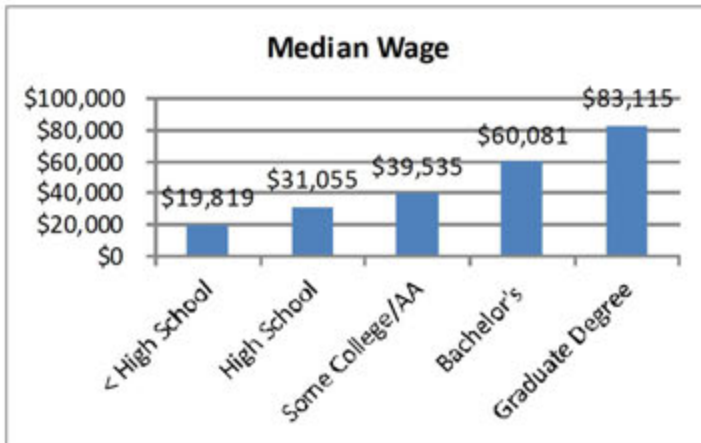


Adults

More than 1 million people ages 18-64 live in Alameda County, representing two-thirds of the population. Of these, 155,825 (13%) did not graduate high school; 228,667 (19%) obtained a high school degree; 355,118 (29%) finished an AA or some college; and 473,077 (39%) received a Bachelor's or Graduate degree. These numbers are important because there is a direct correlation between educational and economic attainment. The following chart shows median wages in Alameda County by educational attainment.



We can look at poverty and see the same corollary. The poverty rate for Alameda County adults with less than a high school degree is 23%, for high school graduates it's 15%, with some college it's 10%, with a Bachelor's degree or greater, the poverty rate is 5%. This compares to an overall adult poverty rate of 12%.

Employment is less of an indicator of poverty. More than 44,000 work-aged adults in Alameda County are employed and earn less than the federal poverty level. These working adults represent 64% of the local labor market (adults working or actively seeking work) earning below the federal poverty level, compared to 36% who are unemployed.

Looking Forward

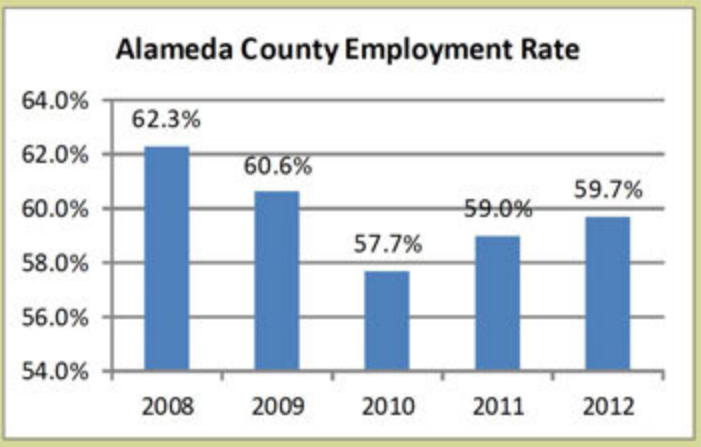
While Alameda County unemployment figures are better than the State overall, and while the number continues to drop since the peak of the Great Recession, unemployment rates are still considerably higher than the norm before 2007. More research is needed to learn what happens to people who have left the work force and no longer qualify for assistance.



Employment in Alameda County

To offset massive job losses during the Great Recession, the federal government extended unemployment benefits from a maximum of 26 weeks to 99 weeks. In spite of this extension, more than 37,000 Alameda County residents exhausted unemployment benefits in the last three years. In 2014, the federal government eliminated long-term unemployment benefits. This is particularly concerning because a recent Princeton study (Krueger) determined that only 11% of people unemployed for more than six months since 2008 returned to permanent full-time employment.

As people leave the labor market, unemployment rates drop, but this drop does not necessarily reflect a healthy employment picture. The chart below shows the **employment rate** for Alameda County since 2008, not counting unemployed, retired, and others who have left the workforce.



Health Care Reform

Access to Health Care

Most people need some form of health insurance coverage. Obtaining health insurance outside of employer-sponsored coverage can be a significant challenge for people, and many do not enroll. This is particularly true for low-income individuals seeking to enroll in publicly funded programs like Medi-Cal. Through the Affordable Care Act (ACA) and Medicaid expansion, nearly 60,000 Alameda County residents are newly eligible for Medi-Cal. Approximately 42,000 automatically transitioned to Medi-Cal on January 1, 2014 as a result of an aggressive enrollment in the Low Income Health Program in Alameda County.

Individuals who are newly enrolled in private insurance through Covered California will now have access to three plans in Alameda County: Anthem Blue Cross, Blue Shield, and Kaiser. Some Covered California plans have smaller networks than other plans for cost containment reasons, but enrolled individuals now have access to care that was not previously available.

Funding Reductions

Providers who were previously providing services for this uninsured population will now benefit by receiving Medi-Cal payments for their services. However, other budget changes will counteract this additional funding:

A Decrease in Medi-Cal Payments. California has the lowest Medicaid reimbursement rate in the country. On top of that, in 2011, AB 97 established a 10% rate cut for doctors and clinics. The rate cuts went into effect this January. Some relief to providers comes from the proposed State budget which removed retroactive recoupment. Also, ACA protects rates to primary care doctors for two years, although the protection does not apply to specialists. A new bill, AB 1805, proposes to reinstitute the pre-2011 rates.

Loss of 1991 Realignment Funding. As part of the 2013-14 State budget, the State developed a mechanism to permanently take back 1991 realignment funding for indigent health. This reduction in funding gives counties less flexibility to serve the remaining uninsured.

Human Impacts in Alameda County

We anticipate that Alameda County will have approximately 100,000 remaining uninsured under 200% of the Federal Poverty Level. The remaining uninsured include people who are undocumented, eligible for Medi-Cal but not enrolled, and eligible for a subsidy through Covered California but not enrolled.

The uninsured and those enrolled in Medi-Cal still often struggle to get the services they need. Low Medi-Cal reimbursement rates for providers as well as geographic, language, cultural, and other barriers limit access to care. The quality of services provided to low-income Medi-Cal beneficiaries sometimes suffers due to the fragmented nature of care and access issues, particularly access to specialty care.

Low provider reimbursement rates result in fewer providers willing to provide care to Medi-Cal beneficiaries. Additional rate cuts will result in even fewer providers taking on new Medi-Cal patients at a time when the number is increasing. This problem is exacerbated for specialty providers where there are already very long wait times. The loss of funding for the uninsured and cuts to Medi-Cal leave clinics who were seeing a high proportion of Medi-Cal and uninsured patients in a precarious financial situation. The loss of safety net providers will increase access problems for low-income residents.

Looking Ahead

The County is committed to increasing access to health care to improve health outcomes for its residents. New and innovative approaches to providing primary and behavioral health services will be key, as well as longer-term investments in worker training to ensure a culturally diverse, competent workforce at all levels of care. Alameda County will continue to invest in the safety net to encourage delivery system reforms such as community delivery sites, incentives to contract partners to shift to team-based care, and support for partners to increase capacity through practices that use other staff, not just physicians and nurse practitioners, to increase access.



Medi-Cal & Health Care Reform



Medi-Cal Expansion

Medi-Cal is California's **health insurance program** for low-income children, families, seniors, and persons with disabilities. Beginning January 2014, California **expanded Medi-Cal to include low-income (below 138% of federal poverty) childless adults**. In Alameda County, it is projected that **nearly 60,000 individuals are newly eligible and will now be able to access health coverage**.

What is the ACA?

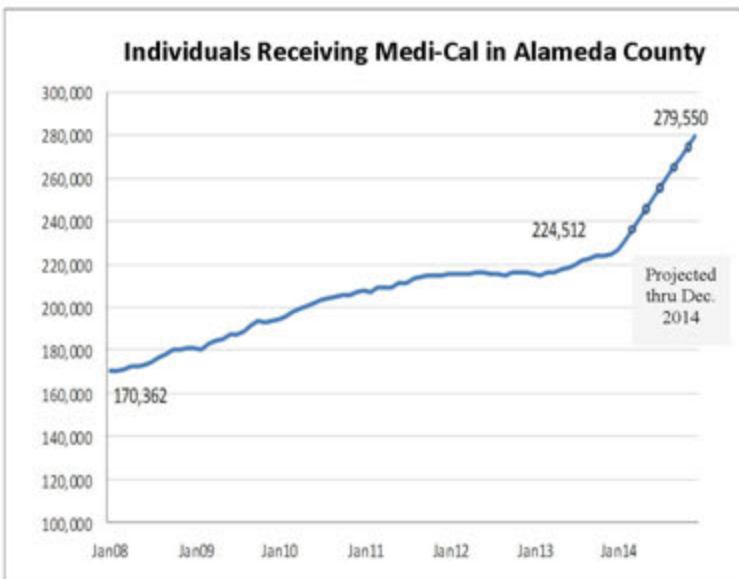
The Patient Protection and Affordable Care Act (ACA), also known as "Obamacare," is comprehensive federal health care reform legislation that passed in 2010. The ACA gave states the option to expand Medicaid (Medi-Cal in California) to cover more low-income individuals. The ACA expands coverage and improves affordability in California by allowing the state to increase what services are covered, providing funding to expand eligibility, and establishing a health insurance marketplace (the Exchange, **Covered California**) that gives California residents greater ability to choose the health care plan that best suits their needs. **California residents between 138% and 400% of federal poverty could be eligible for federal subsidies through the Exchange to help offset their health care costs.**

Looking Forward

Alameda County Social Services Agency (SSA) connects individuals and families to health coverage through the Exchange and enrolls those eligible into Medi-Cal. Through outreach, community education, enrollment, and retention activities, Alameda County strives to **improve both access to health care and the general health of individuals and families**. SSA is working in close partnership with public and community partners to ensure the success of health care reform in Alameda County and to **connect Medi-Cal recipients to other benefits**, such as CalFresh (Food Stamps). In addition, the State created Express Lane Eligibility to connect CalFresh clients to health care benefits without the need to fill out extensive paperwork. The ACA is a historic opportunity to enroll California residents in the range of public benefits for which they are eligible.

Human Impacts

The number of Alameda County residents receiving Medi-Cal has grown exponentially over the past year and will continue to rise in 2014. In 2013, approximately 22,000 children were transitioned from the Healthy Families program to Medi-Cal. In 2014, around 55,000 individuals are expected to enroll in Medi-Cal; however, current applications at the state and local level are **outpacing original projections**. Alameda County Health Care Services Agency (HCSA) and SSA have been working closely together to oversee the transfer of around **43,000 individuals into Medi-Cal from the Low Income Health Program (LIHP)**. In addition, as part of a **"no wrong door" approach**, individuals have been applying on their own, through the aid of a Certified Enrollment Entity, and with the assistance of SSA staff through Benefits CalWIN, in-person services, and a new Customer Service Call Center with Covered California.



You can apply for Medi-Cal any time of the year at www.MyBenefitsCalWin.org

Next Open Enrollment for Covered California: October 15—December 7, 2014

Enroll during these dates for a January 1, 2015 start date! Visit www.CoveredCA.org for more information.

Clients eligible for Medi-Cal can apply at any time and are not limited by the open enrollment dates.

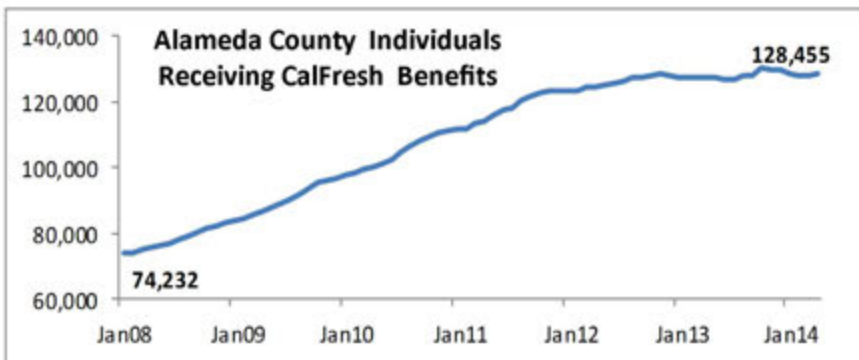
CalFresh

CalFresh

CalFresh is California's food stamp program [Supplemental Nutrition Assistance Program (SNAP) at the federal level], which provides assistance for low-income households to purchase nutritious food. When the national economy or a regional, state, or local economy is in trouble, CalFresh is among the most effective government responses.

Funding Cuts

The 2014 federal Farm Bill passed in February and cut \$8.6 billion from SNAP. At this time, it looks like California will take action to avoid any benefit cuts for local families from the new Farm Bill provisions. However, on November 1, 2013, **all SNAP recipients across the country saw a reduction in their monthly benefits** to purchase food due to the sunset of an American Recovery and Reinvestment Act (ARRA) provision that had increased food stamp benefits. Locally, the cuts impacted over 128,000 individuals who rely on CalFresh. Reductions in food stamp benefits mean that County residents, including children and seniors, are at greater risk of food insecurity and hunger.



Looking Forward

CalFresh enrollment in Alameda County has increased significantly during the economic downturn. However, new estimates suggest that there are still over 61,000 eligible individuals who are not enrolled in the program. Recent State policy changes and local efforts have focused on making it easier for eligible individuals and families to utilize this critical nutrition support. Increasing CalFresh enrollment is good for local residents and the economy; research from USDA finds that every dollar of SNAP benefits distributed results in \$1.84 in gains for local economies. The ARRA cuts and new restrictions on advertising and outreach included in the 2014 Farm Bill make it even harder to reach eligible but unenrolled individuals and families, and mean less federal money coming into the State and Alameda County.

Melinda's Story

Melinda is a 36 year old mother of two boys, 19 and 4 years old. Melinda once owned a coffee business, but had to sell it in 2012 due to the economic downturn, and has been unable to find steady employment since. She receives no support from her children's father, as he is unemployed as well. For the past two years, she and her two children have been living off her savings and profits from the business sale. Melinda states *"Our lives changed drastically. We had to move because I could no longer afford the rent where we were living. We basically became vegetarians because I could not afford to buy meat."* Melinda currently works part time, earning \$800 a month. Her household expenses, including rent and utilities, are \$650, leaving her family \$150 for food and other necessities. Melinda heard about the CalFresh program by way of a mailer from the Alameda County Community Food Bank, inviting Medi-Cal recipients to apply for CalFresh. Melinda and her family now receive \$337 in CalFresh benefits each month. Melinda states; *"We are very grateful for this program. I am not looking to live in luxury, but just want the basics – to be able to feed my family."*



Human Impacts

In Alameda County, one in three children face the threat of hunger every day. The ARRA cuts resulted in a **loss of around \$10 in CalFresh benefits per person each month, or \$29 for a family of three**. To put this cut in perspective, it means a loss of around **16 meals each month** for a family of three (based on calculations using \$1.70 to \$2 per meal provided in the Thrifty Food Plan). On an annual basis, that same family of three will have **\$348 dollars less to spend on food**. These cuts also impact our local economy and will result in an estimated annual loss of **more than \$12 million in local benefits**.