

From: Lilibeth Navarro <lnavarro@calif-ilc.org>
Sent: Friday, November 22, 2019 4:01 PM
To: EngAGE@CDA
Cc: Nancy Becker Kennedy; Connie Arnold; Lilibeth Navarro
Subject: Amended Medi-CAL to HMOs

CDSS IHSS "Listening Session":

11/22/2019

I'm Lilibeth Navarro, Executive Director of CALIF and also a person with disability. Many years ago I was on Medi-Cal before starting on a full time job and got a lot of quality care: I got to choose the specialists I needed, I could avail of the services of Rancho Los Amigos where they have a superb seating clinic and I got, without any grief, the custom-made wheelchair I was prescribed with. In addition, I had access to the best polio specialists. I could choose my primary care physician as long as s/he was taking Medi-Cal and I enjoyed significant good health.

Today, as a working person, I have to be on an HMO with so many restrictions. I lost my access to Rancho Los Amigos, I had to wait 11 years to have my wheelchair replaced, there are no polio specialists, their best physical therapy is so wanting and not friendly to people with disabilities. I could not choose the specialists I need for my specific challenges because they do not have them in the plan. The only enhancement I have experienced is the internet access to my doctors and the wealth of information on the HMO website. During my visits to the HMO, I've also met severely disabled patients who were suffering the gross lack of specific therapies and resources that better hospitals and rehab centers offered to others.

Based on this actual experience, I don't think it is disability friendly to put Medi-Cal and MediCare recipients into the HMOs is a cruel proposal.

1. The only thing I would like to see in an HMO with regard to health care is this:
All HMOs that accept Medi-cal should add the following as member benefits for the disabled:
 - a.) Access to a dependable registry of care-givers. That presupposes that HMO have a registry of workers of their own or that the HMOs have access to other for-profit or non-profit caregiver agencies.
 - b.) The HMOs should be able to provide paramedical services to the disabled members who have been abandoned at home, to make sure they are cared for;
 - c.) That for the severely disabled on HMO who are abandoned have access to life saving procedures like the bowel program, for example.

d.) That HMOs also become evacuation centers in an emergency.

Lilibeth Navarro

Communities Actively Living Independent & Free (CALIF)

Founder & Executive Director

634 S. Spring Street, Second Floor

Los Angeles, CA. 90014

www.calif-ilc.org

(213) 627-0477, Voice

(213) 627-0535, Fax

(213) 840-4199, cell

Email: Lnavarro@calif-ilc.org

Alternative email: crucis6@gmail.com