



*Live Well. Health Matters.*

**POLICY TITLE:** HEALTH FUNDS  
**POLICY NUMBER:** 5020

**COMMITTEE APPROVAL DATE:** 06/22/2015      **WRITTEN/REVISED BY:** K. LAWSON  
**BOARD APPROVAL DATE:** 11/17/2021      **SUPERSEDES:** 07/22/2015

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**POLICY:**

**5020** It is the policy of the Beach Cities Health District (“District”) to provide cost-effective community care as an alternative to long-term institutional care for residents over age sixty and disabled adults age eighteen through fifty-nine and access to health care for uninsured income-eligible residents. The Funds are managed and accessed through the District Community Services Department.

**GUIDELINES:**

**5020.1 Senior and Disabled Health Fund**

**5020.1.1 Criteria and Eligibility:**

To qualify for assistance from the Senior and Disabled Health Fund a participant must meet each of the following criteria:

**5020.1.1.1 Residency:** Resident of Hermosa Beach, Manhattan Beach or Redondo Beach.

**5020.1.1.2 Age:** 60 years or older.

**5020.1.1.3 Disabled:** No longer in high school and between the ages of eighteen and fifty-nine, inclusive

**5020.1.1.4 Need:** Service or product is needed to maintain an adequate level of functioning. The need may be the result of a permanent or temporary disability.

**5020.1.1.5 Financial Status:** Must be unable to purchase the service or product for him/herself. Adjusted gross income must fall within the income limits based on the United States Department of Health and Human Services Poverty Guidelines. (Note: Adjusted gross family income excludes non-reimbursable family expenditures for health care in the current year, including projected medical expenses connected with any family member’s current illness.)

**5020.1.1.6** Participant must provide required proof of income.

**5020.1.1.7 Other Payers:** Lacks access to other payment sources, both monetary and in kind, for the needed product or services.

**5020.1.1.8** Participant will agree to apply for assistance from any other source they may qualify for (e.g., MediCal, In-Home Supportive Services, Multi-Purpose Senior Services Program, Veteran's assistance, etc.)

### **5020.1.2 Allowable Purchases:**

**5020.1.2.1** Home and Community-Based supportive services that reasonably assist the participant to live safely in his/her own home.

**5020.1.2.2** Decisions on other services will be made on a case-by-case basis and will take into account other possible resources and participant's level of need.

### **5020.1.3 Cost to Participant**

A co-payment (see Procedure for Co-Payment Schedule) for services will be charged to each participant. Participants who are on Supplemental Security Income or MediCal are exempt from all co-payments. No one will be denied service due to inability to pay. The Director of Community Services or designated manager, may, on a case-by-case basis, adjust the co-payments.

## **5020.2 Health Fund for the Uninsured**

### **5020.2.1 Criteria and Eligibility:**

To qualify for assistance from the Health Fund for the Uninsured a participant must meet each of the following criteria:

**5020.2.1.1 Residency:** Resident of Hermosa Beach, Manhattan Beach or Redondo Beach.

**5020.2.1.2 Age:** Any age based on defined need and lack of insurance.

**5020.2.1.3 Need:** A medical or behavioral health need.

**5020.2.1.4 Insurance status:** Must be uninsured.

**5020.2.1.5 Financial Status:** Must be unable to purchase the service or product for him/herself. Adjusted gross income must fall within the income limits based on the United States Department of Health and Human Services Poverty Guidelines. (Note: Adjusted gross family income excludes non-reimbursable family expenditures for health care in the current year, including projected medical expenses connected with any family member's current illness.)

**5020.2.1.6** Participant must provide required proof of income.



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**5020.2.1.7 Other Payers:** Lacks access to other payment sources, both monetary and in kind, for the needed product or services.

**5020.2.1.8** Participant will agree to apply for assistance from any other source they may qualify for (e.g., MediCal, Medicare, California Health Exchange, etc.) and will comply with the individual mandate contained within the Affordable Care Act.

**5020.2.2 Allowable purchases:**

**5020.2.2.1** Health care services (health care, mental health and dental care).

**5020.2.2.2** Home and community-based services for special populations.

**5020.2.2.3** Decisions on other services will be made on a case-by-case basis and will take into account other possible resources and participant's level of need.

**5020.2.3 Cost to Participant**

A co-payment (see Procedure for Co-Payment Schedule) for services will be charged to each participant. No one will be denied service due to inability to pay. The Director of Community Services or designated manager, may, on a case-by-case basis, adjust the co-payments.

**5020.3 Vendors of Service**

The District will select vendors based on quality and competitive pricing and authorize services. Each vendor will have a valid Provider Agreement with the District.

**EXCEPTIONS**

**5020.4** The Chief Executive Officer is the only person authorized to make exceptions to this policy.