

April 23, 2024

MOTION BY SUPERVISOR JANICE HAHN

Support for Assembly Bill 2342 (Lowenthal) - Medi-Cal: Critical Access Hospitals: Islands

Catalina Island Health is the sole healthcare organization on Catalina Island. This hospital may be on a small island located 22 miles off the California mainland, but it has a vast influence when it comes to providing care. As the only hospital serving over 4,000 residents of Avalon and potential patients who visit the island annually, the hospital continues to evolve to meet the needs of the community. It is designated as a Critical Access Hospital (CAH) by the Centers for Medicare and Medicaid Services (CMS), which means it must meet specific geographic and certification requirements to receive cost-based reimbursement from CMS and Medi-Cal. The CAH designation was made available to geographically isolated and rural hospitals in 1997 to assure rural communities retain access to key health services, including inpatient and emergency room services.

Preserving the health and well-being of diverse and disproportionately burdened communities in Los Angeles County (County) is critically important for maintaining prevention practices and reducing health disparities across the region. Increasing access to care and improving delivery systems are vital for providing quality care for everyone in the County. Many of the patients who receive care at the island's hospital are low-income individuals that are enrolled in Medi-Cal. Much like many other hospitals within the state, Medi-Cal reimbursement rates do

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not meet the increasing costs of delivering care. This situation is exacerbated for Catalina Island because of their distance from the mainland coast.

Assembly Bill 2342 (Lowenthal) was introduced to maintain access to CAH on California's island. If approved, this bill would result in an annual supplemental payment for services covered under Medi-Cal for a CAH that operates on an island located 10 miles offshore of the mainland coast of California, but still within the jurisdiction of the state. This supplemental payment would benefit Catalina Island's hospital operations by furthering equitable and critical public health services for everyone. Without this supplemental funding source, the hospital on Catalina Island will continue to be overburdened by the widening difference in the cost of providing care and the reimbursement rates for treating the state's low-income population. This could result in the unfortunate circumstance of closure which would then shift all medical care delivered on the island to a limited number of fire and emergency services staff. The cost impact to the County and the state may rise into the tens of millions annually.

Closure of the sole hospital, emergency room, and primary care clinic on Catalina Island would be catastrophic for all who work, live, and visit. This acute care hospital addresses the urgent and long-term needs of the community, as well as strengthening the local public health infrastructure. It works with their community partners to develop and deploy programs that advance health and wellness. Patients and communities rely on the wide range of critical health care services that only hospitals can provide, including 24/7 emergency and higher-acuity care, swing beds, physical and occupational therapy, laboratory, radiology, detached retail pharmacy,

social services, mental health services, and visiting physician specialty clinics. Hospitals and health care workers have stood strong for their communities, and they have a vital role in our society to keep communities healthy. Assembly Bill 2342 would add Medi-Cal supplemental funding sources for critical access hospitals that operate on an island therefore protect the County's most vulnerable residents by keeping healthcare accessible.

I, THEREFORE, MOVE that the Board of Supervisors direct the Chief Executive Office's Legislative Affairs and Intergovernmental Relations branch to support Assembly Bill 2342 (Lowenthal).

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