[ms-0398.024.003.004]

February 20, 1991

TO: The San Diego County Board of Supervisors
FROM: Being Alive-San Diego
RE: Threat to Eliminate the County Medical Services (CMS) Program

Being Alive-San Diego, an organization of people with AIDS, ARC and HIV infection and their supporters and friends, wishes to protest in the strongest possible terms the recommendation of San Diego County administrators that the County Medical Services (CMS) program be eliminated altogether as of March 15.

On February 12, 1991, we came before your Board in support of the County's application for funding under the federal Comprehensive AIDS Response and Emergency (CARE) Act, and to request increased representation of people with AIDS and HIV infection under the HIV Health Services Planning Council created by your Board to fulfill the requirements of the CARE Act. On that occasion, we were impressed by the Board's strong interest in mounting an effective AIDS response with whatever resources were available.

Elimination of CMS would directly threaten the County's ability to mount an effective response to AIDS at all. In addition to the people currently receiving care for AIDS and HIV disease under CMS, who would have no access to care at all without the program, abolition of CMS will threaten the very existence of several hospitals and other health service facilities in the County, and thus will reduce the treatment options for people with AIDS as well as those with other health problems.

Beyond that, abolition of CMS will jeopardize virtually all other funding opportunities San Diego County will have in the health-care field. In addition to the $19 million in state tobacco-tax monies already mentioned in press coverage of this issue, San Diego's chances of any AIDS funding under the CARE Act will be virtually eliminated if the CMS program is killed. The requirement of the CARE Act that its funds must "supplement, not supplant" existing programs (except for certain exceptions, which the law clearly specifies) unquestionably forbids the County from proposing the use of CARE Act funds to provide health care services to people with AIDS and HIV that were previously offered through CMS reimbursements. Any attempt on the part of the County to do so could result in the County's disqualification from *any* CARE Act funding.

As a matter of policy, due largely to the 12-year history of discrimination against San Diego County by the state of California in allocating property tax revenues, the County has long directed its limited resources *away* from funding health or social-service programs that could not be financed through pass-through allocations from other branches of government. This policy has given San Diego County an undeserved but nonetheless real reputation for regarding the lives and livelihoods of its less affluent residents as a low priority.

This perception discredits this County's representatives every time they try to apply for state or federal funding that might relieve part of the County's financial problem in funding these services. The cutbacks become a vicious cycle: the more the County reduces its efforts in the health and social-service fields, the more the federal and state authorities become convinced that this county "really doesn't care" about these areas, and the less likely they are to give us funding for such services – which in turn reduces the money we have available for them, and leads to further cutbacks.

As we said in our initial report to the HIV Health Services Planning Council, "We believe that the [CARE] Act can make a significant improvement in San Diego County's level of AIDS care and services only if local government implements it in the context of a fully detailed strategic plan for AIDS, backed up with a countywide commitment – from the Board of Supervisors on down – to make AIDS its number one public-health priority and aggressively pursue both the programs necessary to create an adequate AIDS response and the resources needed to fund those programs completely." We would only add at this point that the current crisis regarding the CMS program demonstrates that your Board must make that kind of commitment, not only for AIDS issues, but for health care and other social issues in general.

To that end, we recommend the following:

1) We believe that the Board of Supervisors should immediately declare that the CMS funding situation constitutes a state of emergency for the County of San Diego.

2) We would further urge the Board of Supervisors to pursue all avenues for immediate relief for the CMS program from the state of California, including the release of reserve funds to honor the state's commitment to make up shortfalls in expected federal funding for such programs. We applaud the initiative shown by Supervisor Susan Golding in

this regard, and urge, in order to impress upon state officials the gravity of the situation, that all five Supervisors personally participate in future lobbying efforts.

3) In addition to seeking relief from the state, the Board of Supervisors should declare its intent to keep the CMS program alive at all costs. We suggest that the Board do this by declaring certain budget areas of the County as "core programs," defined as those programs that directly affect the lives of its citizens – including police [Sheriff's Department], fire protection, health services and social services – and directing County administrative staff to create and submit to the Board a proposal for emergency cutbacks in areas *outside* this "core" that will be sufficient to maintain the CMS program at its current level of funding for the rest of this fiscal year (and beyond, if need be).