

2007-2008 Program Change Request

DEPARTMENT NAME:

- ☒ San Francisco General Hospital
☐ Laguna Honda Hospital
☐ Primary Care
☐ Jail Health
☐ Health At Home

- ☐ Public Health
☐ CBHS - Mental Health
☐ CBHS - Substance Abuse
☐

DPH SECTION: San Francisco General Hospital

PROGRAM CONTACT NAME/PHONE: Sue Currin 206-6761

PROGRAM / INITIATIVE TITLE: **HAP Inpatient Costs**

GENERAL FUND: \$1,071,641

TARGETED CLIENTS: SFGH Inpatients

PROGRAM DESCRIPTION: (Description of Program Change)

(If proposing reductions to Contractors, provide name of contractor, program and amount)

Increase the budgeted resources to support an increase of approximately 1,100 patient days, as a result of services provided to additional Health Access Program patients.

JUSTIFICATION: (required by the Mayor's Office)

Based on previous studies conducted and HAP focus on primary care and prevention, SFGH anticipates 160 inpatient days for each 1,000 new HAP enrollees, for a total of approximately 1,100 additional inpatient days. Hospitalist services will be developed in order to care for the patients on the medicine wards and on clinical services requesting medical consultation. This reduces the reliance on volunteers to adequately staff the inpatient wards with medical attending physicians and responds to the reduction in house staff duty hours, which has impacted the medical services.

IMPACT ON NUMBER OF CLIENTS SERVED AND UNITS OF SERVICE PROVIDED

Approximately 1,100 new inpatient days.

EXPENSE AND REVENUE IMPACT (Reductions/Reallocations-complete supporting budget doc)

Revenues will increase by \$11,791 the first year and \$15,722 ongoing. Budgeted expenses will increase by \$1,083,432 the first year and \$1,428,855 ongoing.

IMPACT ON DEPARTMENT'S WORKFORCE (increase or decrease of FTE's)

There will be an increase of 3.52 FTE's the first year and 4.69 FTE's ongoing.

ATTACHMENT B
SUMMARY OF PROGRAM COST

INITIATIVE TITLE: HAP Inpatient Costs

Sources:		FY 2007-08 (9 months)	Ongoing (12 months)
	Revenue		
	Inpatient Other Revenues	11,791	15,722
Subtotal Sources		11,791	15,722
Uses:			
	Salaries and Fringes	\$ 504,907	\$ 673,210
	Operating Expense	578,525	771,367
Subtotal Uses		1,083,432	1,444,576
Net General Fund Subsidy Required (Uses less Sources)		\$ 1,071,641	\$ 1,428,855
Total FTE's		3.52	4.69

New Positions (List positions by Class, Title and FTE)

Class	Title	FTE's	(9 months)
2312	Licensed Vocational Nurse	0.39 \$	25,159
2320	Registered Nurse	3.13	348,846
	Fringe (35%)		130,902
Total		3.52 \$	504,907

Operating Expenses

Index Code	Character/Subobject Code		
HGHHLTHACCES	021/02700 Non personal services	\$	20,600
HGHHLTHACCES	040/04000 Materials & Supplies	\$	157,963
HGHHLTHACCES	021/02700 Professional Services (UC)	\$	536,325

Facilities Maintenance, and Equipment (List by each items by count and amount)

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DPH SECTION: SFGH,

PROGRAM CONTACT NAME/PHONE: **Roland Pickens (206-3528)**

PROGRAM / INITIATIVE TITLE: **HAP Expansion -Family Health Chronic Care Redesign**

GENERAL FUND: \$856,147

TARGETED CLIENTS: Patients needing primary care, chronic disease management and specialty care services.

PROGRAM DESCRIPTION: (Description of Program Change)

(If proposing reductions to Contractors, provide name of contractor, program and amount)

The SFGH Family Health Center will be the lead primary care clinic for 3 chronic care initiatives, which bring much needed specialty care to the patient in his/her primary care clinic: 1) Diabetes-Endocrine; 2) Back Pain-Orthopedics; 3) Mental Health-Primary Care Interface. These projects are designed to improve care for patients with these chronic conditions in FHC and selected other primary care clinics, including GMC. The costs related to the UCSF Affiliation Agreement include the cost for these new providers, as well as certain equity increases.

We propose using the chronic care expansion initiative to expand our new chronic illness management programs, including group-based care, telephone disease management, registry-based care, a new model of team-based care using Health Workers, and nurse case management. These interdisciplinary models will allow us to see more patients efficiently and effectively. In addition, these new initiatives will improve access to specialty care for many of our complicated patients with these chronic conditions, and will enhance the ability of care teams to collaborate in the care of patients.

JUSTIFICATION: (required by the Mayor's Office)

During the current fiscal year 06-07, we expect to care for over 8,000 unduplicated patients in approximately 40,000 visits. The chronic care projects will improve our ability to manage the anticipated large influx of working/employed patients with back pain and chronic medical conditions into the system. The programs will also increase access to specialty care in a cost-effective manner while enhancing collaboration between primary care providers and specialty providers in caring for complex patients with chronic conditions in the primary care setting.

IMPACT ON NUMBER OF CLIENTS SERVED AND UNITS OF SERVICE PROVIDED

We project 11,665 additional patient encounters per year. This expansion will significantly improve our capacity to decrease wait times for both primary and specialty care.

EXPENSE AND REVENUE IMPACT (Reductions/Reallocations-complete supporting budget doc)

Revenues are expected to increase by \$979,510 and expenses are expected to increase by \$1,835,657.

IMPACT ON DEPARTMENT'S WORKFORCE (increase or decrease of FTE's)

Increase 11.70 FTEs in the first year.

SUMMARY OF PROGRAM COST

INITIATIVE TITLE: HAP Expansion - Family Health Center Chronic Care

		FY 2007-08	Ongoing
Sources:			
	Medicare and Medi-cal Patient Revenues	\$ 979,510	\$ 1,306,013
Subtotal Sources		\$979,510	\$1,306,013
Uses:			
	Salaries and Fringes	\$1,151,095	\$1,534,793
	Non Personnel Services (UCSF Affiliation agreement)	\$536,326	\$715,101
	Materials and Supplies	\$148,236	\$172,315
Subtotal Uses		\$1,835,657	\$2,422,209
Net General Fund Subsidy Required (Uses less Sources)		\$856,147	\$1,116,195
Total FTE's		11.70	15.60

New Positions (List positions by Class, Title and FTE)

Class	Title	FTE's	(9 months)
2430	Medical Exam Assistant	0.64	\$33,752
2908	Eligibility Worker	1.21	\$78,366
2903	Registration Worker	0.75	\$42,500
1428	Unit Clerk	0.75	\$41,498
2328	Nurse Practitioner	1.88	\$273,804
2586	Health Worker II-Intrepreter(1.0 per 3,000 visits)	3.22	\$166,634
2586	Health Worker II	1.95	\$100,991
2930	Psychiatric Social Worker	0.75	\$58,942
2556	Physical Therapist	0.56	\$56,176
			\$852,663
	Fringes (35%)		\$298,432
	Total	11.70	\$1,151,095

Operating Expenses

Index Code

HGHHLTHACCES	021/02700 Professional Services (UC)	536,326
HGHHLTHACCES	040/04000 Materials & Supplies (one time)	19,000
HGHHLTHACCES	040/04000 Medical Supplies	129,236

Facilities Maintenance, and Equipment (List by each items by count and amount)

2007-2008 Program Change Request

DEPARTMENT NAME:

- | | |
|--|--|
| <input checked="" type="checkbox"/> San Francisco General Hospital | <input type="checkbox"/> Public Health |
| <input type="checkbox"/> Laguna Honda Hospital | <input type="checkbox"/> Mental Health |
| <input checked="" type="checkbox"/> Primary Care | <input type="checkbox"/> Substance Abuse |
| <input type="checkbox"/> Jail Health | |
| <input type="checkbox"/> Health At Home | |

DPH SECTION: San Francisco General Hospital

PROGRAM CONTACT NAME/PHONE: Roland Pickens, 206-3528

PROGRAM / INITIATIVE TITLE: **General Medicine Clinic (GMC) Continuity & Chronic Care Redesign**

AMOUNT: **\$681,545**

TARGETED CLIENTS: Patients needing primary care services of the General Medicine Clinic

PROGRAM DESCRIPTION: (Description of Program Change)

(If proposing reductions to Contractors, provide name of contractor, program and amount)

The General Medicine Clinic's ability to provide continuity of care and expand access to care is hindered by our staffing model, which relies primarily on internal medicine residents from UCSF. The problem is that the residents are only in clinic ½ day per week and frequently miss sessions because of residency work hour limitations. We propose utilizing NPs as continuity providers who will provide the "team glue" for a team of residents, attending physicians, and nursing staff. NPs will see team patients as drop-ins or on scheduled visits in the absence of the resident primary care provider, thus providing more continuity and better "hand offs" for ill patients. Organization into functional teams will also facilitate advanced access scheduling, further improving access to our primary care services.

In addition, we propose that GMC be the lead primary care clinic for 2 chronic care projects (Heart Failure and Asthma/COPD [chronic obstructive pulmonary disease]) developed under a planning grant funded by Kaiser-Community Benefit to improve care in the Safety Net. These projects (plus those noted below) are designed to improve care for patients with these chronic conditions in GMC and selected other primary care clinics, including Family Health Center. NPs will be intensively trained in heart failure and asthma and supported by part-time specialty physicians. NPs and support staff will collaborate with the patient's primary care provider in medication management, group visits, and intensive support of patient self-management. Staff will also participate in population management, such as use of registries. All projects utilize FQHC billable providers to help attain financial self-sufficiency. GMC will also participate in 3 other chronic care projects for which the Family Health Center is the lead primary care clinic (Diabetes, Mental Health / Primary Care Interface, Back Pain). These projects together will foster creative restructuring efforts to better design care for at-risk patients and communities in a cost-effective and financially sustainable manner.

JUSTIFICATION: (required by the Mayor's Office)

The Heart Failure and Asthma/COPD projects will improve our ability to manage a growing number of patients with chronic conditions, while increasing access to specialty care in a cost-effective manner, and enhancing collaboration between primary care providers and specialty providers in caring for complex patients with chronic conditions in the primary care setting.

IMPACT ON NUMBER OF CLIENTS SERVED AND UNITS OF SERVICE PROVIDED

The Heart Failure, Asthma, and GMC Continuity projects together will see 9,355 additional visits.

EXPENSE AND REVENUE IMPACT (Reductions/Reallocations-complete supporting budget doc)

Increasing expenses by \$1,310,482 and revenue by \$628,937 in the first year.

IMPACT ON DEPARTMENT'S WORKFORCE (increase or decrease of FTE's)

Increase by 9.47 FTE's in the first year and 12.63 FTEs ongoing.

**ATTACHMENT B
SUMMARY OF PROGRAM COST**

INITIATIVE TITLE:GMC Continuity Clinic & Chronic Care Redesign

Sources:	Patient Revenues	FY 2007-08	Ongoing
	Patient Revenue	628,937	838,582
Subtotal Sources		\$ 628,937	\$ 838,582
Uses:			
	Salaries and Fringes	1,028,387	1,371,183
	Non Personnel Services	240,845	321,126
	Materials and Supplies	41,250	55,000
Subtotal Uses		\$ 1,310,482	\$ 1,747,309
Net General Fund Subsidy Required (Uses less Sources)		\$ 681,545	\$ 908,727
Total FTE's		9.47	12.63

New Positions (List positions by Class, Title and FTE)

Class	Title (includes backfill leave time)	FTE's	(9 Months)
2430	Medical Exam Assistant	1.80	95,299
2320	Registered Nurse	0.00	0
2903	Registration Worker	0.68	38,250
2908	Eligibility Worker(10 min/visit)	0.68	43,862
1428	Unit Clerk(10 min/visit)	0.68	37,348
2586	Health Worker II	0.52	27,034
2586	Health Worker II-Interpreter(1.0 FTE per 3,000 visits)	2.43	125,694
2328	Nurse Practitioner	2.70	394,281
2920	Social Worker(LCSW)	0.00	0
			761,768
	Fringe (35%)		266,619
	Total	9.47	\$ 1,028,387

Operating Expenses

Index Code

HGHLTHACCES	021/02789 Professional Svcs (UCSF Affiliation Agreement)	\$	240,845
HGHLTHACCES	040/04000 Medical Supplies	\$	41,250

Facilities Maintenance, and Equipment (List by each items by count and amount)

2007-2008 Program Change Request

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☐

DPH SECTION: San Francisco General Hospital and Primary Care
PROGRAM CONTACT NAME/PHONE: Valerie Inouye, 206-3599
PROGRAM / INITIATIVE TITLE: **HAP Eligibility Costs**
GENERAL FUND: **\$1,267,615**

TARGETED CLIENTS: All HAP enrollees

PROGRAM DESCRIPTION: (Description of Program Change)

(If proposing reductions to Contractors, provide name of contractor, program and amount)

Increase resources to provide adequate screening, enrollment and follow up for all enrollees in the Health Access Program.

JUSTIFICATION: (required by the Mayor's Office)

The Health Access Program is expected to enroll approximately 43,000 patients in the first year. Most of the screening, enrollment and follow up will be done by the eligibility staff currently serving the Community Primary Care clinics and the SFGH campus. Currently, screening of outpatients for other third party coverage is done on a limited basis, depending on the clinic and demographics of the patient population. We anticipate a more thorough screening process under HAP, with the use of screening and enrollment software, such as One-E-App. In addition, currently there is little follow up on incomplete sliding scale applications. Under HAP, we are planning on more follow up activities, such as letters and phone calls.

IMPACT ON NUMBER OF CLIENTS SERVED AND UNITS OF SERVICE PROVIDED

This will impact the estimated 43,000 first year HAP enrollees.

EXPENSE AND REVENUE IMPACT (Reductions/Reallocations-complete supporting budget doc)

Expenses are expected to increase by \$1,267,615 in the first year and \$2,393,832 ongoing.

IMPACT ON DEPARTMENT'S WORKFORCE (increase or decrease of FTE's)

Increase of 14.83 FTEs 2908 the first year and 23.47 FTE's ongoing.

**ATTACHMENT B
SUMMARY OF PROGRAM COST**

INITIATIVE TITLE: HAP Eligibility Costs

	FY 2007-08 (9 Months)	Ongoing
Sources:		
	0	0
Subtotal Sources	0	0
Uses:		
Salaries and Fringes	1,267,615	2,393,832
Subtotal Uses	1,267,615	2,393,832
Net General Fund Subsidy Required (Uses less Sources)	\$ 1,267,615	\$ 2,393,832
Total FTE's	14.83	23.47

New Positions (List positions by Class, Title and FTE)

Class	Title	FTE's	(9 Months)
2908	Hospital Eligibility Worker	11.08	879,237
2105	Patient Services Technician	3.00	156,549
2948	Human Services Section Manager	0.75	73,866
			<u>1,109,652</u>
	Fringe (35%)		388,378
		<u>14.83</u>	<u>1,267,615</u>

Operating Expenses

Index Code Character/Subobject Code

Facilities Maintenance, and Equipment (List by each items by count and amount)

2007-2008 Program Change Request

DEPARTMENT NAME:

- ☐ San Francisco General Hospital
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☐ CBHS - Substance Abuse
☒ Administration

DPH SECTION: Administration

PROGRAM CONTACT NAME/PHONE: Tangerine Brigham/554.2779

PROGRAM / INITIATIVE TITLE: **HAP – Private Provider Network**

GENERAL FUND: **\$3,209,541**

TARGETED CLIENTS: 13,000

PROGRAM DESCRIPTION: (Description of Program Change)

(If proposing reductions to Contractors, provide name of contractor, program and amount)

The Health Access Program will improve access to care for an estimated 82,000 uninsured residents by developing a coordinated delivery systems of public and non-profit safety net providers, streamlining eligibility and enrollment processes, improving access to care and enhancing provider opportunities to monitor quality and health outcomes.

JUSTIFICATION: (required by the Mayor's Office)

The Health Access Program is based on a model that expands access to services by developing a broader network of providers serving the uninsured population. The San Francisco Health Plan, on behalf of DPH, has had discussions with several non-profit private providers regarding participation in HAP. While the private provider network has not been finalized, providers have expressed interest in participating and in having additional discussions regarding terms and conditions of participation. For the purposes of this budget submission, based on current discussions the expenses associated with having the following providers in the network were calculated: Kaiser, Chinese Community Health Care Association and health centers within the San Francisco Community Clinic Consortium. The budget estimate assumes both Kaiser and Chinese Community are willing to accept 1,000 uninsured clients each and accept full-risk capitation beginning January 2008. Budget estimate assumes that 75% of projected San Francisco Community Clinic Consortium population participates and that the clinics are capitated for primary care services only beginning in September 2007.

IMPACT ON NUMBER OF CLIENTS SERVED AND UNITS OF SERVICE PROVIDED

An estimated 13,000 uninsured persons will participate in the HAP and elect to have non-DPH, private network provider.

EXPENSE AND REVENUE IMPACT (Reductions/Reallocations-complete supporting budget doc)

Total of \$3,209,541 in increased expenses of which \$1,097,580 is associated with Kaiser, \$1,097,580 is associated with Chinese Community and \$1,014,381 is associated with SFCCC participating clinics.

IMPACT ON DEPARTMENT'S WORKFORCE (increase or decrease of FTE's)

N/A

ATTACHMENT B
SUMMARY OF PROGRAM COST

INITIATIVE TITLE: HAP -- Private Provider Network

	FY 2007-08	Ongoing
Sources:	\$ -	\$ -
Subtotal Sources	-	-
Uses:		
Salaries and Fringes	\$ -	\$ -
Professional Services	3,209,541	7,750,063
	-	-
Subtotal Uses	3,209,541	7,750,063
Net General Fund Subsidy Required (Uses less Sources)	\$ 3,209,541	\$ 7,750,063
Total FTE's	0.0	0.0

New Positions (List positions by Class, Title and FTE)

Class Title FTE's

Fringe (35%)

-
-
-
\$ -

Operating Expenses

Index Code Character/Subobject Code

21 Professional Services (for Kaiser, CCHCA
and SFCCC)

3,209,541 \$ 7,750,063

Facilities Maintenance, and Equipment (List by each items by count and amount)

2007-2008 Program Change Request

DEPARTMENT NAME:

- | | |
|---|--|
| <input type="checkbox"/> San Francisco General Hospital | <input type="checkbox"/> Public Health |
| <input type="checkbox"/> Laguna Honda Hospital | <input type="checkbox"/> Mental Health |
| X Primary Care | <input type="checkbox"/> Substance Abuse |
| <input type="checkbox"/> Jail Health | |
| <input type="checkbox"/> Health At Home | |

DPH SECTION: Primary Care

PROGRAM CONTACT NAME/PHONE: Marcellina Ogbu 255-3524

PROGRAM / INITIATIVE TITLE: **Centralized Access to Health Care**

AMOUNT: **\$263,092**

TARGETED CLIENTS: Patients needing primary care services In COPC

PROGRAM DESCRIPTION: (Description of Program Change)

(If proposing reductions to Contractors, provide name of contractor, program and amount)

Currently patient leaving the Urgent care clinic, ER, etc. are given a list of health centers to call for follow up appointments. Many do not follow through partly because they have to call several health centers to be able to find a clinic with appointment availability. Similarly, individuals from the community have to call several clinics to find available slots. With a patient referral system, both patients and discharge coordinators would be able to call one centralized number. The health centers will be able to manage appointments more efficiently and thereby improve access.

JUSTIFICATION: (required by the Mayor's Office)

Improve efficiency and coordination in the appointment making system, increase patient satisfaction and access to Primary Care services.

IMPACT ON NUMBER OF CLIENTS SERVED AND UNITS OF SERVICE PROVIDED

All of COPC clients

EXPENSE AND REVENUE IMPACT (Reductions/Reallocations-complete supporting budget doc)

Increasing labor expenses by \$263,092.

IMPACT ON DEPARTMENT'S WORKFORCE (increase or decrease of FTE's)

Increasing by 2.63 FTEs.

ATTACHMENT B
SUMMARY OF PROGRAM COST

INITIATIVE TITLE: Centralized Access to Health Care

	FY 2007-08 (9 Months)	Ongoing
Sources:	\$ -	\$ -
Subtotal Sources	-	-
Uses:		
Salaries and Fringes	\$ 263,092	\$ 350,789
Subtotal Uses	263,092	350,789
Net General Fund Subsidy Required (Uses less Sources)	\$ 263,092	\$ 350,789
Total FTE's	2.63	3.50

New Positions (List positions by Class, Title and FTE)

Class	Title	FTE's	(9 Months)
2320	Registered Nurse	1.13	125,555
2585	Health Worker I	1.50	69,329
			194,883
	Fringes (35%)		68,209
		2.63	\$ 263,092

Operating Expenses

Index Code Character/Subobject Code

Facilities Maintenance, and Equipment (List by each items by count and amount)

2007-2008 Program Change Request

DEPARTMENT NAME:

- | | |
|---|---|
| <input type="checkbox"/> San Francisco General Hospital | <input type="checkbox"/> Public Health |
| <input type="checkbox"/> Laguna Honda Hospital | <input type="checkbox"/> CBHS - Mental Health |
| <input type="checkbox"/> Primary Care | <input type="checkbox"/> CBHS - Substance Abuse |
| <input type="checkbox"/> Jail Health | X Administration |
| <input type="checkbox"/> Health At Home | |

DPH SECTION: Administration

PROGRAM CONTACT NAME/PHONE: Tangerine Brigham/554.2779

PROGRAM / INITIATIVE TITLE: **HAP - San Francisco Health Plan**

GENERAL FUND: **\$4,159,227**

TARGETED CLIENTS: 20,616

PROGRAM DESCRIPTION: (Description of Program Change)

(If proposing reductions to Contractors, provide name of contractor, program and amount)

The Health Access Program will improve access to care for an estimated 82,000 uninsured residents by developing a coordinated delivery systems of public and non-profit safety net providers, streamlining eligibility and enrollment processes, improving access to care and enhancing provider opportunities to monitor quality and health outcomes.

JUSTIFICATION: (required by the Mayor's Office)

The Department of Public Health will contract with the San Francisco Health Plan to administer aspects of the Health Access Program. Services will include premium billing, quality improvement, customer services, provider network development, some case management and health promotion and eligibility functions. As envisioned, under the HAP all clients will become participants in SFHP. The value of SFHP participation for the HAP is that the health plan is well-equipped to help DPH ensure that all individuals have a medical home, track and monitor quality of care, promote primary and preventive care, increase individual understanding of health promotion and education, and promote the availability of services. Estimated member months are 247,393

IMPACT ON NUMBER OF CLIENTS SERVED AND UNITS OF SERVICE PROVIDED

It is anticipated that in 2007-08, SFHP will provide assistance to 20,616 individuals.

EXPENSE AND REVENUE IMPACT (Reductions/Reallocations-complete supporting budget doc)

Increase in professional service fees in the amount of \$4,159,227.

IMPACT ON DEPARTMENT'S WORKFORCE (increase or decrease of FTE's)

N/A

ATTACHMENT B
SUMMARY OF PROGRAM COST

INITIATIVE TITLE: Health Access Program - San Francisco Health Plan

	FY 2007-08	Ongoing
Sources:	\$ -	\$ -
Subtotal Sources	-	-
Uses:		
Salaries and Fringes	\$ -	\$ -
Professional Services	4,159,227	6,529,627
	-	-
Subtotal Uses	4,159,227	6,529,627
Net General Fund Subsidy Required (Uses less Sources)	\$ 4,159,227	\$ 6,529,627
Total FTE's	0.0	0.0

New Positions (List positions by Class, Title and FTE)

Class Title FTE's

Fringe (35%)

-
-
-
\$ -

Operating Expenses

Index Code Character/Subobject Code
21 Professional Services

- \$ 4,159,227

Facilities Maintenance, and Equipment (List by each items by count and amount)

2007-2008 Program Change Request

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X Administration

DPH SECTION: Administration

PROGRAM CONTACT NAME/PHONE: David Counter/255.3575

PROGRAM / INITIATIVE TITLE: HAP – Information Systems

GENERAL FUND: \$717,129

TARGETED CLIENTS: 0

PROGRAM DESCRIPTION: (Description of Program Change)

(If proposing reductions to Contractors, provide name of contractor, program and amount)

The Health Access Program will improve access to care for an estimated 82,000 uninsured residents by developing a coordinated delivery systems of public and non-profit safety net providers, streamlining eligibility and enrollment processes, improving access to care and enhancing provider opportunities to monitor quality and health outcomes.

JUSTIFICATION: (required by the Mayor's Office)

In order to implement HAP, significant changes in the information technology (IT) enterprises for Department are needed. Changes include, but are not limited to, developing and/or enhancing billing systems, eligibility and enrollment systems, provider payment systems, electronic medical records, centralized patient registration. Appropriate assessment, development and installation of selected IT products will require staging, pre-production and production to ensure that the systems work properly. Costs relate to ongoing maintenance and transaction based services provided by Siemens Invision, the Center to Promote Healthcare Access (One-e-App) system and telecommunications systems.

IMPACT ON NUMBER OF CLIENTS SERVED AND UNITS OF SERVICE PROVIDED

N/A

EXPENSE AND REVENUE IMPACT (Reductions/Reallocations-complete supporting budget doc)

Expenses increase \$717,129 of which \$217,219 is in salary and \$500,000 is in professional services.

IMPACT ON DEPARTMENT'S WORKFORCE (increase or decrease of FTE's)

Increase of two .75FTEs (1.5FTEs) in 2007-08; ongoing 2FTEs

ATTACHMENT B
SUMMARY OF PROGRAM COST

INITIATIVE TITLE: Health Access Program Information Systems

	FY 2007-08	Ongoing
Sources:	\$ -	\$ -
Subtotal Sources	-	-
Uses:		
Salaries and Fringes	\$ 217,129	\$ 289,505
Professional Services	500,000	500,000
	-	-
Subtotal Uses	717,129	789,505
Net General Fund Subsidy Required (Uses less Sources)	\$ 717,129	\$ 789,505
Total FTE's	1.5	2.0

New Positions (List positions by Class, Title and FTE)

Class	Title	FTE's	
1053	IS Business Analyst - Senior	0.75	\$ 86,288
1054	IS Business Analyst - Principal	0.75	74,549
			-
			160,836
	Fringe (35%)		56,293
			\$ 217,129

Operating Expenses

Index Code	Character/Subobject Code	
	21 Professional Services	- \$ 500,000

Facilities Maintenance, and Equipment (List by each items by count and amount)

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☒ Administration

DPH SECTION: Administration

PROGRAM CONTACT NAME/PHONE: Tangerine Brigham/554.2779

PROGRAM / INITIATIVE TITLE: **Health Access Program -- Administration**

GENERAL FUND: **\$110,565**

TARGETED CLIENTS: 0

PROGRAM DESCRIPTION: (Description of Program Change)

(If proposing reductions to Contractors, provide name of contractor, program and amount)

The Health Access Program will improve access to care for an estimated 82,000 uninsured residents by developing a coordinated delivery systems of public and non-profit safety net providers, streamlining eligibility and enrollment processes, improving access to care and enhancing provider opportunities to monitor quality and health outcomes.

JUSTIFICATION: (required by the Mayor's Office)

The Department is undertaking an organizational wide effort to implement the Health Access Program. Administrative secretarial support is needed to support HAP staff for internal and external advisory meetings, preparing written correspondence and reports, meeting schedules and other administrative duties. Cost category also includes additional .75FTE in human resources.

IMPACT ON NUMBER OF CLIENTS SERVED AND UNITS OF SERVICE PROVIDED

N/A

EXPENSE AND REVENUE IMPACT (Reductions/Reallocations-complete supporting budget doc)

Increased expense of \$110,565 in salary and benefits.

IMPACT ON DEPARTMENT'S WORKFORCE (increase or decrease of FTE's)

Increase of 1.5FTE (1446 Secretary II and 1222 Senior Payroll and Personnel Clerk) in 2007-08; ongoing 2.0FTE

**ATTACHMENT B
SUMMARY OF PROGRAM COST**

INITIATIVE TITLE: Health Access Program Administration

	FY 2007-08	Ongoing
Sources:	\$ -	\$ -
Subtotal Sources	-	-
Uses:		
Salaries and Fringes	\$ 110,565	\$ 147,420
	-	-
	-	-
Subtotal Uses	110,565	147,420
Net General Fund Subsidy Required (Uses less Sources)	\$ 110,565	\$ 147,420
Total FTE's	1.50	2.00

New Positions (List positions by Class, Title and FTE)

Class	Title	FTE's	
1446	Secretary II	0.75	\$ 38,708
1222	Senior Payroll and Personnell Clerk	0.75	43,193
			-
			81,900
	Fringe (35%)		28,665
			\$ 110,565

Operating Expenses

Index Code	Character/Subobject Code	
		- \$ -

Facilities Maintenance, and Equipment (List by each items by count and amount)

2007-2008 Program Change Request

DEPARTMENT NAME:

- ☐ San Francisco General Hospital
☐ Laguna Honda Hospital
☐ Primary Care
☐ Jail Health
☐ Health At Home

- ☐ Public Health
☐ CBHS - Mental Health
☐ CBHS - Substance Abuse
☒ Administration

DPH SECTION: Administration

PROGRAM CONTACT NAME/PHONE: Tangerine Brigham/554.2779

PROGRAM / INITIATIVE TITLE: **Health Access Program – Revenue**

STATE FUNDING: **\$23,087,369**

TARGETED CLIENTS: 0

PROGRAM DESCRIPTION: (Description of Program Change)

(If proposing reductions to Contractors, provide name of contractor, program and amount)

The Health Access Program will improve access to care for an estimated 82,000 uninsured residents by developing a coordinated delivery systems of public and non-profit safety net providers, streamlining eligibility and enrollment processes, improving access to care and enhancing provider opportunities to monitor quality and health outcomes.

JUSTIFICATION: (required by the Mayor's Office)

The City and County received a 3-year allocation of funds from the State to support the Health Access Program (\$24.37 million a year for three years). In addition, the Department anticipates receiving additional funds to cover some portion of HAP administrative costs. Revenues have also been estimated to account for contributions from clients and employers participating in HAP to fulfill the Employer Spending Requirement.

IMPACT ON NUMBER OF CLIENTS SERVED AND UNITS OF SERVICE PROVIDED

N/A

EXPENSE AND REVENUE IMPACT (Reductions/Reallocations-complete supporting budget doc)

Increase in revenues totaling \$23,087,369.

IMPACT ON DEPARTMENT'S WORKFORCE (increase or decrease of FTE's)

N/A

ATTACHMENT B
SUMMARY OF PROGRAM COST

INITIATIVE TITLE: Health Access Program Revenue

	FY 2007-08	Ongoing
Sources:		
Health Care Coverage Initiative -- Services	\$ 18,282,369	\$ 24,374,760
Health Care Coverage Initiative -- Administration		1,412,031
Participant and Employer Fees	4,755,000	4,755,000
Point of Service Fees	50,000	50,000
Subtotal Sources	23,087,369	30,591,791
Uses:		
Salaries and Fringes	\$ -	\$ -
	-	-
Subtotal Uses	-	-
Net General Fund Subsidy Required (Uses less Sources)	\$ (23,087,369)	\$ (30,591,791)
Total FTE's	0.0	0.0

New Positions (List positions by Class, Title and FTE)

Class Title FTE's

Fringe (35%)

-
-
-
\$ -

Operating Expenses

Index Code Character/Subobject Code

- \$ -

Facilities Maintenance, and Equipment (List by each items by count and amount)