## Comments, Healthy CA for All Environmental Analysis, October 2020

We are pleased to see that the Healthy California for All Commission's report, An Environmental Analysis of Health Care Delivery, Coverage, and Financing in California, leads with a section on Equity and Community Health, noting early on that, "...medical services are estimated to affect only 10 to 20 percent of modifiable health outcomes. The remainder results from the social determinants of health..." (pg 12). The report further makes the case for investing in the social determinants noting that, "When the Commission considers ways to improve health care in California, it will be important to consider the barriers to health equity that exist today and ensure that proposed solutions lessen those barriers." (pg 9)

As advocates for health equity and sustained investment in addressing the social determinants of health, we couldn't agree more.

We believe it is essential that the report's vision for financing of California's health care system include strategic, sustained investments in community-based prevention and health equity. Just as the Affordable Care Act envisioned the Prevention and Public Health Fund, California needs to have dedicated funding for organizations to implement community-based prevention programs and policy/system/environmental change strategies that create healthier communities for all.

A mere \$10/capita/year invested in community-based programs to address the social determinants of health would represent just 1/1000th of what California spent on health care in 2018. Such an investment could create a State Wellness Trust that would allocate funds to local health departments and nonprofit organizations in every California county, with funds earmarked to implement and scale up effective policies and programs that work primarily outside of health care settings to reduce the underlying causes of preventable illness and injury. Interventions would be shaped by epidemiologic data and community

priorities to close gaps in health outcomes and inequities, including, but not limited to, evidence-based and pilot interventions that:

- Promote healthy eating and food environments
- Increase access to safe physical activity
- Prevent childhood trauma
- Improve neighborhood safety and reduce substance abuse
- Support aging with independence and dignity
- Promote youth leadership and development

State Wellness "Trusts" or Funds are a proven model. Through sustained investment in prevention, Massachusetts, Minnesota, and Oklahoma have demonstrated concrete improvements in community health such as: a reduction of smoking among teens, increased access to healthy food and physical activity for students, a decrease in soda consumption, decreases in senior falls and associated hospitalizations, and more. You can read about models for State Wellness Trusts and their successes here: <a href="http://bit.ly/StateWellnessFunds">http://bit.ly/StateWellnessFunds</a>. See here for a model of how we could create a State Wellness Trust in California. <a href="https://www.ca-allianceforpreventionfunding.org/california-wellness-trust-proposal">https://www.ca-allianceforpreventionfunding.org/california-wellness-trust-proposal</a>

In addition, the Commission's report states that, "frequent transitions in coverage reduce the rewards to health systems to invest in prevention..." (pg 31). For that reason, the creation of a pooled funding stream for upstream intervention, that is not dependent on a resident's health insurance on any given day, is essential. Health systems stand to save by investing in community-based prevention strategies that impact all residents in their catchment areas. Just one example - one-third of California young adults have prediabetes, with disproportionately high rates among Latino, Pacific Islander, American Indian, African-American, and multiracial Californians.

(<a href="https://healthpolicy.ucla.edu/publications/Documents/PDF/2016/prediabetes-brief-mar2016.pdf">https://healthpolicy.ucla.edu/publications/Documents/PDF/2016/prediabetes-brief-mar2016.pdf</a>.) Proven community-based strategies can help prevent prediabetes from turning into chronic diabetes, which has a high price tag for any health system that a resident may transition into, from employer-based insurance to Medicare, in addition to high costs in quality and length of life for vulnerable populations.

Finally, there are frequent references to "fragmented financing" of health care throughout the report. We suggest that the vision of fixing "fragmented financing" be expanded to include community-based strategies that prevent health inequities. Local health departments and nonprofits across California can attest to the impact that restrictive, insufficient, sporadic grant funding has on their ability to initiate programs that address unmet local needs and to sustain programs that are showing success in promoting health equity and keeping people healthier.

## Conclusion - Forty Million Reasons Why

We are encouraged that the report mentions "increasing health equity and improving quality" as the first example of topics to be discussed as the Commission develops its second report with key design considerations for a unified financing system (pg 83). Sustained investment of new dollars to create healthier community conditions will increase health equity, contain health care costs, and improve the health status of all Californians. Without changing how we invest to build health, we can't expect health inequities to change.

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The following had additional comments to share:

Lynda Barbour, Government Relations Director <a href="mailto:Lynda.barbour@cancer.org">Lynda.barbour@cancer.org</a>

La Mesa, CA 91942

Comments: As a Public Health professional, I see the impact of the social determinants of health and lack of investment in prevention efforts. With the weakening of the Affordable Care Act and removal of Prevention Funding from healthcare reform I urge you to act boldly and reinvest in prevention efforts; this is a cost -effective way to reduce health care costs and reduce chronic disease for Californians.

Flojaune Cofer, Senior Director of Policy Public Health Advocates

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Davis, CA 95617

Comments: Public Health Advocates strongly supports a heavy investment in prevention as a means to improving health statewide; equitably prioritizing these investments will help to address the systemic racism and institutionalized neglect that undergird the disparities in poor health and outcomes among Californians.

Claudia G Corchado, Program Manager <a href="mailto:claudia@unitedwaymerced.org">claudia@unitedwaymerced.org</a>

Merced, CA 95340

Comments: Investing in prevention programs such as joint use efforts, safe parks, access to healthy food, healthy foods in schools and safe places for physical activity is the only way to help support families in low income communities be and stay healthy. Every family wants their children to be healthy and to thrive in their community, however; inequities, poverty, gangs, violence, drugs, alcohol and lack of civi engagement prevents them from thriving to their healthiest potential. It is why programs that support prevention services gives families a fighting change to live a long and healthy life.

Courtney Huff, Research Consultant <a href="mailto:courtcorle@gmail.com">courtcorle@gmail.com</a>

San Diego, CA 92129

Comments: Let's focus on prevention and address social determinants of health!!

Lynn Kersey, Executive Director lynnk@mchaccess.org

Los Angeles, CA 90017

Comments: California has already led the way with matching state dollars with federal for pregnant women under Medi-Cal. The Comprehensive Perinatal Services Program addresses family and community violence, food insecurity and obesity, environmental contaminants, smoking, trauma, and so much more. Children and then

adults could follow with a similar evidence-based program. Please add SDOH to the components of health most likely to make an individual and societal difference. Thank you for your work.

Maryjane Puffer, Executive Director maryjane@thelatrust.org

Los Angeles, CA 90017

Comments: There are huge bodies of data supporting prevention and early intervention as strategies to avoid escalating health care costs, emergency room visits, and what could have been 'avoided' hospitalizations. I am particularly advocating for school-based health services and youth health leadership programs, both of which can reduce long term costs.

Victoria Ramirez, Director of Policy and Communications
The Health Trust
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Comments: The Health Trust's mission is to build health equity health and we fully support sustained investment in addressing the social determinants of health through a State Wellness Fund.

Brenda Simmons, CEO/President bsimmons@publicstrategies.org

San Diego, CA 92108

Comments: This is the most cost effective way to create healthier communities in California, which should be a top priority of every legislator.

Janedra Sykes, Consultant Arboreta Group <u>janedra@arboretagroup.com</u>

San Diego, CA 92117

Comments: The analysis is solid and changes the game.