

PROTECT PATIENTS



REJECT the **ATTACK** on
Community Health Centers

Ballot Measure Q&A

WILL THIS BALLOT PROPOSITION IMPROVE PATIENT CARE?

- No. This reckless proposition would threaten care for millions of California patients who rely on community health centers and clinics for their health care.
- Research from health care economists at the Berkeley Research Group (BRG) found this proposition would divert **\$1.7 billion** from community health centers and clinics at a time when clinics are already facing financial challenges and federal and state funding cuts.
- In fact, according to BRG, if this proposition passes, two-thirds of all health centers and clinics in the state will be pushed into **operating in the red**.

HOW WOULD THIS BALLOT PROPOSITION HURT PATIENT CARE?

- This proposition would **divert billions of dollars** away from patient care into a new state bureaucracy, forcing health centers to **reduce patient services and even close**, resulting in a devastating loss of care for millions, including seniors, veterans, and working families.
- It also **excludes funding for critical services** that support patients such as nurse and physician managers, translation services, health care coverage enrollment navigators, patient transportation, and community outreach and education.
- This proposition even excludes funding to build new clinics—preventing health centers and clinics from expanding access to care in communities most in need.

WILL THIS BALLOT PROPOSITION STRENGTHEN OVERSIGHT AND ACCOUNTABILITY OVER COMMUNITY HEALTH CENTERS AND CLINICS?

- No. This ballot proposition is **unnecessary**. Community health centers and clinics are already **heavily regulated** by the federal and state governments, with strict reporting requirements and audits.
- Community health centers and clinics are not-for-profit organizations—focusing resources on patient care and community benefits, not profits or shareholders.
- And a majority of the board of directors must be patients of that facility, ensuring decisions reflect patient and community needs above all else.

WHY WAS THIS BALLOT PROPOSITION FILED?

- This ballot proposition is a **shameful power play by politically powerful union executives** who are weaponizing the ballot proposition process to force their demands.
- **Patients should never be used as pawns.** Pushing a dangerous ballot proposition that will shut down community health centers and harm millions of patients is wrong.

WILL THIS BALLOT PROPOSITION INCREASE HEALTHCARE ACCESS AND EQUITY?

- No. This ballot proposition will **increase** health inequities and put vulnerable patients at risk.
- This ballot proposition will lead to a dangerous reduction in patient services and the closure of community health centers and clinics across California, including clinics in places like the Rural North, the Central Valley, and the Inland Empire, where families already face long travel times to access care.

HOW DO COMMUNITY HEALTH CENTERS AND CLINICS ENSURE THAT THEIR CARE IS PATIENT DRIVEN?

- Community health centers and clinics in rural towns, urban neighborhoods and anywhere in between are **built by the community and for the community**.
- Community health centers and clinics are staffed by people who often live in, look like, and speak the languages of those they care for.
- A majority of the board of directors must be patients at that facility, ensuring decisions reflect patient and community needs above all else.
- **This proposition undermines community-centered care** by imposing arbitrary one-size-fits-all mandates that will result in billions being diverted away from patient care and into new state bureaucracy.

DO COMMUNITY HEALTH CENTERS AND CLINICS SPEND TOO MUCH ON MANAGEMENT OR EXECUTIVES?

- Community health centers and clinics are **not-for-profit organizations**—focusing resources on patient care and community benefits, not profits or shareholders.
- Community health centers and clinics provide compensation for management and executives the same way they set compensation for nurses, caregivers and all employees—they pay competitive wages and benefits that allow them to recruit and retain the most qualified caregivers and leaders.

STOP the Dangerous **ATTACK** on Vulnerable Patients

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