



# County Medically Indigent Care Programs

## Key Characteristics (October 2017)

Under California law since the 1930s, California counties are the “providers of last resort” for county residents with no other source of care.<sup>1</sup> Each county has the discretion, consistent with related case law, to define eligibility, benefits and services. Counties that choose to provide services to medically indigent persons through county-owned and operated hospitals and clinics have come to be known as **provider** counties. Counties that contract for services or reimburse private providers in the community are known as **payer** counties. Counties that operate public clinics, but not public hospitals, and contract with private hospitals in the county, are known as **hybrid** counties. Thirty-five smaller and more rural counties contract with the **County Medical Services Program (CMSP)** to administer a health care services program for low-income individuals in the counties, pursuant to common rules set by CMSP participating counties. This chart highlights key characteristics of county indigent care programs, as reported by the counties.

County	Program Name	Eligibility Federal Poverty Level (FPL) <sup>2</sup>	Eligible Ages	Coverage for Undocumented	Copays/ Share of Cost (SOC)	Eligibility Period	Delivery System for Program	Indigent Care Model
<b>Alameda</b>	Health Program of Alameda County (HealthPAC)	<200%	19+	Yes	SOC ≥138% FPL	12 months	County health authority – Alameda Health System; Contracts with network of nine community clinics	Provider
<b>Contra Costa</b>	Basic Health Care	<300%	Under 19	No Separate limited benefit program	SOC varies by income and age	12 months	County hospital – Contra Costa Regional Medical Center and 12 affiliated clinics	Provider
<b>Fresno</b>	Fresno County Medically Indigent Services Program (MISP)	<224% of 2014 Federal Poverty Guideline (FPG) <sup>3</sup>	21–65	No Separate limited benefit program for those who qualify for restricted-scope Medi-Cal	SOC ≥138-224% 2014 FPG	One month or three months depending on individual circumstances	Contracts with private hospital, Community Medical Center (CMC), and Central California Faculty Medical Group	Payer

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<b>Kern</b>	Kern Medical Wellness Program	≤ 300% FPL County residents ineligible for Medi-Cal or Medicare	19–64	Yes Limited to specific programs	SOC	12 months	Kern Medical Hospital Authority - Public Hospital and Community Medical clinics	Provider
<b>Los Angeles</b>	My Health LA	≤138%	19+	Yes	No SOC	12 months	Community clinic partners under contract with the county; county hospitals and clinics for specialty, emergency and urgent care	Provider
	Ability-to-Pay Plan (ATP)	County residents ineligible for Medi-Cal or Medicare	19+	Yes	SOC above >138% FPL	12 months	County hospitals and clinics only	
<b>Merced</b>	Merced County Medical Assistance Program (MAP)	<100%	21–64	No	No	Ranging from 30 days to 1 year depending on individual circumstances	Local providers and by referral to specialty providers outside the county if necessary	Payer
<b>Monterey</b>	Monterey County Medical Services Program	<250%	21–64	No Separate limited benefit program available through June 2018	SOC	One month or three months depending on income	County hospital and clinics, – Natividad Medical Center; Specialty care may be authorized outside of county facilities	Provider
<b>Orange</b>	Orange County Medical Safety Net Program (MSN)	138 - 200%	19–64	No	Co-payments	Prorated 12-month period, terminating at end of calendar year	Community clinic partners under contract with the county; designated private hospitals	Payer
<b>Placer</b>	Medical Care Services Program (MCSP)	<185%	21–64	No	SOC >100% FPL	2 months	Contracts with local hospitals	Payer

Chart updated with permission. See Kelch, D., *Locally Sourced: The Crucial Role of Counties in the Health of Californians*, California Health Care Foundation, October 2015. Available online at: <https://www.chcf.org/wp-content/uploads/2017/12/PDF-LocallySourcedCrucialRoleCounties.pdf>

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<b>Riverside</b>	Riverside County Medically Indigent Services Program (MISP)	<200%	21–64	Yes	Copayments; SOC >100% FPL	12 months	County hospital – Riverside University Health System Medical Center and contracted community clinics	Provider
<b>Sacramento</b>	County Medically Indigent Services Program (CMISP)	No FPL cap. SOC begins at 63% FPL	21–64	No Separate limited benefit program for those who qualify for restricted-scope Medi-Cal	SOC	12 months	County clinics for primary care, pharmacy and labs; Contracted specialty, emergency and hospital providers (Dignity Health and Sutter Health)	Hybrid
<b>San Bernardino</b>	San Bernardino County Medical Services Plan (CMSP)	≤100%	19–64	No	No	12 months	County hospital and clinics -- ArrowHead Regional Medical Center	Provider
<b>San Diego</b>	San Diego County Medical Services (CMS)	<165% Hardship program for incomes up to 350%	21–64	No	SOC above 165% FPL	6 months	Network of community health centers; private physicians and hospitals	Payer
<b>San Francisco</b>	Healthy San Francisco	≤500%	18+	Yes	Participation fee for 100% FPL and above. Copayment amount depending on clinic/ hospital. For <100% FPL most services \$0 copay.	12 months	County hospitals and affiliated clinics; San Francisco Community Clinic Consortium clinics; private community providers	Provider

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<b>San Joaquin</b>	San Joaquin Medical Assistance Program (MFAP)	≤200%	19–64	No	Yes	6–12 months	County hospital and clinics – San Joaquin General Hospital	Provider
<b>San Luis Obispo</b>	San Luis Obispo Medically Indigent Services Program (SLO-MISP)	139 - 250%	19–64	No	SOC	3 or 6 months depending on the medical need	Community Health Centers of the Central Coast (CHC) clinics; Limited local specialists; All local hospitals accept SLO-MISP patients	Payer
<b>San Mateo</b>	San Mateo Access and Care for Everyone (ACE)	0 - 200%	19+	Yes	Annual enrollment fee \$360 / year and \$15 copay (both can be waived depending on income)	12 months	County hospital and clinics – San Mateo Medical Center, Ravenswood Family Health Center and North East Medical Services	Provider
<b>Santa Barbara</b>	Indigent Care Program (ICP)	138 - 200%	21–64	No Eligible for sliding scale services at county health centers Tobacco settlement funds cover some services outside of health centers for low income uninsured, including undocumented	SOC	1-3 months based on medical needs and financial circumstances	Santa Barbara County Public Health Department (PHD) Health Care Centers  Services outside of PHD county health care centers must be pre-authorized. Many local providers accept ICP including all hospitals in the county.	Hybrid
<b>Santa Clara</b>	Ability to Pay Determination Program	0 - 350% FPL	19+	Yes	Copayments based on sliding scale	12 months	County hospital – Santa Clara Valley Medical Center and affiliated clinics	Provider

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<b>Santa Clara</b> <i>(continued)</i>	Primary Care Access Program	0 - 200% FPL	19+	Yes	Copayments based on sliding scale	12 months	Contracted community clinics	
	Healthy Kids Program	0 - 300% FPL (children not eligible for Medi-Cal)	0-19	Yes	Monthly premium and low or no copayments	12 months	County hospital – Santa Clara Valley Medical Center and affiliated clinics; contracted community clinics and providers	
	Valley Kids Program	300% - 400% FPL	0-19	Yes	Copayments based on sliding scale	12 months	County hospital – Santa Clara Valley Medical Center and affiliated clinics	
<b>Santa Cruz</b>	MediCruz Program	<100%	19–64	Yes	Copayments and SOC	3-6 months depending on the medical condition	County clinics for primary care; Other specialty non-emergency medical services outside of county clinics require pre-authorization	Hybrid
<b>Stanislaus</b>	Medically Indigent Adult Program (MIA)	Varies in increments by age <144% (21-29) to <175% (60-64)	21–65	No	SOC	3–12 months	County-based physicians and family practice residents at county clinics; Doctor’s Medical Center of Modesto	Hybrid
<b>Tulare</b>	Tulare County Medical Services (TCMS)	<275% FPL	No age restriction	Yes, for services in county clinics and for emergency hospital care	TCMS: \$5 copayment	3 months	County-operated clinics; Local hospital coverage/some specialty coverage	Hybrid
	Sliding Fee	Full Coverage <125% FPL Partial Coverage <200% FPL	No age restriction	Yes, for services in county clinics and for emergency hospital care	Copayments <125% FPL: \$5 126% - 150%: 25% 151% - 175%: 50% 176% - 200%: 75%	12 months	County-operated clinics	
<b>Ventura</b>	Sliding Fee Discount Payment Program	<200% FPL	No age restriction	Yes	<100% FPL: nominal charge	12 months	County hospital – Ventura County Medical Center (VCMC) and affiliated clinics; Discount some	Provider

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					100-200% FPL: SOC based on 3-tier sliding scale		services purchased from outside the county system  <i>Ventura also has a program for low-income children run by the Public Health Dept.</i>	
	Charity Care Program	<100% FPL and monetary assets of less than \$10,000	No age restriction	Yes	No Copayments or SOC; remaining charges reduced to \$0	12 months	County hospital – Ventura County Medical Center (VCMC) and affiliated clinics; Discounts some services purchased from outside the county system	
	Self-Pay Discount Program	<350% FPL; >350% FPL are also eligible with SOC differences	No age restriction	Yes	<350% FPL: SOC based on sliding scale for specified services; <sup>1</sup> other services are discounted on a case-by-case basis >350%: SOC not to exceed 50% of billed charges, at minimum of 150% of Medi-Cal rates	12 months	County hospital – Ventura County Medical Center (VCMC) and affiliated clinics; Discount some services purchased from outside the county system  <sup>1</sup> The County defines sliding scale services to include primary and specialty care visits, emergency, hospital, obstetrics, ancillary, gastrointestinal and same day surgery services.	
<b>CMSP Counties (35)</b>	County Medical Services Program (Joint program)	139 - 300%	21–64	Yes, for emergency services and some limited pilot program benefits	SOC	6 months	Contracts with local providers organized by contracted administrator	CMSP

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**Notes**

*\* Information on this chart was obtained directly from counties through online research and informant interviews, subject to change as counties revise programs and services. Eligibility for most county indigent care programs requires that the applicant have no other source of health coverage and typically requires them to apply for Medi-Cal / Covered California before seeking assistance through the county. Some county programs retain eligibility at very low-income levels, although under California’s Affordable Care Act coverage expansion most individuals with incomes 0-138% FPL are eligible for Medi-Cal, except for undocumented adults. Undocumented adults are eligible for emergency and pregnancy-related Medi-Cal. Enrollee share of cost for the programs typically varies based on income. Counties with county-operated hospitals may also have discount and charity care programs for low-income uninsured individuals, including undocumented persons, in addition to the specific indigent care programs profiled here. AB 774, Chapter 755, Statutes of 2006 requires all hospitals in the state, not only county hospitals, to administer a discount payment and charity care policy for financially qualified patients. Contra Costa, Fresno, Monterey, Santa Barbara and Sacramento counties have limited programs for undocumented individuals, but retain core county indigent care program eligibility rules that exclude the undocumented.*

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For more information on this fact sheet, contact ITUP Executive Director Deborah Kelch, at 916-226-3899.

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<sup>1</sup> California Welfare and Institutions Code Section 17000 established the indigent support requirement for counties as follows: “Every county and every city and county shall relieve and support all incompetent, poor, indigent persons, and those incapacitated by age, disease, or accident, lawfully resident therein, when such persons are not supported and relieved by their relatives or friends, by their own means, or by state hospitals or other state or private institutions.”

<sup>2</sup> The 2017 Federal Poverty Level is \$12,060 annual income for a single person.

<sup>3</sup> The 2014 Federal Poverty Guideline was \$11,670 annual income for a single person.