



Central Valley Health Network

Improving Access to Community Clinics

Background

Currently, a primary care or free clinic is allowed to operate an “intermittent” or satellite clinic separate from the premises of the licensed clinic for no more than 20 hours a week. These clinics provide health care services on a limited basis and must meet all other requirements of law pertaining to fire and life safety.

See Health and Safety Code Section 1206(h).

What’s the problem?

Intermittent or satellite clinics provide much needed care to un- and under-insured populations; however, they are only able to operate for only 20 hours per week. This limits their effectiveness in reaching communities that face significant barriers to accessing health care services, such as low-income, rural and limited English-speaking communities.

Community clinics are often more accessible to diverse and underserved populations because of the lack of job-based health insurance, language and cultural barriers and a limited knowledge of the health care system. In addition to providing care to the uninsured, community clinics are an important medical home for many insured rural and limited English-speaking communities. Oftentimes the providers are more culturally aware of their enrollees’ needs and can communicate in the enrollees’ native language.

What would the legislation do?

This bill would improve access to care for uninsured/underserved communities by allowing intermittent or satellite clinics to operate for up to 40 hours per week. By expanding the clinics hours of care, underserved/uninsured communities will be able to have greater opportunities to seek primary and preventive health care services.

Sponsors and Supporters:

Central Valley Health Network (Co-Sponsor)

Latino Issues Forum (Co-Sponsor)

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