

RESOLUTION OF THE BOARD OF SUPERVISORS
COUNTY OF SANTA BARBARA, STATE OF CALIFORNIA

IN THE MATTER OF THE CREATION OF THE SANTA BARBARA COUNTY INDIGENT CARE PROGRAM AND TERMINATION OF THE MEDICALLY INDIGENT ADULT SERVICES PROGRAM)
)
) **Resolution No.** _____
)

WHEREAS, the Federal Affordable Care Act (ACA) took effect on January 1, 2014, providing health insurance options (including Medi-Cal (MAGI and Non-MAGI) and the programs offered by Covered California (private insurance)) to most residents in Santa Barbara County; and

WHEREAS, Medi-Cal now provides health care coverage for County residents with income levels up to 138% of the Federal Poverty Level; and

WHEREAS, the existing Medically Indigent Adult Services Program provides access to health care services for qualifying individuals with incomes from 0 to 200% of the federal poverty level; and

WHEREAS, Welfare and Institutions Code sections 17000 et seq. requires Santa Barbara County to provide medical services to indigent persons only "when such persons are not supported and relieved by their own means, relatives and friends, or by state hospitals or other state or private institutions"; and

WHEREAS, the County retains the need for a smaller Indigent Care Program for individuals with incomes falling between 138% and 200% of the Federal Poverty Level; and

WHEREAS, regulations for eligibility and benefits associated with the Indigent Care Program have been prepared by staff;

NOW, THEREFORE, BE IT HEREBY ORDERED AND RESOLVED that, consistent with staff's recommendations, the Board of Supervisors of Santa Barbara County does hereby terminate the existing Medically Indigent Adult Services Program and implement the Indigent Care Program by adopting the attached eligibility regulations.

BE IT FURTHER RESOLVED that the Director of the Public Health Department, or his/her designee is hereby authorized and empowered to update and/or revise the Indigent Care Program Eligibility Regulations as needed to ensure compliance with federal, state and local legislation, in the name of the County of Santa Barbara.

PASSED AND ADOPTED by the Board of Supervisors of the County of Santa Barbara, State of California, this _____ day of _____ 2014, by the following vote:

AYES:

NOES:

ABSENT:

COUNTY OF SANTA BARBARA

By _____
Chair, Board of Supervisors

ATTEST:
MONA MIYASATO
COUNTY EXECUTIVE OFFICER

By _____
Deputy

APPROVED AS TO FORM:
MICHAEL GHIZZONI
COUNTY COUNSEL

APPROVED AS TO ACCOUNTING FORM:
ROBERT W. GEIS, CPA
AUDITOR-CONTROLLER

By _____
Deputy County Counsel

By _____
Deputy

APPROVED
TAKASHI WADA, MD, MPH
DIRECTOR/HEALTH OFFICER
PUBLIC HEALTH DEPARTMENT

By: _____
Director