

Thriving Immigrant Initiative: An Innovative Partnership between Santa Cruz County Human Services Department, Employment and Benefits Services Division, and Community Action Board of Santa Cruz County

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EXECUTIVE SUMMARY

On January 1, 2024, California expanded Medi-Cal to provide health care to all low-income residents, regardless of their immigration status. This latest expansion provides healthcare access to the largest group of uninsured people across California: adults aged 26-49. Access to Medi-Cal is a crucial first step, but the next step is reaching the newly eligible. Santa Cruz Human Services Department (SCHSD), like Marin County Health and Human Services (MCHHS), has collaborated with community-based organizations to connect people to services, but SCHSD has taken this collaborative approach to a higher level. On September 1, 2023, SCHSD expanded the outreach and engagement contract it had with the Community Action Board of Santa Cruz County, Inc. (CAB) to include Medi-Cal application assistance and retention support to Spanish and Indigenous language-speaking immigrants in Santa Cruz County. The expanded contract also supports policy and advocacy work, acknowledging the important role of bicultural, bilingual partners in connecting immigrant communities to services and informing policy and legislation.

This report will discuss the Medi-Cal expansion, barriers experienced by newly eligible immigrants, and the innovative way SCHSD and CAB are partnering to better serve the immigrant communities in Santa Cruz County. Also included is a look at the CalAIM Medi-Cal supported services—Enhanced Case Management and Community Supports—and the possibility of leveraging the funding available through State funded Medi-Cal to sustainably support the important work of connecting immigrant communities to Medi-Cal services.

Introduction

Santa Cruz Human Services Department's (SCHSD) commitment to building a healthier, stronger, more united community led to an innovative collaboration that began in 2020 to address the stressors, confusion, and health disparities brought on by the Public Charge Rule and the COVID-19 pandemic. The *Thriving Immigrant Initiative (TII)* is a partnership between Santa Cruz County Human Services Department (SCHSD), Employment and Benefits Services Division (EBSD), and local non-profit Community Action Board of Santa Cruz County, Inc. (CAB). CAB's mission is to eliminate poverty and create social change through advocacy and essential services. Through the TII, CAB strives to ensure all immigrants thrive in community regardless of documentation status. CAB educates the community about the public charge rule, but beyond that, it has presence in the immigrant community, building a trusting relationship and ensuring immigrants are not left in the shadows. CAB, with 59 years of experience, is a diverse organization with a bilingual, bicultural board and staff. The staff speak multiple languages, including English, Spanish, Mixteco and Triqui, representing the immigrant communities in Santa Cruz County.

The success of the 2020 collaboration has led to an expansion of services. The expansion was funded by a one-time injection of funds from the Medi-Cal allocation to support the COVID unwinding activities and the Medi-Cal expansion. In FY 2023-2024, the partnership with CAB-TII is growing to include Medi-Cal benefits enrollment (application assistance) and retention (annual renewal assistance) while also educating the community about newly expanded Medi-Cal benefits. The

final stage of the Medi-Cal expansion took effect on January 1, 2024, expanding coverage to immigrants ages 26-49, the largest immigrant group to become eligible (CA.gov, 2023).

Background

The final Medi-Cal expansion to include immigrants ages 26-49 regardless of their immigration status is continuing to change the health and wellness reality for low-income undocumented immigrants in California. All undocumented Californians who qualify as low-income are eligible for full-scope Medi-Cal. These changes to California's Medi-Cal program took many years. 2024 is the final stage in this expansion, with all low-income immigrants across the age span able to apply for Medi-Cal health benefits.

The expansion of Medi-Cal to low-income immigrants who were previously ineligible is a move towards health equity, addressing disparities that have long affected marginalized communities. According to a representative survey of the healthcare experiences of U.S. immigrants, "health insurance coverage makes a difference in whether and when people get necessary medical care, where they get their care, and ultimately how healthy they are" (Schumacher et al., 2023). The health of our communities depends on the health of our workforce. Providing Medi-Cal for the state's low-income immigrant workforce acknowledges the reality that many immigrants, regardless of their legal status, contribute to the state's economy through taxes and labor. While there are concerns about the financial implications of such a large-scale expansion, especially considering California's budget deficit, proponents argue that the long-term savings and societal benefits justify the investment.

The cost of expanding access to Medi-Cal health coverage is borne by the state and is estimated to cost California \$2.1 billion in General Funds on an ongoing basis. This will be expected to increase as healthcare costs increase over time (*Estimated Cost*, 2021).

Community Demographics

Santa Cruz and Marin Counties are home to hundreds of immigrant hospitality and agricultural workers whose wages are below the federal poverty level. In 2023, Santa Cruz County’s population was 261,554, and 33% were Medi-Cal recipients. Of Santa Cruz Medi-Cal recipients, 62% were between ages 18-64, and 55% of this group were Hispanic. In 2023, Marin County’s population was 254,207, and 23.3% were Medi-Cal recipients. Of Marin Medi-Cal recipients, 62% were between ages 19-64, and of this group, 52% were Hispanic (*Month of Eligibility*, 2024). The demographics between Santa Cruz and Marin are strikingly similar for Medi-Cal recipients. These numbers clearly outline the need to provide focused outreach and support to non-English-speaking community members. Not captured in these numbers are the individuals and families who face barriers to accessing Medi-Cal including language, fear of deportation, lack of information about complex programs, and system navigation issues.

The 2019 Public Charge Rule increased fear of deportation among the immigrant workforce that depended on public benefits to meet basic needs, causing many to terminate their health and nutrition benefits. Then the 2020 COVID-19 pandemic brought work stoppages, layoffs, and hospitality shutdowns, causing extreme financial stress for immigrant workers. Cuts to immigrant family incomes combined with

fear-driven termination of their health and nutrition benefits caused many families to face difficult choices such as whether to pay rent, buy food, pay the utility bill, or go to the doctor.

The overview provided by the demographics in the table below shows similarities between Santa Cruz County and Marin County populations.

County Demographics		
	Santa Cruz	Marin
2023 Population	261,554	254,207
2022 Median Income	104,409	\$142,019
2023 Percentage in Poverty	12.50%	7.70%
Unemployment Rate	5.70%	3.30%

Source: U.S. Census Bureau

There are more particular similarities between Watsonville and West Marin—both agricultural communities that depend on immigrant agricultural workers, many of whom are undocumented. These two counties share similar challenges such as workforce/agricultural housing with unsafe and unhealthy conditions.

Apart from county-wide data, it is also important to acknowledge the differences between Watsonville and West Marin. West Marin is the community that is being evaluated for a potential initiative that draws from the success of CAB-TII. Watsonville is home to the CAB main office, where the core TII services are located and reaches from the north coast in Davenport to Watsonville in south Santa Cruz County. The starkest differences between

Watsonville and West Marin are in their geography and populations (see table below). Watsonville is dense and urban while West Marin is rural and dispersed. These differences will require tailored approaches to reach potential clients. While CAB-TII has bridged language and cultural challenges, West Marin will also need to navigate the geographic challenges of a more isolated population.

Community Demographics		
	Watsonville	West Marin (Northwest Marin CCD+ Bolinas CCD)
Population	52,457	10,914
Land Area	6.8 sq. mi.	360.9 sq. mi.

Source: U.S. Census Bureau

Mission and Practice

CAB-TII's approach addresses the barriers to accessing Medi-Cal benefits, but also creates trusting relationships within immigrant communities, allowing CAB to share a broad range of information about services and supports available to the undocumented immigrant community members. CalFresh, CalWORKs, and community-based services and supports are all part of the information shared during the Medi-Cal enrollment process. CAB uses social media, texts, video clips in various languages, Cafecito events, visits to agricultural worksites, and bi-lingual flyers to disseminate information. This wide-ranging outreach is intended to meet community members where they are, decreasing barriers. This is an example of meeting people where they are in the least restrictive way.

Timeline and Program Outcomes

In September 2023, the Santa Cruz Board of Supervisors approved the expansion of TII from education & outreach to application support and enrollment. By December 1st, CAB had hired and trained a team of five bilingual/bicultural Spanish-speaking staff and one trilingual/bicultural Mixteco speaker. By the mid-year report, the TII team had completed 36 education and outreach events, reaching 1,360 Spanish/Indigenous language-speaking immigrant community members. Scheduling appointments by phone and in person resulted in the support and prescreening of 268 individuals. Of that group, 54 newly eligible Spanish/Indigenous language speaking-immigrant community members filled out Medi-Cal applications. The CAB Medi-Cal outreach team has done an amazing job. Looking into the next quarter, which will be the first six months of the final Medi-Cal expansion, CAB will leverage the trust it has built with immigrant communities to support those newly eligible to enroll in Medi-Cal.

Leveraging Successful Program Elements

Santa Cruz has faced increasing floods and other emergency events due to climate change. CAB has leveraged connections and communication links to share disaster preparedness information, provide messaging during a disaster, and share information about cleanup. After the recent floods, CAB played a pivotal role in the recovery effort by distributing over 10 million dollars of economic relief to undocumented individuals impacted by the floods. In the future, these communication and support methods can be used during earthquakes, fires, pandemics, immigration enforcement, and other emergencies.

With the changing political conditions, the rapport and trust built by CAB will become even more important for community members. As policies change, CAB is in a unique position to message changes that affect Santa Cruz's immigrant population. CAB is also an important conduit at a policy level by bringing in the voices of the undocumented community to influence policy. The leadership demonstrated by SCHSD in contracting with CAB to provide systems change represents a deep understanding of the needs of our undocumented neighbors and an understanding of how politics and policy affect our communities.

Program Challenges

Acknowledging the amazing work being done by SCHSD and CAB, issues persist. These include staff turnover, long wait times for Medi-Cal approval, lack of information sharing between government agencies and CBOs, and funding sustainability. The funding CAB has received is a one-time-only infusion of funding, meriting concerns about the sustainability of this innovative approach to supporting undocumented community members.

Can CalAIM Provide Sustainable Funding?

A potential solution to funding sustainability is the California Advancing and Innovating Medi-Cal (CalAIM) expansion of Medi-Cal-funded services. This expansion could channel Medi-Cal funding to community-based organizations supporting programs like the TII. CalAIM is a complex initiative, and some counties and non-profits have jumped right into implementing CalAIM services, but many others are in discussion. Santa Cruz County is well on its way to implementing CalAIM.

The early adopters of CalAIM were surveyed by the California Health Care Foundation (CHCF) in a rapid six week survey in Summer 2023. It included 1,196 people working at managed care plans, behavioral health organizations, community-based organizations, social services organizations, and others referred to collectively as "implementers" (Goodwin Simon Strategic Research, 2023). Based on this statewide survey, CHCF released five regional reports. The data below is for the Bay Area CalAIM early implementers, representing Alameda, Contra Costa, Lake, Marin, Mendocino, Napa, San Francisco, San Mateo, Santa Clara, Santa Cruz, Sonoma, and Yolo Counties.

Below are key findings from 2023:

- Just over half of respondents (51%) said that access to services has gotten better under CalAIM.
- Views of the effectiveness of CalAIM implementation ranged from 33% in Alameda County to 61% in Santa Cruz County.
- Nearly six in 10 respondents (58%) were confident that CalAIM-related processes will become more effective over time, but they wanted to see those changes in less than a year (Goodwin Simon Strategic Research, 2023).

Along with the enthusiasm for implementing CalAIM, there needs to be a cross-sector education effort to increase the understanding of CalAIM and its elements among service partners. "There is a lot of room to increase familiarity with CalAIM — even among those who serve a high percentage of patients, clients, or members enrolled in Medi-Cal. Among those who report that more than 75 percent of their patients are enrolled in Medi-Cal, 16 percent say they are not at all familiar with CalAIM,

and 14 percent say they are only a little familiar” (Raths, 2024).

CAB’s Executive Director MariaElena De La Garza shared that discussions are happening about how to implement the CalAIM Enhanced Case Management (ECM) and Community Supports through SCHSD and CAB. CalAIM has many parts, but ECM and Community Supports fit best for CBOs. CAB is already a trusted provider of Medi-Cal benefits education, engagement, outreach, and application and retention support. Agencies can offer a package of ECM and Community Supports that best fit the services already being provided or expand to provide the services needed to support the agencies’ target population. Collaborations like the one demonstrated between SCHSD and CAB can serve as the beginning of bringing the CalAIM ECM and Community Supports to our underserved populations, supporting healthier families, a healthier workforce, and healthier communities.

Like Santa Cruz and CAB, West Marin Health and Human Services (West Marin HHS) and West Marin non-profit community providers are in early discussions about how to implement CalAIM in West Marin. In Central Marin, County Behavioral Health and Recovery Services (BHRS) is establishing an ECM program to serve clients with complex mental health needs. Community-based non-profits are contracting directly with Partnership HealthPlan, Marin’s managed care plan, to provide ECM and Community Supports to specific populations. Marin County Whole Person Care has contracted with Partnership HealthPlan to provide Community Supports in collaboration with community providers serving the unhoused population. Marin Center for Independent Living (MarinCIL) will serve people with

disabilities with ECM and Community Supports.

Recommendations for West Marin

Understanding the service landscape

West Marin HHS has exceptional working relationships with the non-profits serving the communities in West Marin. This is an asset when designing and implementing programs to address the needs of these communities. Marin County is focused on serving underserved populations, immigrants, and older adults in West Marin. Two agencies are specifically focused on serving these groups: West Marin Community Services (WMCS) and West Marin Senior Services (WMSS). When considering CalAIM services to support underserved communities in West Marin, these are the two agencies best suited to partner with West Marin HHS. To gauge and evaluate the work currently being done by West Marin HHS and Community Partners, an agency survey should be conducted to determine the current services being offered that match or closely resemble ECM or Community Supports. The survey should also determine the number of clients receiving services from each agency and the staffing levels for each agency. The survey would help determine who would be the best provider to take on what part of the CalAIM set of services.

West Marin Pilot

Assuming that agencies are willing to partner and the survey results show an achievable economy of scale, then a partnership and program framework would need to be developed. Some of the different approaches needed in West Marin may include mobile outreach, community-based tabling, and other outreach methods to

bridge the distance between the service center and potential clients.

The program framework should include: a training plan, the number of clients intended to be served, staffing levels, documentation requirements and tools needed, billing processes, and data needed to demonstrate outcomes. For program tracking and billing, a review of available tools like Sprite Health could determine if a purchased tool would provide the best approach. Using existing staff and adding temporary hires could balance the initial staffing costs for the pilot. Using and improving client ROIs and data gathering and sharing will be essential. This may include supporting community providers' capacity development to track and report data. Data accuracy will be critical to assessing the success of this pilot. Piloting the CalAIM ECM and Community Supports in West Marin offers an opportunity to test program viability, strengthen partnerships, and make necessary program adjustments. There are limited options for solving this problem within a pilot, and this will remain an ongoing barrier and an opportunity to collaborate with other organizations with a housing focus should be part of the pilot.

A Pilot Focused on West Marin Immigrant Families

In West Marin, many immigrant workforce families live in conditions that meet the CalAIM definition of homeless. Some West Marin immigrant families live on private property in animal sheds, storage containers, and other non-habitable structures. Without a verified count of individuals living in these conditions across the 360.9 sq. mi. of West Marin, we can only estimate a target population of 300+ individuals based on information shared by WMCS, who work with the residents from the private property

homeless encampments. Given these possible numbers and the ECM eligibility criteria, a pilot targeting these community members would present a viable number of clients for billing MediCal for ECM services.

Conclusion

The enthusiasm shown by the providers surveyed in 2023 shows that 51% feel that access to services has gotten better under CalAIM. Marin should move forward with a West Marin pilot using DHCS PATH funding to develop capacity and infrastructure. Marin County will need to leverage the existing collaborative relationships between West Marin HHS and WMCS to develop a CalAIM pilot program to address the particular needs of the immigrant communities in West Marin.

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