



CONSUMER CENTER FOR HEALTH EDUCATION AND ADVOCACY

A Project of the Legal Aid Society of San Diego

Annual Report
2021-2022

**The informed,
empowered
consumer is a
healthier one.**

Founded in 1999 to provide independent assistance to help consumers navigate complicated physical and behavioral health systems of care, the Consumer Center educates and empowers consumers so that they become and remain healthy.

TABLE OF CONTENTS

4	Introduction
6	Who We Are / How We Provide Services
8	Our Work
8	Eligibility & Access to Care
10	Outreach and Education
12	Medi-Cal
14	Covered California
16	Behavioral Health
18	CCI/Cal MediConnect Ombudsman
20	Advocacy for Seniors
22	Health Consumer Alliance Offices

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INTRODUCTION

REFLECTION AND GROWTH

As we move ever closer to the eventual lifting of the COVID-19 public health emergency order, I anticipate that there may be a collective sigh of relief, and even cause for celebration. While we absolutely should continue to celebrate and honor the enormous contributions and sacrifices of first responders, health professionals, and the countless others that came together to respond as one community to this unprecedented challenge, it is equally important to briefly reflect on the devastation wrought upon our communities, families, and friends. While the economic losses may take years to recover, we may never fully recover from the more personal losses that have touched each and everyone of us. Like other landmark events in our modern history, the global COVID-19 crisis has been indelibly imprinted on our lives, communities, public health and health systems, and economy. In my 50+ years of advocacy, I could not have conceived of a more convincing illustration of the importance of universal access to health care, trusted public health information, and sufficiently staffed, trained, and supplied health system.

Yet, as we begin to emerge from the COVID-19 crisis, our health systems and community are more hopeful, resilient, and certain in our resolve. We are prepared for the lift of the moratorium on negative actions in the Medi-Cal program and we are helping to shape the state's ambitious Medi-Cal reforms through CalAIM. As we "emerge" from this pandemic, the Consumer Center will continue to work with our dedicated partners to ensure we grow from this crisis. Where our systems gained efficiencies, our advocacy will be directed at retaining those benefits. Where our systems fell short, our advocacy will be directed at correcting those deficiencies. Together with you, our partners, and our broader community, the Consumer Center will be ready.

Justice Begins Here.

Stay safe and be well.



Gregory E. Knoll, Esq.

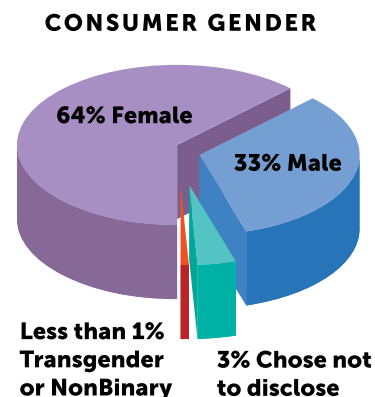
CEO/Executive Director/Chief Counsel



WHO WE ARE

The Consumer Center for Health Education and Advocacy's (Consumer Center) mission is to educate, assist, and empower low-income San Diegans to become and remain healthy. Consumers are at the core of our model and our organization. We provide the highest quality direct consumer health advocacy services. Through our work, we identify systemic problems and work with local, state, and federal decision makers to solve them.

In FY 21-22, we opened 1,446 cases and closed 1,553 cases, in which the Consumer Center directly advised or represented 2,228 people to resolve eligibility or service-related problems. The Consumer Center's staff is comprised of advocates, case managers, and attorneys. Our staff serve individual clients, advocate for systems change, and provide trainings to consumer groups, providers, community-based organizations (CBOs), and family support groups.



HOW WE PROVIDE SERVICES

The Consumer Center strives to make quality advocacy services available for all consumers. While many of the outstation clinics have been limited by the public health emergency (PHE), consumers continue to be referred by our community partners to us for assistance.

Our toll-free hotline

Our hotline is staffed by trained intake specialists Monday through Friday, 9:00 am to 5:00 pm. In FY21-22, the Consumer Center received slightly under 10,000 calls for assistance, referral, and general education. Our cloud-based phone system ensures seamless operation whether our work is remote or in the office.

Culturally and linguistically appropriate services

The Consumer Center accommodates the needs of all consumers to ensure our services remain accessible and convenient. We do this by hiring bilingual staff and using telephone interpretation services that permits consumers to be served in over 200 languages, including all the county threshold languages. We also use the California Relay Services, our own TTY line, and in-person American Sign Language interpreters on an as-needed basis to communicate with clients.

Through agency and plan appeals, including hearings

Our staff effectively and efficiently escalate individual cases through a variety of internal and external appeal procedures to achieve our clients' goals. Often within the same day of initiating a case, our staff can escalate a matter to the County of San Diego Health and Human Services Agency (HHSA), the appropriate state regulatory agency staff, or health plan liaisons to resolve our clients' issues. We also represent clients at hearings related to eligibility for and access to care disputes under Medi-Cal, Covered California, and County Medical Services.

On-site in the community

Our continued Medical Legal Partnership with Scripps Mercy Hospital allows our staff to receive referrals from the social workers and public resource staff and provide accessible legal assistance. This is in addition to receiving direct referrals from other Scripps Health facilities.

At the Gary and Mary West Senior Wellness Center in downtown San Diego, our outreach clinic provides onsite legal assistance to low-income and homeless seniors. This partnership features the Cyber Café, a computer learning center that helps seniors use technology to learn more about their health care and remain connected to their family or friends. It also provides a platform through which consumers learn about and engage our health consumer advocacy services.

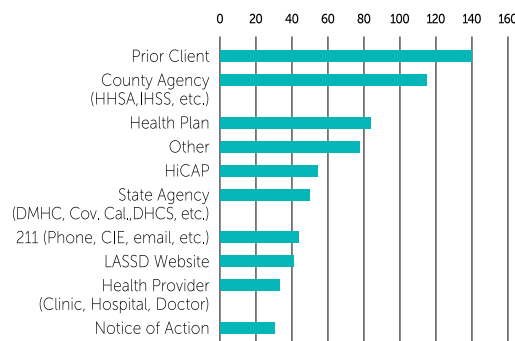
For problems outside our scope of service

As with all services provided at Legal Aid Society of San Diego (Legal Aid), the Consumer Center holistically screens all callers to determine how the Consumer Center or other Legal Aid teams can assist them. Where our consumers' needs require support and services from outside Legal Aid, our staff identify and refer them to other sources of local legal services and other community-based organizations that can meet their needs. The Consumer Center remains closely tied into San Diego's network of social service, legal, and other supportive services that our consumers need to ensure we have up-to-date referral and contact information. Moreover, the Consumer Center is a 211 Community Information Exchange (CIE) partner, which enables our staff to easily identify appropriate resources to refer our consumers.

Client feedback

- "Very helpful. Got my questions answered and relieved my mind."
- "Very knowledgeable and I'm very glad they were a resource available for me. Thank you so very much!"
- "My case took over a year, but that was due to the dozens of complications my insurance was giving us. CCHEA brought me great comfort and assurance in times of extreme distress, and not only worked with me professionally, but also with great care and respect to me as a human."

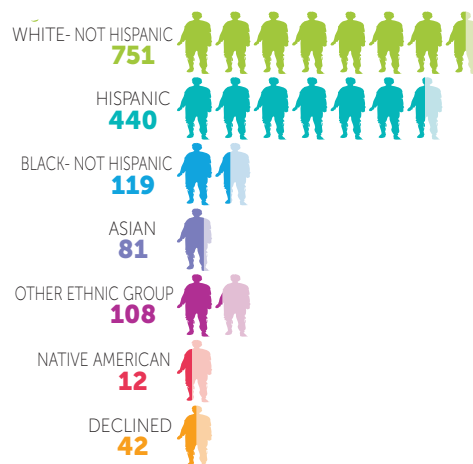
TOP 10 IDENTIFIED REFERRAL SOURCES



AGE OF CONSUMERS SERVED



RACIAL MAKE - UP OF CONSUMERS



INTRODUCTION TO THE CONSUMER CENTER'S ADVOCACY:

ELIGIBILITY AND ACCESS TO CARE

The Consumer Center's services fall into two broad categories of assistance: issues relating to coverage programs' eligibility and enrollment issues with obtaining services, and/or overcoming access to care barriers.

Our services ensure that consumers obtain and maintain benefit coverage programs for which they qualify. Staff help explain program rules and often resolve a consumer's concerns, questions, or eligibility problems within the first call to our office, while also advocating with the county's HHSA.

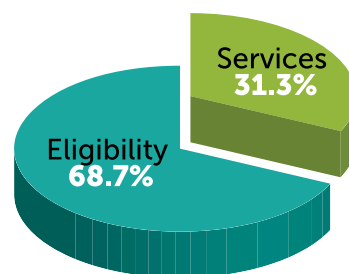
While the overall demand for individual case work ebbed due to the ongoing moratorium on negative actions, staff remained active educating the community through presentations regarding the changes to Medi-Cal eligibility rules. Further, we led or collaborated on various systems advocacy efforts to ensure compliance with and/or improve the implementation of dozens of the "flexibilities" to eligibility rules with the aim of increasing access to coverage.

Our staff also helped clients obtain necessary services from their coverage programs and managed care plans. We educated individuals on how to navigate with their health plan to obtain needed care. Clients were helped to file grievances and appeal denials of services, equipment, or supplies whether the denial was issued by a managed care plan, county-funded behavioral health provider, or the state Medi-Cal program. We helped consumers assert their rights to second opinions or access out-of-network specialists, and defended those facing inappropriate billing practices.

We continued our efforts to address health inequities in the LGBTQIA+ community, making further progress in our initiative to educate providers, health plans, and state agencies about the need to update their materials and forms to ensure compliance with SB 179 and AB 677. Both bills established data collection of non-binary gender designations and sexual orientation or gender identity (SOGI) data anytime that race/ethnicity data is collected.

The Consumer Center and our partners successfully obtained changes to a number of policies at the state agency level, including removal of gender identity references from Medi-Cal beneficiary identification cards (BICs); removal of unnecessary gender identity references to state forms and/or websites; establishment of an ongoing workgroup, and updates to agencies' websites and forms to reflect non-binary gender markers, including its complaint and Independent Medical Review forms.

ELIGIBILITY VS SERVICES



A stylized illustration of a person from the waist up, facing forward. The person has a solid orange head and neck. They are wearing a white shirt with thin yellow horizontal stripes and a light blue jacket. Their right arm is holding a grey cane. The background consists of broad, horizontal, textured brushstrokes in shades of pink, white, and teal. The overall style is modern and artistic.

CASE STORY

A 70-year-old consumer enrolled in the Medi-Cal Dental Program with physical and mental health disabilities needed general anesthesia for his medically necessary tooth extractions, due to the consumer's underlying physical and mental health disabilities. The Medi-Cal Dental Program initially denied coverage for general anesthesia for the tooth extractions. Our staff provided advice and services to the consumer that resulted in him identifying a dental provider, obtaining supporting medical records from his cardiologist, and coordinating submission of a new request for approval to the state with the new provider and supporting evidence. As a result of this extensive advocacy, the consumer's revised request for authorization for general anesthesia and extractions was approved and the services were provided.

OUTREACH & EDUCATION

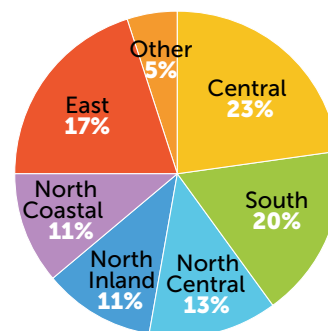
The Consumer Center has always been committed to the engagement and education of our community. Staff regularly review our outreach priorities to ensure all San Diegans, but especially underserved and hard to reach consumers, are being engaged and educated about our broad-based consumer health advocacy services. In this past year, we've prioritized reaching Black, Indigenous, and other Persons of Color (BIPOC) consumers that identify as being Limited English Proficient (LEP), have behavioral health needs, and/or identify as a member of the LGBTQIA+ community.

Throughout the last year, the Consumer Center worked diligently to remain connected to consumers, stakeholders, and partners by participating in 308 virtual and in-person presentations, trainings, social media, and outreach events. Due to the ongoing PHE, the majority of these events were hosted virtually. Toward the end of the fiscal year, however, staff were able to participate in an increasing number of in-person outreach events, including resource and community events.

Whenever possible, we asked participants to give feedback about the presentations and materials. As in past years, we received outstanding comments from consumers who attended our health education and advocacy workshops/trainings. Of those who received and responded to surveys, 98% reported increased knowledge about the services for which they are eligible, how to access services, and how to navigate the physical and behavioral health systems of care.

Likewise, 98% of CBO staff who participated and returned the Evaluation Form at our educational presentations reported increased knowledge about the physical and behavioral health benefits for which consumers are eligible and how to access them.

CASES BY HHSA REGIONS



Feedback from our Outreach Presentations

"Wow. You guys are my heroes! Thank you for the work you do. "

"Great presenter! Offered a lot of useful information and resources pertaining to our role at HHSA and personal life."

"Awesome information. Great resource for clients and community."



MEDI-CAL

There continued to be a number of substantial changes to the Medi-Cal program this year due to the ongoing PHE. The moratorium on negative actions ensured beneficiaries maintained coverage and access to services. Since 2020, the California Department of Health Care Services (DHCS) and the federal Centers for Medicaid and Medicare Services (CMS) have issued an array of COVID-19 related “flexibilities” on waiver of Medi-Cal premiums, efforts to streamline access to coverage and the application process, and the hold on redeterminations. Throughout this past year, we kept community members informed of these changes, and also maintained regular communications with HHSA Eligibility Division to confirm implementation of the guidance and, from our cases, flagged instances in which HHSA staff required additional training.

Medi-Cal programs also expanded coverage to critically vulnerable populations, including immigrants, seniors, and persons with disabilities. On May 1, 2022, adults 50 years and older became eligible for full-scope Medi-Cal benefits regardless of immigration status. Then, as of July 1, 2022, the Medi-Cal asset limit for the Aged and Disabled Federal Poverty Level program increased from \$2,000 for individuals and \$3,000 for couples to \$130,000 for individuals and \$195,000 for couples. Our staff were trained on these changes and worked with the county to help consumers enroll in the Medi-Cal program under the new asset limit.

Medi-Cal beneficiaries who contacted the Consumer Center most often required help with billing problems, especially relating to emergency and hospital-related care. For these consumers, the staff helped educate them on their rights regarding the myriad of prohibitions on billing Medi-Cal beneficiaries for covered services. Where health plans failed to pay claims for covered services, our staff also filed internal grievances and external complaints to resolve the matters. Where providers failed to comply, the Consumer Center issued cease and desist letters, and then worked with Legal Aid’s Consumer Protection Team to pursue additional remedies.

Medi-Cal consumers also sought our assistance to overcome service denials and delays. Our data shows that the most common service denial faced by consumers related to accessing dental service. In these cases, the Consumer Center represented consumers to overcome these denials and obtain needed services.

At the beginning of 2022, consumers sought our help when they no longer could fill their prescriptions at the pharmacy because of the state’s transition of drug benefits from a managed care plan covered benefit to a new state managed pharmaceutical benefit called Medi-Cal Rx. The Consumer Center resolved these individual cases and led local stakeholders’ advocacy with DHCS and Magellan when the 2022 Medi-Cal Rx transition adversely impacted thousands of San Diegans. Through this advocacy, the Consumer Center and other statewide advocates contributed to expansion and extension of continuity of care protections and waivers that enabled consumers to access needed medications.

As a result of our outreach and engagement efforts to non-binary and transgender individuals, staff helped consumers overcome denials of care and other barriers to accessing gender-affirming care. The Consumer Center found that those seeking gender-affirming care faced many barriers, including health plan staff and contracted providers who lacked cultural competency, significant delays and/or failures identifying specialists that provide gender-affirming care, and insufficient networks for specific gender-affirming care procedures. Our advocacy with agencies, health plans, and providers included efforts to improve cultural competency training as well as our staff who received additional cultural competency and substantive training regarding gender-affirming care cases.



CASE STORY

A Medi-Cal managed care member was denied gender-affirming metoidioplasty or “bottom surgery” from an out-of-network surgeon. Although the plan alleged to have qualified in-network surgeons, referrals were not given and the consumer was told it was their responsibility to find an in-network specialist. While awaiting the outcome of an appeal, the client’s primary care provider submitted a prior authorization request for the procedure and a referral to an out-of-network specialist. The plan issued a resolution upholding their denial and denied the request for the surgeon.

Through the Consumer Center, the client filed a California Department of Managed Health Care complaint highlighting several deficiencies in the plan’s network, compliance with the appeal process, and timely access to care. DMHC overturned the plan’s denials. The health plan subsequently authorized the out-of-network provider and surgery, including appropriate travel support. Days before the operation, the plan reversed their position and denied authorization for the travel and lodging expenses that were a pre-requisite for the surgery. This led to the surgery being cancelled. We again filed a DMHC complaint. As a result of our advocacy, the travel and lodging were authorized, and surgery was rescheduled.

COVERED CALIFORNIA

Over the last year or so, there have been several significant improvements to the Covered California program due to changes made both at the federal and state level. These changes helped make Covered California coverage more affordable and accessible, including lowering premiums to \$0 or \$1 per month for many consumers. The American Rescue Plan was responsible for a number of the efforts to support consumers during the ongoing pandemic, including increasing the number of financial subsidies to consumers, limiting premiums to 8.5% of household income, providing free Silver plans for those with less than 150% of the Federal Poverty Level, and extending financial help to middle-income consumers. These changes led to significant reductions in premium costs and record high enrollment. These expanded subsidies and supports were set to expire at the end of 2022, which studies confirmed would result in loss of coverage for millions nationally. However, with the Inflation Reduction Act, these expanded supports have now been secured through 2025.

At the Consumer Center, we continued to work with consumers facing a variety of both enrollment, disenrollment, and access to care barriers under their Covered California health plans. Overall, the movement of consumers between Medi-Cal and Covered California slowed considerably due to the moratorium on negative actions in the Medi-Cal program. While the reduced premiums were an incredible source of support for many, there were some unintended consequences for some older adult consumers that aged into Medicare. Some of these consumers did not realize that they continued to be enrolled, with \$0 premium, in their Covered California plan. This caused service delivery confusion and tax subsidy reporting challenges. We also helped consumers that had difficulty with accessing out-of-network care and billing issues from in-network and out-of-network providers.



CASE STORY

An 81-year-old woman with multiple mental and physical health disabilities received an eviction notice because her landlord was going to renovate the home. Our client was a recipient of a Section 8 voucher, and she had difficulties navigating the complicated relocation process without help. Our case management team connected her with the Legal Aid's housing advocate to complete and submit documents needed to relocate. Together, we found a unit for her at an affordable senior housing complex and helped her apply for county financial assistance to cover the security deposit and move-in costs. These efforts preserved the client's Section 8 voucher and prevented homelessness.



BEHAVIORAL HEALTH

For more than two decades, Legal Aid recognized that a significant percentage of our clients are those with mental health and/or substance abuse disorders. With the support of the county, the Consumer Center was created in 1999 to address the social inequities of poverty. Through these many years, approximately one-third of all clients served by the 12 Legal Aid practice teams are individuals with a disability. This percentage is even more pronounced in certain teams, including 40% of the Consumer Center clients who self-identify as having a disability.

With a diverse team of health advocates, peer specialists, and case managers, our behavioral health staff help clients access needed behavioral and physical health services. This past year, we opened 192 behavioral health grievances and appeals and short-term case management cases. Of those, 66 cases specifically involved investigations of mental health and substance abuse grievances and appeals against organizational providers and county-funded or county-operated providers and denials, reduction, and terminations of services. Of these, 58% of the mental health grievances were quality of care issues while nearly 60% of the substance abuse cases involved service denials. Staff also worked with health plans to resolve another 49 complaints involving non-county funded programs.

Substance abuse services, including medication assisted treatment and outpatient care, are part of the Drug Medi-Cal Organized Delivery System (DMC-ODS). As the county-designated Patients' Rights Advocate for outpatient behavioral health services, we advocate for increased access to services and for clients to be treated with dignity and respect.

In addition to direct advocacy work, we employ short-term case management staff who address medical and government benefit concerns and are a liaison between the Legal Aid's practice teams and outside organizations. Our case managers have found effective ways to assist consumers, including the use of emergency funds to purchase grocery gift cards, pay utility bills, and defray moving expenses. We also have a corporate Lyft account that helped safely transport clients to walk-in clinics, court, and other non-medical appointments. With the cost of housing increasing, the overwhelming need for our clients is for affordable housing. Our dedicated case managers help clients find housing and connect them to needed social services.

CASE STORY

A 61-year-old consumer suffering from mental and physical health disabilities struggled with his Section 8 housing recertification and was at risk of losing his Low-Income Housing Tax Credit Unit. The COVID pandemic coupled with an inexperienced recertifying consultant exacerbated the consumer's mental health symptoms, making it difficult for him to collect the needed documents to submit for his housing recertification.

Our staff connected the client to a mental health professional who provided telehealth support. Collaborating with Legal Aid's Housing Administrative Hearing Advocate, staff obtained and submitted all the necessary documents for the recertification. We then utilized our emergency flex funds to vaccinate the client's service dog, which allowed him to comply with a new 15-month lease and preserved his Section 8 voucher.



CCI/CAL MEDICONNECT OMBUDSMAN CMC

The Consumer Center continues to serve as the local Cal MediConnect (CMC) Ombuds contractor of the DHCS. Through this role, the Consumer Center continues to engage mental health dual eligible and CMC members through multiple outreaches per month to stakeholders, agency staff, and consumers. In this past year, we have increased our outreaches to include clients at local clubhouses and senior centers. Further, the CMC Ombuds staff have participated in multiple statewide panel presentations in coordination with DHCS on the Medi-Cal Long Term Supports and Services and Dual-Special Needs Plans (D-SNP) Workgroup. The Consumer Center has remained a local and statewide leader on the development of policies relating to the 2023 transition of CMC members to D-SNPs. Further, Consumer Center staff presented on medical debt issues to hospital and provider revenue cycle managers from health systems across San Diego and Imperial Counties. The presentation highlighted the enhanced protections available under AB 532 and AB 1020 which strengthened the Hospital Fair Pricing Act.

Moreover, Consumer Center staff continued to serve CMC consumers facing barriers to accessing care and/or facing eligibility, enrollment, or disenrollment barriers. In line with our advocacy model, we identify systemic issues through our case work and escalate those issues to local, state, and federal agency partners to be addressed. Locally, our staff identified concerning cases to the county HHSA Eligibility Operations. These issues included proper implementation of PHE flexibilities and policies, and proper processing of potentially eligible beneficiaries under the Expanded Spousal Impoverishment (ESI) eligibility rules. Our office also informed state and CMS agency partners regarding enrollment barriers for those seeking to enroll in a Medi-Cal managed care plan with either Aetna or United HealthCare in San Diego. The Medi-Cal choice form sent to dual eligible beneficiaries fails to include either health plan as an option for Medi-Cal enrollment if a consumer chooses to opt-out of CMC. This has been an ongoing issue that DHCS has yet to resolve.

While the CMC Ombudsman project will come to an end in early 2023, following the transition of CMC members to D-SNP plans, Legal Aid continues to be in discussion with DHCS to identify opportunities for Legal Aid and our statewide Health Consumer Alliance (HCA) partners to continue to support dual eligible beneficiaries.

CASE STORY

A dual eligible consumer enrolled in a local plan requested assistance through our Cal MediConnect Ombudsman hotline because she was diagnosed with cancer and in need of radiation treatments. Her treatment and the associated transportation services had been authorized and scheduled by health plan. However, days prior to her appointment, she learned that the appointment was cancelled because her enrollment had been switched to the Cal MediConnect plan in Orange County. Our staff quickly investigated and expedited the disenrollment from the Orange County plan, and reenrollment into her prior plan. Our staff also confirmed that her address was updated in the state's eligibility system to reflect her correct address in San Diego County. Through quick advocacy and assistance over a period of only three days, the system changes were made, and the consumer's appointment was maintained. The consumer received the needed radiation treatment and transportation services.



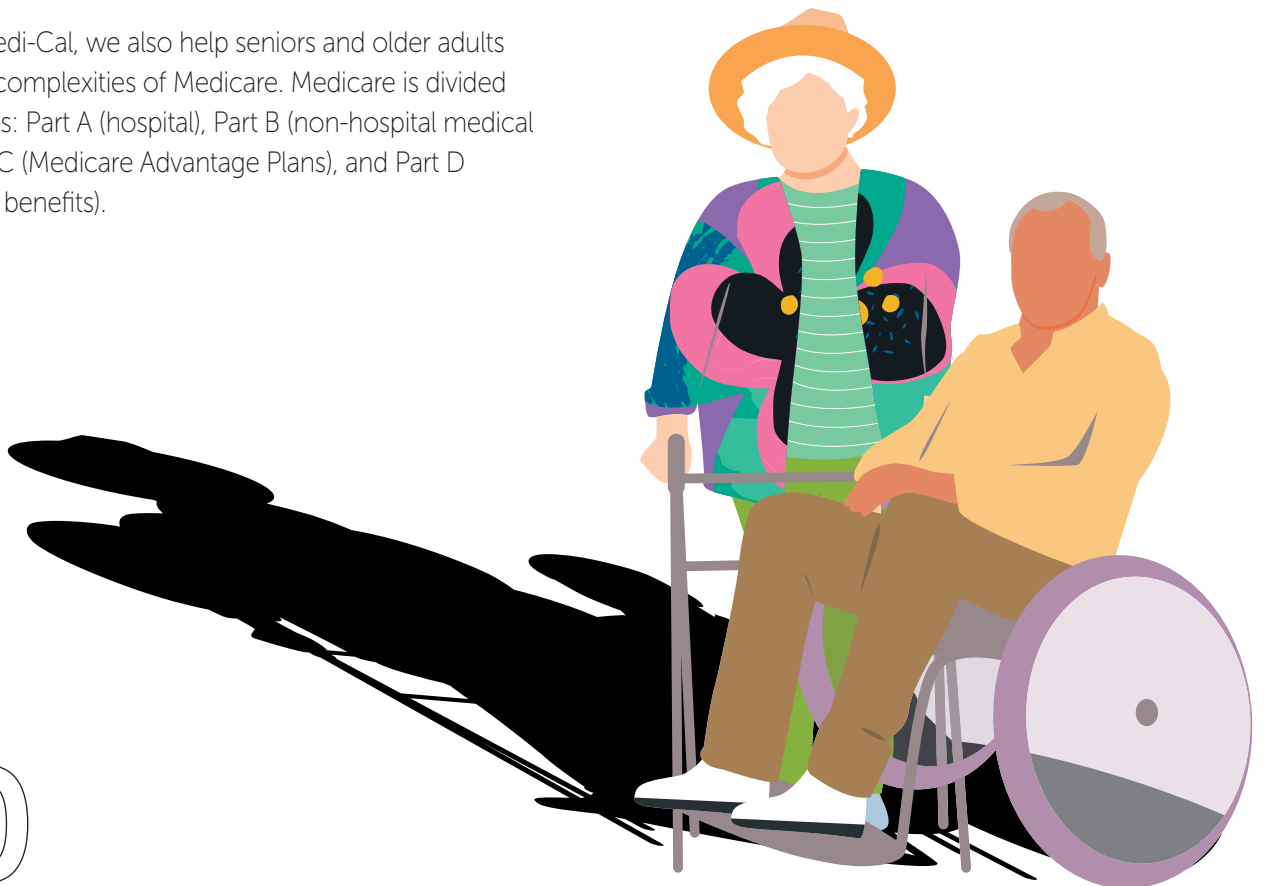
ADVOCACY FOR SENIORS

Our Health Advocacy Project (HAP) helps low-income seniors and older adults through our walk-in clinic at the Gary and Mary West Senior Wellness Center. Monday through Friday, we furnish information and advice about cost-saving programs such as Medi-Cal. We also help seniors with service issues such as transportation to medical appointments, billing problems, and enrollment and disenrollment from health plans.

Additionally, we advise on programs such as In Home Supportive Services (IHSS), which allows health-compromised individuals to remain in their homes while receiving services. Many of our clients are providing fulltime help to a disabled spouse, and IHSS allows them to gain extra income to help defray costs, as well as pay for additional caregivers who can give respite from caregiving duties.

Some individuals seek our help because they are overwhelmed by the Medi-Cal application process. Through our clinic, we give them the support they need to turn in the required documentation and complete the eligibility process. Others have a high Medi-Cal share of cost. Our staff provides guidance on ways that this cost may be eliminated, either by reducing countable income or through a supplemental plan. For some clients, they are able to apply for the Working Disabled Program that allows disabled people to qualify for free Medi-Cal with a nominal premium.

In addition to Medi-Cal, we also help seniors and older adults understand the complexities of Medicare. Medicare is divided into four sections: Part A (hospital), Part B (non-hospital medical treatment), Part C (Medicare Advantage Plans), and Part D (pharmaceutical benefits).



CASE STORY

A 68-year-old dual eligible client with physical and mental health disabilities was cut off from their established health care, and dental providers due to an improper, involuntary disenrollment from their Program of All-Inclusive Care for the Elderly (PACE). The PACE program disenrolled the consumer following alleged incidents of behavioral issues with their staff.

The Consumer Center represented consumer in an appeal at a state fair hearing and argued that PACE should be prepared to serve and de-escalate consumers with behavioral health conditions instead of disenrolling them based on challenging behaviors consistent with participants' known behavioral health conditions. We also argued that PACE did not comply with disenrollment procedures required by applicable regulations. Though the state fair hearing was not decided in their favor, we filed a complaint with the U.S. Department of Health and Human Services' Office of Civil Rights, resulting in robust negotiation with the PACE program and secured coverage for the client's needed dental work for more than \$50,000 with the preferred dentist. We also advised the client of their options for plan enrollment moving forward, including other PACE programs in San Diego, Cal MediConnect plans, and Medicare D-SNP.

Together we're making a difference in the health of California communities.

HEALTH CONSUMER ALLIANCE OFFICES

HCA is a network of ten health consumer assistance programs operated by community-based legal services organizations across the state of California. The Legal Aid Society of San Diego is the lead contract agency and coordinator for the HCA. Together with our partners, we use the lessons learned from our cases to inform our systemic advocacy.

TOLL-FREE STATEWIDE: (888) 804-3536

Fresno County

Fresno Health Consumer Center
Central California Legal Services
2115 Kern Street, Suite 1
Fresno, CA 93721
(800) 675-8001

Imperial County

Health Consumer Center
of Imperial Valley
California Rural Legal
Assistance, Inc.
449 Broadway Street
El Centro, CA 92243
(877) 734-3258

Kern County

Kern Health Consumer Center
Greater Bakersfield Legal Assistance
615 California Avenue
Bakersfield, CA 93304
(800) 896-3203

Los Angeles County

Health Consumer Center
of Los Angeles
Neighborhood Legal Services
of Los Angeles County
13327 Van Nuys Boulevard
Pacoima, CA 91331
(800) 896-3203

Orange County

Community Legal Aid SoCal
Health Consumer Action Center
2101 North Tustin Avenue
Santa Ana, CA 92705
(800) 834-5001

Sacramento, El Dorado, Placer, & 29 Other Northern and Central California Counties

Legal Services of Northern California
517 12th Street
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(888) 354-4474

San Diego County

Consumer Center for Health
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Legal Aid Society of San Diego
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Riverside & San Bernardino Counties

Inland Counties Legal Services
1040 Iowa Avenue, Suite 109
Riverside, CA 92507
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San Francisco Bay Area

Health Consumer Center
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San Mateo County

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521 East Fifth Avenue
San Mateo, CA 94402
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STATEWIDE SUPPORT

National Health Law Program

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Los Angeles, CA 90010
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Western Center on Law & Poverty

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CONSUMER CENTER FOR HEALTH EDUCATION AND ADVOCACY
A project of the Legal Aid Society of San Diego

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