

**Department of Public Health
Base Budget FY 2005-06**

Status (Same as Jan 15th, Revised, New)	Item	Div	Description	FTE's Change	Position Change (Annual Number)	Expend Incr/(Decr)	Revenues Incr/(Decr)	General Fund	Comment
	Regulatory Issues								
New	A1	GH	Implementation of the second phase of the nurse ratio law	14.80	14.80	1,501,598		1,501,598	Per state law we need to decrease the nurse patient ratio on the acute care floor units from 6 to 1 to 5 to 1.
New	A2	LHH	Increase of staffing at LHH as required by CA Department of Health Services	4.54	6.05	450,856		450,856	Increase of staffing at LHH as required by CA Department of Health Services
	Inflationary Issues								
Same	B1	Dept wide	MOU increase to salaries and increase in cost of benefits to staff	19.34	20.85	1,952,454	-	1,952,454	Cost of closed MOU provisions and an estimated 12% increase in health and dental benefits and 6.48% increase in the city's share of the cost of retirement.
Revised	B2	Dept wide	PUC workorders			(41,063)	-	(41,063)	Inflationary increases in workorders with PUC that are offset with natural gas savings at LHH due to new boiler. Increases are \$356,127 SFGH, \$8,890 MH, \$93,920 PC, (\$500,000)LHH
Same	B3	CBHS-MH	Pharmacy Increases			1,410,000	700,000	710,000	Based on actual projected usage. A majority of the increase is due to new and more expensive medications (injectible antipsychotic medications), and an increase in the number of prescriptions. A portion of this increase will be covered by additional Medical revenues.
Revised	B4	GH	Pharmaceutical Inflation and Drug Formulary Modifications			450,000		450,000	Incremental increases in drug costs for chemotherapy, blood clotting factor for trauma services, healthy work-pharmaceutical benefit growth and impact of inflation. The increase is offset by modifying the drug formulary by reducing drugs with marginal benefits and/or replacing these with less costly alternatives.
Same New	B5 B6	EHS JH	Rent Adjust RX Formulary for Jail Health Services			16,000 (19,049)		16,000 (19,049)	Rent for Fox Plaza Streamline drug formulary by reducing the physicians choices of medication and using more generics.
	Structural Issues								
New	C1	MCH	Increase in Salary savings	(1.70)	(1.70)	(150,000)		(150,000)	Based on historical experience, and a budgeted attrition percentage of only 1% in CCS, the salary savings can be increased.
Same	C2	CBHS-MH	Salary Savings Deficit			2,500,000		2,500,000	Due to deletions of vacant positions over the past three years the budget to salary savings ratio has become very out of alignment.
			Subtotal Inflationary Issues			33,815,888	700,000	33,115,888	

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Same	C3	CBHS-MH	Position Clean-Ups	1.23	1.23	107,274		107,274	(1) reclass 1.0 2930 1.0 2932 (2) cleanup .5 2930 to 1.0 2930 (3) reclass 1.0 2903 to 1.0 2908, (4) reclass 2708 Custodian to 7524 Institutional Utility Worker, (5) reclass 1.0 2323 CNS to 2328 NP (6) reclass 1.0 2320 Nurse to 1.0 2322 Nurse manager (7)Reclass 2112 to 2116 (8) cleanup clerk typist .225
Same	C4	CBHS-MH	Reclassifications of Psychiatrist and Premiums for Child Psychiatrists			172,142		172,142	Upgrade 7.72 FTE MD's from 2230 to 2232 and increase Child Psych premiums by 5% to address Union issues and to enhance ability to hire psychiatrists.
Same	C5	CBHS-MH	IMD Alternatives Program Grant Replacement			399,444		399,444	The IMD Alternatives Grant was awarded to San Francisco to increase the movement of African American men from IMD (Locked long term care facilities) to community based placements, per the goal of the DPH to serve clients in the least restrictive setting as possible. Studies have indicated that this population has disproportionately long IMD stays.
Revised	C6	CBHS-MH	Private Provider Network (PPN) Shortfall			881,000	191,000	690,000	1. Based on the increasing usage of the private provider network over FY03-04 levels, the Department is projecting a shortfall in FY04-05. 2.) Increased enrollees in Healthy Workers (HHS) and Healthy Kids programs resulted in increased revenues. Revenues applied towards PPN shortfall, as the clients are primarily seen by the PPN.
Same	C7	CBHS-MH	Contractor Indirect			1,000,000		1,000,000	This is the portion of contractor indirect cut in 04-05 applied to CBHS-MH. This was covered with one-time savings in FY04-05.
Same	C7	CBHS-SA	Contractor Indirect			500,000		500,000	This is the portion of contractor indirect cut in 04-05 applied to CBHS-SA. This was covered with one-time savings in FY04-05.
Same	C8	CBHS-SA	Mobile Methadone Van Counseling Office Space and Van Parking			42,900		42,900	This is to replace a lost SAMHSA grant that sunsets 2/28/05. The grant funded Methadone Van parking (\$7,200/yr) and office space/utilities for staff counseling Methadone van clients (\$35,700/yr).
Same	C9	GH	Professional and Specialty Services Structural Shortfall			5,000,000		5,000,000	Based on analysis of actual Character 021 expense versus budget.
Same	C10	GH	Sheriff Workorder Underfunding			100,000		100,000	This work order increases are needed to maintain the required level of sheriff support services at the hospital.

Department of Public Health
Base Budget FY 2005-06

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Same	C11	GH	Pharmaceutical Care Network (PCN)			190,000		190,000	Outpatient pharmacy services for Healthy Worker Increase
Revised	C12	GH	Interpreters Grievance Settlement	4.95	6.60	137,215		137,215	A union grievance concerning the amount of services contracted versus the amount assigned to internal staff has reached tentative agreement and requires a shift from contracted to internal staffing that will require increased positions for SFGH.
New	C13	GH	Match Nurse staffing to current psychiatry census/adjust Urgent Care staffing	(9.08)	(10.90)	(935,149)		(935,149)	This assumes the census will continue at the current level and adjusts the nurses FTEs accordingly. The staffing in Urgent Care will be adjusted.
New	C14	GH	Underfunding of UCSF contract for radiology			2,218,337		2,218,337	Correct underfunding of UCSF radiology contract at SFGH
New	C15	GH	Restore TCM Billing support	0.83	1.00	52,442		52,442	Restore Billing Clerk that was inadvertently not restored when PHN were restored
Revised	C16	Dept wide	Worker Compensation Charges			(1,338,823)		(1,338,823)	Reduction in Workers Compensation charges based on FY 2004-05 charges. SFGH (\$1,312,082), LHH (113,069), PC 236,709, JH (\$274,115), MH 185,864, PH (62,130)
Same	C17	EHS	Consumer Assurance Operating Shortfall			40,000		40,000	Operating costs not budgeted in transfer of responsibilities
Same	C18	PC	Premium Pay			347,493		347,493	To address premium pay shortfall from RN MOU due to premium pay. PC is categorized differently from SFGH as Temp N that does not received COLA adjustments; whereas RN premium pay at SFGH is categorized as Permanent Salaries-Nurses and COLA adjustments are included per RN MOU.
Revised	C19	PC	Position Clean-Up			14,401		14,401	Correction in job classification to reflect the actual role and expanded responsibilities of a supervisory physician position for the Primary Care SPY Program.
Same	C20	Prom	Salary Savings Deficit			100,000		100,000	Reflects projected salary deficit in Health Prevention and Promotion. This program has approximately 9.5 FTE, and the budget assumes an attrition rate of 12 percent, which is much higher than a natural attrition rate. The problem is compounded because many of these positions match grant positions, so it is difficult to fulfill the grant requirements both in terms of matching requirements and in terms of working FTE.

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Same	C21	EMSA	Utilities Shortfall			13,000		13,000	Utilities are required by lease agreement and have been paid for the last two years without a budget.
New	C22	MCH	Maternal Child Adolescent Health (MCAH)/Family Planning Backfill			49,766		49,766	Funding for the Title 10 Basic Contraception Grant will be reduced in FY 2005-06. In order to maintain the Director of preconception and reproductive health additional funding is required.
New	C23	LHH	Underfunding of existing security at LHH			603,170		603,170	Address underfunding of current level of security at LHH.
New	C24	LHH	Underfunding of workorder with City Attorney			70,000		70,000	Address underfunding of current level of support by the City Attorney's Office
			Subtotal Structural Issues	(3.78)	(3.78)	12,114,613	191,000	11,923,613	
Revenue Neutral Same	D1	GH	23-Hour Chest Pain Unit	3.00	4.00	490,220	509,473	(19,253)	This plan proposes to reduce the SFGH Emergency Room diversion rates by moving low-risk chest pain patients from the ER to the creation of a 4-bed 23-hour chest pain unit; and thereby the ER can re-focus on the higher volume of emergency patients by better matching the patients to their needed level of care.
Same	D2	GH	Expansion of Operating Room	12.01	16.01	4,480,862	4,675,905	(195,043)	This program enhancement is to improve patient care services for those patients requiring surgery for orthopedic/general surgery/podiatry/neurosurgery/trauma services for all types of injuries and surgical conditions.
Same	D3	GH	Elimination of Clinical Lab Helper Positions	(2.50)	(3.00)	(87,726)		(87,726)	Elimination of lab helper positions will not impact on the clients served. Their major tasks can be replaced by the purchase of pre-assembled lab kits and sterilized supplies that are now readily available in the market; non essential functions can be maintained by other existing staff in the unit.
Same	D4	GH	Antibiotic Infusion and Therapy Services	0.75	1.00	135,414	160,709	(25,295)	This proposal will establish an oral antibiotic therapy program as a safe and more cost-effective alternative to the existing intravenous antibiotic therapy currently used for inpatient hospital services. By transitioning patients to oral therapy when possible and appropriate, this program will facilitate early hospital discharge and better utilization of resources for patients in needs of inpatient as well as skilled nursing care.

Department of Public Health
Base Budget FY 2005-06

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New	D5	GH	Short Stay Skilled Nursing Unit	17.00	34.00	1,641,563	2,491,563	(850,000)	Convert space located in 4C to a 30 bed skilled nursing unit effective January 1, 2006. Relocate the Infusion Therapy Unit to alternate space previously occupied by the Dental Clinic. This will allow patients currently treated in the acute units who require long term skilled nursing to be transferred thereby creating capacity for acute patients.
Revised	D6	CBHS - SA	Dispensing Buprenorphine Pharmacy Positions	0.35	0.55				Adds a .375 fte Pharmacy Technician (2409) and .225 fte Pharmacist (2450) who will dispense Buprenorphine to OBOT clients. Services consist of preparation of doses and dispensing Buprenorphine, client counseling, and records and inventory maintenance in accordance with State law. Funds transferred from 03500 will offset this expense. Also substitute .70 fte HWHI (2587) to .45 fte RN (2320) for OBOT program. Counselor time not needed; Nurse time needed to assist with medical issues and liaison with physicians. Funds transferred from 03500 will offset the additional cost of \$5,579.
Same	D7	LHH	Improved LHH Pharmacy TAR Approval and Collection	0.75	1.00	59,695	202,500	(142,805)	With an additional Pharmacy Tech on staff at LHH, enough resources will be available to keep current with Treatment Authorization Requests and substantially enhance Medi-Cal payments.

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Base Budget FY 2005-06**

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Revised	D8	LHH	Ancillary Reorganization	0.375	0.50	(6,619)		(6,619)	Reclass five positions to better deal with current needs. Previously budgeted positions were lost, and adjustments to the safety program are needed.
Revised	D9	PC	PC Managed Care/MediCal Patient Growth	3.75	5.00	292,111	535,199	(243,088)	To address impact of managed care patient visit growth in health centers.
New	D10	PC	Expansion of Primary Care Job Physical Services	0.38	0.50	55,418	90,000	(34,582)	Currently there are significant needs to provide DMV and job physicals to the general public. This self funded initiative proposes a pilot program for the provision of job physical services at one of the Primary Care sites in the evenings. A \$100 fee will be charged to non Primary Care clients and the Primary Care clients will continue to receive these services on a sliding scale basis.
Same	D11	HAH	Expanding Home Rehabilitation Services to Chronically Ill Clients of CHN	1.51	2.00	125,666	125,666		This self funded expansion plan proposes to increase the physical and occupational therapy capacity for home bound clients with chronic diseases including but not limiting to diabetes, congestive heart failure, and COPD. Expenses will be offset by additional Medicare and Medi-Cal revenues.
Revised	D12	CBHS-MH	Short Doyle MediCal Increase to offset State funding losses			238,888	238,888		1.) Increase in Short Doyle MediCal to offset the loss of State MIO grant funding for forensic clients with mental illness. 2.) Offset a 4% reduction in State AB2034 funding for homeless clients with Short Doyle Medi-Cal.
New	D13	CBHS-MH	MD Coverage at the SFGH Behavioral Health Center (formerly the Mental Health Rehabilitation Facility (MHRF))	0.50	0.50	89,458	89,458		As per the blue ribbon committee the proposal is to tie Psychiatric Care at MHRF to CBHS. This reflects expenses required to staff .5 2232 to cover the new floor. Revenues generated by the MD will cover the expenses.

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New	D14	CBHS - MH	EPSTD initiative	-	-	601,120	601,120	-	The Children's section of Community Behavioral Health Services (CBHS) is requesting Early Prevention, Screening, Diagnosis and Treatment (EPSDT) funding to (1) maximize reimbursement in child-care centers (and replace lost revenues), and (2) fund mental health services in residential treatment programs. The following request of \$601,120 (\$284,741 State General Fund, and \$316,379 Short Doyle MediCal match) would fund (1) \$244,870 for mental health services in center-based childcare facilities, and (2) \$356,250 for mental health services in residential treatment programs. The county match of \$31,638 will be obtained through workorders, as well as a reallocation of existing funds.
New	D15	CBHS-MH	SSI/MediCal Enhancement	2.25	3.00	313,316	604,444	(291,128)	Expansion of SSI and MediCal eligibility activities by enhancing the Department's Disability Access Evaluation Program with two Benefit Case Managers; Expanding MediCal eligibility through the assignment of two Human Services Agency (formerly DHS) Eligibility Workers to MH clinics; and Expanding Ren. Payee services.
Revised	D16	HUH	MediCal Eligibility Determination at Housing and Urban Health clinic			62,759	62,759	-	Moving 2908 off grant to FQHC MediCal @ 1.0 beginning on September 1, 2005. HRSA grant term ends Aug 31, 2005
Revised	D17	HUH	HUH Clinic Operating Costs			93,475	93,475	-	Moving clinic rent and property management off of the grant and onto FQHC MediCal.
Same	D18	HUH	Folsom-Dore hotel rooms for chronic homeless			227,766	227,766	-	Moving Folsom-Dore hotel rooms off of the Chronic Homeless grant & onto FQHC MediCal.
Revised	D19	HUH	Action Point Contract Conversion	1.50	2.00	(517,690)	(472,836)	(44,854)	Discontinues the Action Point contract with the San Francisco AIDS Foundation beginning in October 2005 and creates a new 0.75 2930 LCSW and a new 0.75 2320 RN.
Same	D20	LHH	Lab Billing			(472,836)	(472,836)	(44,854)	SFGH performs lab testing for LHH. Up to now, LHH did lab billing and paid SFGH. Proposal would transfer budgeted LHH lab revenue and expenses to SFGH. SFGH would do billing. No net change to DPH budget.

**Department of Public Health
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Same	D21	GH	Lab Billing				(44,854)	44,854	SFGH performs lab testing for LHH. Up to now, LHH did lab billing and paid SFGH. Proposal would transfer budgeted LHH lab revenue and expenses to SFGH. SFGH would do billing. No net change to DPH budget.
New	D22	PC	Access to Specialty Services	0.75	1.00	131,654	225,000	(93,346)	This initiative proposes for a new podiatry service that is currently identified as one of many underserved specialty services at the San Francisco General Hospital and Primary Care health centers. Implementation of this new specialty program will reduce a projection of more than 80% of the waiting time that is based on the result of an existing pilot project at the Potrero Hill Health Center.
Revised	D23	PH	Adult Immunization Clinic	0.45	0.45	318,705	318,705	-	Adjust fees to remain competitive with similar clinics in the San Francisco Area and fully cover costs including marketing/outreach/advertising efforts.
New	D24	PH	Move viral load, gonorrhea, chlamydia testing to the SF Public Health Lab			(30,000)		(30,000)	Move Ward 86 viral load HIV testing, gonorrhea, and chlamydia testing from SFGH to the SF Public Health Lab and offset test supplies funded in the General Fund by increased grant revenue
Revised	D25	MCH	CCS - Medical Therapy Program	1.31	1.75	135,464	135,464	-	Position Cleanup-The State approved 100% funding for 1FTE, 2548-Occupational Therapist and .78FTE, 2556-Physical Therapist
			Subtotal Revenue Neutral	44.14	70.26	8,851,519	10,870,404	(2,018,885)	
Same	E1	CBHS-MH	3rd Party Reimbursement Revenues				150,000	(150,000)	1.) 3rd Party reimbursement increasing due to measures implemented to improve collection rate 2.) Due to a 42% increase in claims submitted to Medicare based on additional sites becoming Medicare certified, a 30% increase in revenues is estimated.

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Same	E2	CBHS-MH	Short Doyle MediCal deficit				(1,119,817)	1,119,817	In FY04-05, the Department budgeted the revenues associated with the Federal government which assumed a greater portion of the MediCal to County sharing ratio. However, this ratio is reverting back to 50/50 in FY05-06, so this creates a structural problem as expenses were budgeted against it.
Revised	E3	GH	Revenue Build-Up			19,456,907		(19,456,907)	Based on revenue buildup
Same	E4	GH	Loss of First 5 Commission funding for Healthy Kids			(488,000)		488,000	Reduction in funding from First 5 Commission for Healthy Kids
New	E5	GH	Economic Impact of the SFGH-LHH Patient Flow Policy Change				(1,700,000)	1,700,000	Reversal of LHH admissions policy
New	E6	PC	Increase Nurse Practitioner Productivity and Revenue				100,000	(100,000)	Reallocation of existing Nurse Practitioners from non-productive Primary Care sites to where services are needed. The increased NP productivity is projected to generate additional annual Medi-Cal revenue of \$100,000.
Same	E7	LHH	Out Patient and Profession Fee Revenue				203,820	(203,820)	Charge for Medi-Cal clinic facility fee and Medicare professional fees
Same	E8	LHH	Acute Ward MTA				235,722	(235,722)	Transfer Skilled Nursing Unit patients requiring intravenous treatment to MTA, the Acute Medical Unit.
Same	E9	LHH	Inpatient Professional Fees				64,441	(64,441)	Enhance billing for Physician services related to discharge summaries and annual assessments.
Same	E10	LHH	Parking Revenue Shortfall				(129,180)	129,180	The number of parking spaces during the evening shift, for which fees could be recovered, was over-estimated during early planning stages of the parking revenue initiative.
New	E11	LHH	Psychologists Billing				110,000	(110,000)	Begin billing for Psychologist encounters. Required, new licensure ready by July.
Same	E12	EHS	Revenue Build-Up				19,250	(19,250)	BOS increased Food Establishment License Fees (\$934,114 in FY 2005-06), Tattoo and Body Piercing Fees (\$936 in FY 2005-06) and Massage New Permit Inventory Fees (\$12,200). Since \$928,000 was already taken into account with the mid-year reductions the remaining \$19,250 is the balance.
Same	E13	EHS	Hazardous Materials and Medical Waste Program Fee Increase				354,858	(354,858)	Fee increase for hazardous materials and medical waste programs which represents the second year of a three year programmed fee increase. The fees are pursuant to an ordinance passed in 2004. After the 06-07 budget year, fees will increase per the CPI.

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New	E14	EHS	Water Revenue				3,000	(3,000)	Increased revenue due to increased inventory.
New	E15	Dept	Increase Parking fee due to MUNI Fastpass increase				44,050	(44,050)	Based on union agreements, as the MUNI Fastpass increases the parking fee at DPH increases. The impact of \$5.00 increase effective Sept 1st is \$39,700 at LHH, \$2,400 PH, and \$1,950 at PC.
			Subtotal Increased Revenue				17,305,051	(17,305,051)	
			Total Inflationary/Structural/Revenue Neutral/Increased Revenue	59.70	87.34	56,734,473	29,066,465	27,668,019	
Expand Community Based Alternatives									
New	F1	CBHS - MH	State Hospital Bed Conversion			(101,028)		(101,028)	Proposal to convert one state hospital bed to a lower level of care. There will be a reduction of \$ 160,180 in cost to Napa State Hospital with a reallocation of \$ 59,152 to fund a long-term care bed.
			Subtotal Community Based Alternatives			(101,028)		(101,028)	
Focus Resources To Those Most in Need									
Administration and Operation Reductions									
New	G1	Dept	Administrative Cuts	(8.27)	(9.80)	(896,444)		(896,444)	
New	G2	GH	Workers compensation Clinic closure	(8.66)	(10.39)	(1,327,744)	(391,384)	(936,360)	Close Worker's Comp Clinic at SFGH, allowing DHR to find lower cost case management services.
New	G3	LHH	Operating Staff Reductions	(4.51)	(4.85)	(487,717)		(467,717)	Deletion of operating positions
New	G4	LHH	Reduction in Contracted Services, Materials, and Supplies			(205,142)		(205,142)	Linen Laundering Contract adjustment, Equipment Lease budget adjustment, and reduction in Materials/Supplies.
New	G5	JH	Jail Health Services Operating Reductions	0.83	1.00	(156,975)		(156,975)	Reductions in professional and specialized services, materials and supplies and other operating expenditures.
New	G6	CBHS - MH	Consolidate Client Services Reimbursement Mechanism			(100,000)		(100,000)	Proposal to change the contractual reimbursement methodology for client wrap-around services
New	G7	AIDS	Work Re-entry and Employment Program - Positive Resources Center			(110,351)		(110,351)	Reduce contractual service for the HIV Health Service work re-entry and employment program
New	G8	LHH	Reduction of UCSF Contract			(196,000)		(196,000)	Discontinue Nurse Practitioners agreement with UCSF.

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New	G9	JH Services funded by SA	Reduction of funding for the Sheriff's Department Post Release Education Program (PREP)			(50,000)		(50,000)	This program provides education and job-readiness services to jail inmates and is funded by Substance Abuse. The proposed reduction represents 10 months of funding for this program. The Sheriff's Department has not provided service data with regard to this program. Therefore, the impact on the number of clients served and the related units of service provided is unknown.
New	G10	JH Services funded by SA	Reduction of funding for the Sheriff's Department Roads to Recovery Program			(83,333)		(83,333)	This program provides educational services relating to life skills, health education and literacy provided by a Sheriff Department subcontractor to jail inmates and funded by Substance Abuse. The proposed reduction represents 10 months of funding for this program. The Sheriff's Department has not provided service data with regard to this program. Therefore, the impact on the number of clients served and the related units of service provided is unknown.
			Subtotal Administration and Operations Reductions	(20.61)	(24.04)	(3,593,706)	(391,384)	(3,202,322)	
Behavioral Health Substance Abuse New	H1	CBHS - SA	Reduction of funding for Bayview Hunters Point Foundation Acupuncture			(124,063)		(124,063)	This program provides acupuncture services to adults currently receiving substance abuse treatment services in Bayview Hunters Point's treatment programs. With the elimination of this acupuncture program, there would be a reduction of service to 56 unduplicated with an equivalent of 2,800 units of service.
New	H2	CBHS - SA	Reduction of funding for New Leaf Acupuncture			(20,494)		(20,494)	This program provides harm reduction acupuncture services to Lesbian, Gay, Bi-sexual and Transgender adults who participate in other New Leaf substance abuse treatment programs. With the elimination of this acupuncture program, there would be a reduction of service to 32 unduplicated clients with the equivalent loss of 750 units of service.
New	H3	CBHS - SA	Rebid Substance Abuse Adult Outpatient Services			(2,067,024)	(163,000)	(1,904,024)	Rebid Substance Abuse Adult Outpatient Substance Abuse Services

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New	H4	CBHS - SA	Methadone Maintenance, Contractor TBD			375,000	198,516	176,484	This will add 125 Methadone maintenance slots to expand opiate treatment capacity. Funds will be allocated pursuant to an RFP.
New	H5	CBHS - SA	Residential Services Treatment Design Modification			(1,120,500)		(1,120,500)	The Department will issue an RFP to select the most appropriate mix of supportive housing, residential recovery services or continuation of a portion of existing residential treatment services.
		Subtotal Substance Abuse		-	-	(2,957,081)	35,516	(2,992,597)	
Mental Health									
New	I1	CBHS - MH	Reduce funding to Under Utilized contracts			(206,044)	(82,083)	(173,961)	This is a proposal to reduce funding to underutilized contracts who have not met their contractual obligation over the last two years. This will be based on the review of cost reports for 03-04, 04-05 and current year expenditure.
New	I2	CBHS - MH	Conversion of residential mental health treatment programs to supportive housing			(1,574,266)	(493,713)	(1,080,553)	Conversion of 79 residential mental health treatment programs to supportive housing
		Subtotal Mental Health		-	-	(1,780,310)	(525,796)	(1,254,514)	
Housing									
New	J1	HUH	SRO Collaboration Contract Reduction			(658,333)		(658,333)	Current funding for the SRO Collaborative contracts is \$800,000. The SRO Collaboratives provide comprehensive community outreach and education regarding fire prevention, community stabilization and health and well being in SRO buildings in Chinatown, North Beach, Tenderloin and Mission districts. The proposed reduction will be effective September 1, 2005.
		Subtotal Housing		-	-	(658,333)	-	(658,333)	
HIV/AIDS									
New	K1	AIDS	Reduce Peer Advocacy/Treatment Advocacy Services/Case Management Services Practical Support			(996,272)	-	(996,272)	To protect medical, mental health, housing and substance abuse services, will decrease case management, treatment advocacy, nutritional counseling and practical support.
		Subtotal HIV/AIDS		-	-	(996,272)	-	(996,272)	
Pharmacy									
New	L1	GH	Institute copay for all persons without GA	1.67	2.00	(980,111)	541,389	(1,521,500)	Institute copay for all persons without GA (free insulin, antibiotics, antipsychotic, and AIDS medication due to ADAP). All others \$5 and \$10 prescription copay.
		Subtotal Pharmacy		1.67	2.00	(980,111)	541,389	(1,521,500)	

Department of Public Health
Base Budget FY 2005-06

Status (Same as Jan 15th, Revised, New)	Item	Div	Description	FTE's Change	Position Change (Annual Number)	Expend Incr/(Decr)	Revenues Incr/(Decr)	General Fund	Comment
			Subtotal Community Based Alternative, Focus Resources, Behavioral Health, Housing, Health at Home and HIV/AIDS	(18.94)	(22.04)	(11,066,841)	(340,275)	(10,726,567)	
			Use of one-time rollover funds				3,941,452	(3,941,452)	
			Total Reductions and use of one-time rollover funds	(18.94)	(22.04)	(10,965,813)	3,601,178	(14,566,991)	
			Net growth in General Fund	40.76	65.30	45,667,632	32,667,632	13,000,000	

Department of Public Health Contingency Budget FY 2005-06							
Item	Div	Description	Position Change (Annual Number)	Expend Incr/(Decr) (Annual Number)	Revenues Incr/(Decr) (Annual Number)	General Fund (Annual Number)	Comment
1	CBHS - MH	UC Crisis Resolution Team		(318,722)	(82,500)	(236,222)	Reduction of contract with UC Crisis Resolution Team which provides short-term extended brokerage case management to clients in PES and Inpatient Units at SFGH. Some capacity can be absorbed by non-contract component of program, as well as the Community Programs Placement Unit, and other Dept. linkage services.
2	GH	Close Dialysis Unit		(3,193,559)	(2,786,827)	(406,732)	Patients will be referred to other non-profit and for profit groups. All patients needing dialysis have Medicaid and none are indigent. Physical plant of existing Dialysis Center is inadequate
3	CBHS - SA	Reduction of funding for outpatient substance abuse treatment for special populations		(3,062,028)	(18,000)	(3,044,028)	With current array of services will result in loss of 185 static slots, we hope to minimize loss through gain in efficiency in the bidding process
4	CBHS - SA	Rebid adult outpatient Substance Abuse Services		(1,079,000)	(79,000)	(1,000,000)	Rebid Adult Outpatient Substance Abuse Services which would result in an additional loss of 57 static slots.
5	CBHS-MH	Conversion of residential mental health treatment programs to supportive housing		(1,476,886)	(517,228)	(959,658)	Conversion of 38 residential mental health treatment programs to supportive housing
6	HAH	Deletion of PHN Chronic Care Service and Skilled Home Care Services	(26.49)	(2,898,130)	(1,035,199)	(1,862,930)	Elimination of the Public Health Nurses for chronic care and skilled home care services will result in a total loss of 3,330 visits and will impact 927 unduplicated clients.
7	AIDS	Reduction to HIV Prevention Services		(1,400,000)		(1,400,000)	Reduce contractual services with various HIV Prevention Services to various behavioral risk populations. Contractors will be identified after the RFP process.
8	CBHS - MH	Reduction to Outpatient Mental Health Services	(3.00)	(813,179)	(213,179)	(600,000)	Reductions to non profit contractors of between \$25k to \$75k for outpatient services, based on size of contract and impact of mid-year reductions:
Subtotal			(29.49)	(14,241,504)	(4,731,933)	(9,509,570)	
9	PC	Close Health Center and sell building			2,000,000	(2,000,000)	Based on selling the building
Subtotal with Sell Health Center			(29.49)	(14,241,504)	(2,731,933)	(11,509,570)	
OR							
10	PC	Primary Care Clinic Hour Reduction	(41.1)	(3,666,667)	(1,400,000)	(2,266,667)	Based on closing all Health Centers 20% of the time.
Subtotal with Reduction in Health Center Hours			(70.55)	(17,908,170)	(6,131,933)	(11,776,237)	

