those who were not aware of assistance programs, 30% said they would have changed something about their cancer treatment if they had known.</p> <p>The benefits of this ordinance to cancer patients are profound. By bringing the much-needed transparency and accountability to the hospital debt collections process, we can protect patients from harassment and some of the harms of having medical debt, while also gaining important insights on the magnitude of medical debt in our state. Cancer patients must be allowed to focus on their health and recovery rather than being overwhelmed by debt. We urge the passing of this ordinance. Thank you.</p>
			Rodolfo Velasco	The Community Health Navigator program, has worked with impacted families, we screen them, enroll them, troubleshoot cases/working with State and DPSS, hospital billing, collection agencies, get retro coverage to pay medical debt, help with charity care applications.
			Selene Betancourt	
			Travis S West	Please see attachment.
		<b>Oppose</b>	Robert M Sausedo	
		<b>Item Total</b>	<b>18</b>	
<b>Grand Total</b>			<b>19</b>	