



Overview of Measure A

Essential Health Care Services Initiative

Background on Measure A

On March 2, 2004, seventy-one percent (71%) of county voters passed Measure A, the essential health care services tax ordinance, which imposed a one-half percent retail transactions and use tax to provide “additional financial support for emergency medical, hospital inpatient, outpatient, public health, mental health and substance abuse services to indigent, low-income and uninsured adults, children and families, seniors and other residents of Alameda County.”

Each year, 75% of the tax revenue is transferred to the Alameda Health System (dba Alameda County Medical Center) and the remaining 25% of revenue is allocated by the Board of Supervisors based on the demonstrated need and the County’s commitment to a geographically dispersed network of providers for:

- 1) Critical medical services provided by community-based health care providers;
- 2) To partially offset uncompensated care costs for emergency care and related hospital admissions; and
- 3) For essential public health, mental health and substance abuse services.

Since 2004, the Board of Supervisors has approved the allocations for the 25% portion of the Measure A revenue for 1, 2, and 3-year terms. Following approval, the Health Care Services Agency (HCSA) oversees the administration the funds, which include the base allocations, allocations from the Board discretionary funds and additional one-time allocations authorized after the approved budget. Measure A sunsets on June 30, 2019.

Measure A General Criteria

1. Grants shall be approved for three fiscal years unless otherwise specified or adjusted by the Board.
2. Funds distributed should reflect the geographic and cultural diversity of the County and services should be provided in the most geographically accessible manner possible.
3. Funds must be spent according to the priority populations, specifically indigent, low-income and uninsured adults, children and families, and seniors.
4. Funds should be distributed according to administrative protocols or systems and to existing safety net providers to minimize administrative costs and duplicate processes.
5. Funds should be used to promote coordination among providers and an integrated approach to the delivery of services.

Citizen Oversight Committee & Measure A Report

The ordinance established a Citizen Oversight Committee, which consists of 17 Board-appointed members, to annually review the expenditures for the prior year and report to the Board on the conformity of the expenditures to the ordinance. The Committee develops, publishes and presents a final report, based on individual reports submitted by fund recipients at the end of each year, to the Board of Supervisors.

For more information, contact James Nguyen at James.Nguyen@acgov.org or (510) 618-2016 and/or visit <http://www.acgov.org/health/indigent/measureA.htm>.