

LEGISLATION & COMMUNICATIONS UNIT

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July 2, 2021

Honorable Richard Pan Chair, Health Committee California State Senate State Capitol, Room 5114 Sacramento, CA 95814

RE: AB 369 (KAMLAGER) as amended June 15, 2021 SUPPORT

Dear Senator Pan:

Disability Rights California (DRC), a non-profit advocacy organization that advances and protects the rights of Californians with disabilities, **supports AB 369.** This bill is scheduled to be heard before Senate Health Committee on July 7, 2021.

AB 369 which will increase access to health and social services for people experiencing homelessness (PEH) by requiring the Department of Health Care Services (DHCS) to incorporate street medicine into existing healthcare infrastructure, waiving ID requirements for providing care to unsheltered populations, and suspending the practice of sweeping encampments, which displaces the homeless and often results in the destruction of their property. These changes will remove barriers to accessing care for PEH by providing direct, comprehensive care Californians on streets and under bridges where they reside.

PEH, who are disproportionately people of color, suffer from poorer health and have life expectancies 30 years shorter than the general population. Alarmingly, in California, homeless deaths have doubled over the last 5 years. The COVID-19 pandemic has exacerbated these existing health disparities. PEH are unable to follow stay at home orders, wash hands

regularly, or wear clean masks to slow the spread of COVID-19. This puts their lives, and their communities' lives, at risk. Street medicine has proven to be an essential service during this time, and has been the driver of COVID-19 testing efforts, surveillance, contact tracing, and education on the best way to follow health recommendations even while living on the street.

Street medicine, the provision of health care directly to those living on the streets, was developed specifically to address the unique needs and circumstances of unsheltered homeless individuals. Street medicine teams "go to the people" to provide PEH with medical and behavioral health care, treatment for substance use disorders, assistance with housing transitions, and living necessities such as sanitary products and clean water. Studies of street medicine programs indicate increased access to care, increased housing placement, improved health outcomes, and significant cost savings for Medi-Cal and hospital systems.

Despite these benefits, existing healthcare infrastructure does not recognize the "street" as a location for providing care. As a result, the homeless are denied medical treatment, social services, housing assistance, addiction treatment, and other benefits normally covered by Medi-Cal. AB 369 will increase access to comprehensive care and is a significant step in achieving health justice, equity and inclusion for Californians experiencing homelessness. For these reasons, DRC supports this bill. Please contact me if you have any questions about our position or if I can provide any further information.

Sincerely,

Eric Harris

Director of Public Policy

Disability Rights California

cc: Honorable Members, Assembly Appropriations Committee Honorable Sydney Kamlager, California State Senate Neda Ashtari, Legislative Director, Office of Senator Kamlager