Your Community Impact Statement has been successfully submitted to City Council and Committees.

If you have questions and/or concerns, please contact the Department of Neighborhood Empowerment at NCSupport@lacity.org.

This is an automated response, please do not reply to this email.

Contact Information

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The Board approved this CIS by a vote of: Yea(10) Nay(0) Abstain(0) Ineligible(0) Recusal(0)

Date of NC Board Action: 04/28/2021

Type of NC Board Action: For

Impact Information Date: 04/29/2021

Update to a Previous Input: No

Directed To: City Council and Committees

Council File Number: 21-0002-S83

Agenda Date: Item Number:

Summary: The Boyle Heights Neighborhood Council supports the Motionfor the City of Los Angeles to adopt a resolution of support for AB 1400, the California Guaranteed Health Care for All Act. This bill would establish a single-payer health care system in California, called CalCare, that will ensure that all Californians, regardless of employment, income, immigration status, race, gender, or any other considerations, can get the health carethey need, free at the point of service.



Boyle Heights Neighborhood Council 2130 E. First Street, Suite 110

Los Angeles, CA 90033

April 19, 2021

Attn: Council President Nury Martinez, Councilmember Ridley-Thomas, Councilmember Buscaino

RE: AB 1400 (Kalra) / California Guaranteed Health Care for All Program (CalCare) / Universal Single-Payer Health Care Coverage / Health Care Cost Control System (Council File: 21-0002-S83)

Dear Los Angeles City Councilmembers,

The Boyle Heights Neighborhood Council supports the Motion¹ for the City of Los Angeles to adopt a resolution of support for AB 1400, the California Guaranteed Health Care for All Act. This bill would establish a single-payer health care system in California, called CalCare, that will ensure that all Californians, regardless of employment, income, immigration status, race, gender, or any other considerations, can get the health care they need, free at the point of service.

The Covid-19 pandemic has exposed how grossly flawed and inequitable our multi-payer health system is and how critical it is for all Californians to be guaranteed access to health care. An estimated 1 in 3 Angelenos² has been infected with COVID, and low-income communities of color are disproportionately impacted³, experiencing higher rates of infection, hospitalization, and death. COVID has also exacerbated long-standing racial inequalities in the job market⁴, which means that low-income

¹ Los Angeles City Counctil Resolution / Motion in reference to CF 21-002-S83 https://clkrep.lacity.org/onlinedocs/2021/21-0002-S83 reso 03-24-21.pdf

² Luke Money, Rong-Gong Lin II. The Los Angeles Times, 1 in 3 L.A. County residents have been infected by coronavirus since pandemic began, new estimate shows. January 14, 2021 https://www.latimes.com/california/story/2021-01-14/one-in-three-la-county-residents-infected-coronavirus

³ Jill Cowan, Matthew Bloch. The New York Times, *In Los Angeles, the Virus Is Pummeling Those Who Can Least Afford to Fall III.* January 29, 2021

https://www.nytimes.com/interactive/2021/01/29/us/los-angeles-county-covid-rates.html

⁴ Dartunorro Clark. ABC News, *The economy is showing signs of recovery. Many Black Americans are not.* October 29, 2020

https://www.nbcnews.com/politics/politics-news/black-unemployment-economy-covid-n1243838

communities of color have also been hardest hit with job losses during the pandemic. The fact that health insurance is tied to employment means that those most likely to get COVID are also those that are most likely to be without medical insurance. This has created a system where those that are most in need of health care are the least likely to seek it due to its costs, especially when they are already incredibly rent burdened⁵. The inability to make rents combined with the inability to afford medical care has also been a major factor in the surge in the unhoused population across Los Angeles during the Covid-19 pandemic, which again disproportionately impacts low-income communities of color⁶.

Boyle Heights has been hit hard by COVID, with over 17,000 cases and 283 deaths according to the Neighborhood Data for Social Change - COVID-19 dashboard⁷. Of the approximately 80,000 stakeholders in Boyle Heights, 16.78% are uninsured as of 2018, according to The USC Price Center for Social Innovation - Neighborhood Data for Social Change and this will likely have increased significantly since the beginning of the Covid-19 pandemic. Boyle Heights has also historically been undercounted during the census and a large portion of our community are undocumented so the uninsured number is most likely higher. The current healthcare system has exasperated the effects of the pandemic in our neighborhood and across Los Angeles.

AB 1400 sets in motion a single-payer health care coverage system in California, called Cal-Care, for all residents, regardless of citizenship status. By streamlining payments and lowering per-capita health care spending, CalCare guarantees quality health care and long-term care without creating barriers to care or out-of-pocket costs. By affirming health care as a right to all Californians and establishing a payment system that eliminates waste and aligns reimbursements with the actual cost of care, we can make significant progress on financing and acquiring state and federal approvals.

The Boyle Heights Neighborhood Council recommends that AB 1400/Cal Care be passed in order to:

- Equitably and effectively address the health care burden of the Covid-19 crisis by providing comprehensive health care to every resident of California, without any cost sharing.
- Guarantee health care be free at the point of service for every person in California, respectively, for all necessary medical care including prescription drugs; hospital, surgical, and outpatient services; primary and preventive care; emergency services; reproductive care; dental and vision care; long-term care;

⁵ Freddie Mac Multifamily. *Rental Burden by Metro*. April 2019 https://mf.freddiemac.com/docs/rental_burden_by_metro.pdf

⁶ Steve Lopez, The Los Angeles Times, *Black people make up 8% of L.A. population and 34% of its homeless. That's unacceptable.* June 13, 2020

https://www.latimes.com/california/story/2020-06-13/column-african-americans-make-up-8-of-l-a-population-n-and-34-of-homeless-count-heres-why

⁷ Molly Creighton, Mackenzie Goldberg, Peter Griffin, Grace Persico, Elly Schoen, *Neighborhood Data for Social Change - Covid-19 Dashboard.* April 16, 2021 http://la.myneighborhooddata.org/covid-19/

⁸ The USC Price Center for Social Innovation, *Neighborhood Data for Social Change*. April 21, 2021 shorturl.at/prFJQ

and mental health care.

- Provide coverage without copays, deductibles, or other out-of-pocket costs, and would slash bureaucracy, protect the doctor-patient relationship, and assure patients a free choice of doctors.
- Establish state-wide comprehensive universal single-payer health care and a health care cost control system for the benefit of all residents of the state.
- Guarantee that all residents of Boyle Heights will be fully covered for health care without copays, deductibles, or other out-of-pocket costs.
- Improve the quality of life for the residents of Boyle Heights because they would be able to get the ongoing care they need, instead of waiting until they have a medical emergency that could upend their lives as well as further burden local resources.

Thank you,

Boyle Heights Neighborhood Council