Initiative Number __A3____
(Leave blank)

2007-2008 Program Change Request

DEPARTMENT NAME:

- X 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: **Quality Management Data Requirements**
GENERAL FUND: **$129,104**

TARGETED CLIENTS: NA

PROGRAM DESCRIPTION: (Description of Program Change)
(If proposing reductions to Contractors, provide name of contractor, program and amount)

SFGH is facing an increase in required data reporting for quality indicators.

The Quality Initiative of the Hospital Quality Alliance requested "voluntary" reporting by hospitals on quality measures related to Acute Myocardial Infarction (AMI), Heart Failure (HF) and Pneumonia (PN). The quality data are publicly reported through the CMS Hospital Compare website. Hospitals that do not "voluntarily" submit the data will not receive full annual Medicare payment updates. The published Centers for Medicare & Medicaid Services (CMS) inpatient prospective system rule for 2006, SFGH will receive a .4% payment for reporting. In FY 2007, the Deficit Reduction Act, Section 5001(a) increases the payment differential for reporting pay for performance measures to 2%. In FY 2009, the requirement will expand to include reporting actual performance against national benchmarks with a requirement to submit action plans to make improvements when data is below the established benchmarks. SFGH is required to participate in the CHART (California Hospital Assessment and Reporting Task Force) initiative, which includes new intensive care indicators on ventilator associated pneumonia and mortality beginning in 2007. SFGH continues to participate in required initiatives that are also linked to reimbursement from Medi-Cal and managed care plans (San Francisco Health Plan). The demand for monitoring and reporting in these areas has increased every year.

In 2006, CMS also required submission of data on patient experience, which requires participation in the HCAHPS patient survey. This will require additional staff time to implement, coordinate and analyze the survey data and take appropriate actions when data results are below "established" benchmarks. CMS is scheduled to link the results of patient survey to Medicare reimbursement beginning in 2009. The current national trend to increasingly require data from hospitals for public reporting confirms the need to have appropriate level staff in Quality Management to assure timely submissions, data completeness and accuracy.

In order to meet these increasing requirements, a 1.00 FTE 0931Manager II is needed to manage the increasing burden of requests for quality data from various third-parties and coordinating regulatory and pay for performance measures to external organizations.

The QM Department will delete a 1.00 FTE 2819 Assistant Health Educator and add 1.00 FTEs 2119 Health Care Analysts who will be responsible for collecting and analyzing data as well as facilitating the development of appropriate actions when data results are below "established" benchmarks.

JUSTIFICATION: (required by the Mayor's Office)

This data submission requires extensive staff time in Quality Management to abstract medical records, review and revise data for accuracy, complete timely submissions to the data vendor, analyze reports, distribute and review with appropriate staff for appropriate quality improvement initiatives, as indicated. If SFGH does not have appropriate resources to adequately comply with these data requirements, there would be a significant loss of annual revenue from CMS.

IMPACT ON NUMBER OF CLIENTS SERVED AND UNITS OF SERVICE PROVIDED

None.

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

Labor expenses will increase by $129,104 in the first year and $172,139 thereafter.

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

Increasing by 0.75 FTEs in FY 2007-08 and 1.00 FTEs ongoing.

ATTACHMENT B
SUMMARY OF PROGRAM COST

INITIATIVE TITLE: Quality Management Data Requirements

	FY 2007-08 (9 Months)	Ongoing
Sources:	$ -	$ -
Subtotal Sources	-	-
Uses:		
Salaries and Fringes	$ 129,104	$ 172,139
Subtotal Uses	129,104	172,139
Net General Fund Subsidy Required (Uses less Sources)	$ 129,104	$ 172,139
Total FTE's	**0.75**	**1.00**

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

Class	Title	FTE's	(9 Months)
2819	Assistant Health Educator	(0.75)	(54,054)
2119	Health Care Anaylst	0.75	59,300
0931	Manager II	0.75	90,387
			95,633
	Fringes (35%)		33,471
	Total =	0.75	$ 129,104

Operating Expenses
Index Code Character/Subobject Code

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

Initiative Number __A5____
(Leave blank)

2007-2008 Program Change Request

DEPARTMENT NAME:

- ☐ San Francisco General Hospital
- ☒ Laguna Honda Hospital
- ☐ Primary Care
- ☐ Jail Health
- ☐ Health At Home
- ☐ Public Health
- ☐ Mental Health
- ☐ Substance Abuse
- ☐

DPH SECTION: Laguna Honda Hospital and Rehabilitation Center (LHHRC)
PROGRAM CONTACT NAME/PHONE: Lisa Pascual, MD, 759-2355 and John Kanaley 759-2367
PROGRAM / INITIATIVE TITLE: **LHH Rehabilitation Fall Risk Management Program**
GENERAL FUND: **$86,007**

TARGETED CLIENTS: LHHRC residents at risk for falls.

PROGRAM DESCRIPTION: (Description of Program Change)
(If proposing reductions to Contractors, provide name of contractor, program and amount)

Many of the factors that increase the risk for mobility problems and falls among residents at LHHRC are preventable and even reversible through the early detection of physical impairments and functional limitations. A fall risk management team consisting of a Physical Therapist and an Occupational Therapist can effectively address fall risk assessment and intervention programs at LHHRC.

JUSTIFICATION: (required by the Mayor's Office)

In surveys of nursing home populations, the percentage of residents who fall each year ranges from 16% to 75%, with an overall mean of 43%. In the United States, nursing home residents 85 years and older account for one out of five fatal falls. More than 40% of those hospitalized for hip fractures never return home or live independently again and 25% will die within one year.

State surveyors repeatedly cite fall risk assessment and prevention at LHHRC as cause for concern.

A recent RAND meta-analysis of fall prevention interventions revealed that structured programs reduced fall rates on average by 23%. The most potent program types included multi-factorial risk assessment and management (40% reduction in fall rates).

IMPACT ON NUMBER OF CLIENTS SERVED AND UNITS OF SERVICE PROVIDED

The provision of additional staff to meet the demand for services outlined above will augment falls prevention and restraint reduction activities through more timely rehabilitation evaluations, thereby reducing the number of falls and injuries related to falls.

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

During the initial fiscal year, this initiative adds $101,117 in salaries and fringe benefits. It generates $15,110 in reimbursements for additional visits to therapists and, therefore, would be a net General Fund impact of $86,007. The net additional General Fund required annualizes to $114,677 in subsequent fiscal years.

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

This initiative adds 0.75 FTEs to the LHHRC workforce during FY 2007–08, which annualizes to 1.0 FTEs in subsequent fiscal years.

ATTACHMENT B
SUMMARY OF PROGRAM COST

INITIATIVE TITLE: LHH REHABILITATION SERVICES - FALL RISK MANAGEMENT PROGRAM

	FY 2007-08	Ongoing
Sources:		
Medi-Cal Reimbursement Skilled Therapies	$ 15,110	$ 20,147
Subtotal Sources	15,110	20,147
Uses:		
Salaries and Fringes	$ 101,117	$ 134,823
	-	-
Subtotal Uses	101,117	134,823
Net General Fund Subsidy Required (Uses less Sources)	$ 86,007	$ 114,676
Total FTE's	**0.75**	1.0

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

Class	Title		
2556	Physical Therapist	0.38	0.50
2548	Occupational Therapist	0.38	0.50
		0.75	1.00
	Cost of position 2556	37,451	49,935
	Cost of position 2548	37,451	49,935
	Total Cost	74,902	99,869
	Fringe (35%)	26,216	34,954
		$ 101,117	$ 134,823

Initiative Number B1
(Leave blank)

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: STD Prevention and Control Services
PROGRAM CONTACT NAME/PHONE: Wendy Wolf 487-5501
PROGRAM / INITIATIVE TITLE: **City Clinic Rent Increase**
GENERAL FUND: **$24,135**

TARGETED CLIENTS: STD Program Staff as well as staff and patients of the St. James Infirmary

PROGRAM DESCRIPTION: (Description of Program Change)
(If proposing reductions to Contractors, provide name of contractor, program and amount)

STD staff is housed in two leased spaces.

- 1360 Mission St, Suite 401 (since 1992) STD Admin, Epidemiology, Special Proj and Research
- 1372 Mission St (since 1988) (St. James Infirmary (SJI)) – The site originally housed the STD Training Center, research staff and our HIV counseling and CARE program. For the past three years, the site has primarily housed SJI staff that provides STD and HIV clinical and counseling services to persons in the sex industry.

Rent is funded by the General Fund and grants from the AIDS office.

JUSTIFICATION: (required by the Mayor's Office)

In FY 2007-08 the rental costs will be:

1360 Mission Street, Suite 401	12 mo. x $8,925/mo =	$111,384
1372 Mission Street	12 mo. x $2,938/mo =	$ 35,256
Total Expenses		$146,640

The base budget is $72,300 in the General Fund and $50,205 in grants from the AIDS office for a total of $122,505. The shortfall is $24,135.

IMPACT ON NUMBER OF CLIENTS SERVED AND UNITS OF SERVICE PROVIDED

17,000 unduplicated clients annually for a total of approximately 30,000 patient visits per year.

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

An increase in rent budget of $24,135

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

None

ATTACHMENT B
SUMMARY OF PROGRAM COST

INITIATIVE TITLE: City Clinic Rent Increase

		FY 2007-08	Ongoing
Sources:			
	STD General Fund		$ -
Subtotal Sources		-	-
Uses:			
	Salaries and Fringes	$ -	$ -
	Rent	24,135	24,135
		-	-
Subtotal Uses		24,135	24,135
Net General Fund Subsidy Required (Uses less Sources)		$ 24,135	$ 24,135
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		
HCHPDSTDSVGF	030/03011	$24,135	$ 24,135

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

Initiative Number B5
(Leave blank)

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: Department Wide
PROGRAM CONTACT NAME/PHONE: Pamela Levin 554-2605
PROGRAM / INITIATIVE TITLE: **Contractor's Cost of Doing Business**
GENERAL FUND: **$4,336,553**

TARGETED CLIENTS:

PROGRAM DESCRIPTION: (Description of Program Change)
(If proposing reductions to Contractors, provide name of contractor, program and amount)

The Mayor's Budget Instructions ask departments to take into consideration the cost pressures affecting our Community-Based Partners. Specifically, we have been asked to consider reallocating base budget to provide for cost increases impacting contractors. We are building a 2% increase in the budget as a placeholder as we work with our contractors to evaluated needs. This estimate includes all contracts in Behavioral Health, Jail Health, and AIDs along with MOU provisions for UC Faculty.

JUSTIFICATION: (required by the Mayor's Office)

An estimate on the impact of a 2% cost of doing business.

IMPACT ON NUMBER OF CLIENTS SERVED AND UNITS OF SERVICE PROVIDED

None

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

$4,336,553 in professional services

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

N/A

ATTACHMENT B
SUMMARY OF PROGRAM COST

INITIATIVE TITLE: Contractor's Cost of Doing Business

	FY 2007-08	Ongoing
Sources:	$ -	$ -
Subtotal Sources	-	-
Uses:		
Salaries and Fringes	$ -	$ -
Professional Services	4,336,553	4,336,553
	-	-
Subtotal Uses	4,336,553	4,336,553
Net General Fund Subsidy Required (Uses less Sources)	$ 4,336,553	$ 4,336,553
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	
	Professional Services	$ 4,336,553

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

Initiative Number B6
(Leave blank)

2007-2008 Program Change Request

DEPARTMENT NAME:

- X San Francisco General Hospital
- ☐ Laguna Honda Hospital
- ☐ Primary Care
- ☐ Jail Health
- ☐ Health At Home
- ☐ Public Health
- ☐ CBHS - Mental Health
- ☐ CBHS - Substance Abuse
- ☐

DPH SECTION: SFGH
PROGRAM CONTACT NAME/PHONE: Valerie Inouye, 206-3599
PROGRAM / INITIATIVE TITLE: **UCSF Affiliation Agreement – Non-Faculty Cost of Doing Business**
GENERAL FUND: **$2,134,049**

TARGETED CLIENTS: All Clients

PROGRAM DESCRIPTION: (Description of Program Change)
(If proposing reductions to Contractors, provide name of contractor, program and amount)

This request is to add $2,134,049 to the UCSF Affiliation Agreement for amounts contractually obligated to the UCSF staff based on anticipated increases in the MOUs. This amount does not include any increases in physician compensation.

JUSTIFICATION: (required by the Mayor's Office)

UCSF physicians provide direct clinical services the City needs to continue to operate the hospital, which includes level 1 trauma services. Funding is required to continue the current level of services. Any changes will be done through a collaborative process between UCSF, the medical staff and hospital administration.

IMPACT ON NUMBER OF CLIENTS SERVED AND UNITS OF SERVICE PROVIDED

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

$2,134,049 in contractual services

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

None.

ATTACHMENT B
SUMMARY OF PROGRAM COST

INITIATIVE TITLE: UCSF Affiliation Agreement - Non Faculty Cost of Doing Business

		FY 2007-08	Ongoing
Sources:		$ -	$ -
Subtotal Sources		-	-
Uses:	Operating Expenses	$ 2,134,049	$ 2,134,049
Subtotal Uses		2,134,049	2,134,049
Net General Fund Subsidy Required (Uses less Sources)		$ 2,134,049	$ 2,134,049
Total FTE's		**0.00**	**0.00**

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

Class	Title	FTE's
	Fringes (35%)	

Operating Expenses

Index Code	Character/Subobject Code	
HGH1HUN40061	021/02700 Professional Services (UC)	$ 2,134,049

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

56

Initiative Number C7
(Leave blank)

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 Inpatient
PROGRAM CONTACT NAME/PHONE: Valerie Inouye 206-3599
PROGRAM / INITIATIVE TITLE: **Increase SFGH budgeted ADC + 12**
GENERAL FUND: **$0**

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 increased inpatient census of 12 beds in the Medical/Surgical and Critical Care units at San Francisco General Hospital.

JUSTIFICATION: (required by the Mayor's Office)

In FY 2005-06 San Francisco General Hospital's actual Average Daily Census ran at 317.1 or 14.1 beds over budget. In the current year through December, the actual Average Daily Census is running at 332.4 or 29.4 beds over budget. Actual census that exceeds the budgeted census results in the hospital exceeding budgeted spending appropriation and requires the Department to request a supplemental appropriation from the Board of Supervisors.

IMPACT ON NUMBER OF CLIENTS SERVED AND UNITS OF SERVICE PROVIDED

No impact on clients.

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

Budgeted expenses will increase by $4,275,892 with a like increase in revenues requiring no additional GF Support.

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

There will be an increase of 21.80 FTE's.

ATTACHMENT B
SUMMARY OF PROGRAM COST

INITIATIVE TITLE: Increase SFGH Budgeted ADC + 12

		FY 2007-08 (12 months)	Ongoing (12 months)
Sources:			
	Revenue	$ 4,275,892	$ 4,275,892
Subtotal Sources		4,275,892	4,275,892
Uses:			
	Salaries and Fringes	$ 3,182,868	$ 3,182,868
	Operating Expense	1,093,025	1,093,025
		-	-
Subtotal Uses		4,275,892	4,275,892
Net General Fund Subsidy Required (Uses less Sources)		$ 0	$ 0
Total FTE's		**21.80**	21.80

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

Class	Title	FTE's	(12 months)
2312	Licensed Vocational Nurse	1.58	$ 100,636
2320	Registered Nurse	20.22	2,257,043
	Fringe (35%)		825,188
	Total	21.80	$ 3,182,868

Operating Expenses

Index Code	Character/Subobject Code	
HGH1HUN40061	021/02700 Non personal services	$ 164,798
HGH1HUN40061	021/02700 UC Contract Provider	
HGH1HUN40061	040/04000 Materials & Supplies	$ 928,227

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

Initiative Number C18
(Leave blank)

2007-2008 Program Change Request

DEPARTMENT NAME:

- ☐ San Francisco General Hospital
- ☐ Laguna Honda Hospital
- ☐ Primary Care
- ☐ Jail Health
- ☐ Health At Home
- X Public Health
- ☐ CBHS - Mental Health
- ☐ CBHS - Substance Abuse
- ☐

DPH SECTION: Information Technology
PROGRAM CONTACT NAME/PHONE: Donna Childers 554-2776
PROGRAM / INITIATIVE TITLE: **Coordinated Case Management System Expansion & Integration**
GENERAL FUND: **$0**

TARGETED CLIENTS: **Homeless Population**

PROGRAM DESCRIPTION: (Description of Program Change)
(If proposing reductions to Contractors, provide name of contractor, program and amount)

The Coordinated Case Management System (CCMS) is a Web-based database and application designed, developed and supported in-house by DPH programming staff. It is integrated with the Direct Access to Housing Program, McMillan Sobering Center, Intensive Case Management Teams, Targeted Case Management teams, SF Homeless Outreach Team, and the EMS High User information and citywide ED Action Plans (accessible by Emergency Departments throughout San Francisco).

The program is being expanded for electronic charting and to integrate pertinent data from the Human Services Agency CHANGES database, Project Homeless Connect, DPH Lifetime Clinical Record, DPH Substance Abuse BIS and DPH Mental Health BIS, DPH Reggie System. The goal of the CCMS is to improve case management through coordination of citywide services and effectively evaluate and plan initiatives for this population. CCMS allows case managers and administrators to view client utilization and outcomes overtime and over multiple systems. There are currently 10,180 unduplicated clients in the CCMS database. Utilization of this integrated data system has far-reaching application for all providers in DPH.

JUSTIFICATION: (required by the Mayor's Office)

Use of the CCMS will be available in the next budget year to Human Services Agency, Department of Aging and Adult Services case management teams, Jail Health Services, additional intensive case management teams, and the SF EMS High User HOME Team. To provide the additional support and in order to integrate data from additional disparate databases within and outside of DPH, we are requesting an additional 1044 IS Principal Engineer and an additional 1064 IS Programmer Analyst Principal.

IMPACT ON NUMBER OF CLIENTS SERVED AND UNITS OF SERVICE PROVIDED

CCMS currently serves 10,180 unduplicated homeless clients. The expansion of the CCMS will provide a citywide and comprehensive view of the client, thus enabling DPH and the Human Services Agency to better service the homeless population. The CCMS will additionally provide comprehensive reporting and analysis functionality.

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

$244,480 for salaries and fringes, $64,000 for hardware and software licenses offset by $308,481in workorder recoveries

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

0.75 FTE 1044 IS Principal Engineer and .75 FTE 1064 IS Programmer Analyst Principal.

ATTACHMENT B
SUMMARY OF PROGRAM COST

INITIATIVE TITLE: Coordinated Case Management System Integration

	FY 2007-08	Ongoing
Sources:		
Subtotal Sources	-	-
Uses:		
Salaries and Fringes	$ 244,481	$ 325,968
Workorder recover	(308,481)	(335,648)
Operating costs	64,000	9,680
Subtotal Uses	(0)	-
Net General Fund Subsidy Required (Uses less Sources)	$ 0	$ -
Total FTE's	**1.50**	**2.00**

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

Class	Title	FTE's	
1064	IS Programmer Analyst Principal	0.75	$ 78,644
1044	IS Engineer Principal	0.75	102,453
			181,097
	Fringe (35%)		63,384
			$ 244,481

Operating Expenses

Index Code	Character/Subobject Code		
		-	$ -

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

YEAR ONE DESCRIPTION	YEAR ONE COST
1 - Database Server	$20,000
1 - Application Server	
1 - Oracle Application License	$44,000
1 - Oracle Database License	
Total Year One Cost for expansion and maintenance of CCMS	**$64,000**

Annual Description	Annual Operating Cost
Annual License Maintenance Two processor database licenses Two processor application licenses	$9,680
Total Annual Cost for the expansion and maintenance of CCMS	**$9,680**

Initiative Number C24
(Leave blank)

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: CBHS
PROGRAM CONTACT NAME/PHONE: Sai-Ling Chan-Sew/255-3439
PROGRAM / INITIATIVE TITLE: **Behavioral Health Services for Children/Youth in Foster Care**
GENERAL FUND: **$0**

TARGETED CLIENTS: Children/Youth in Foster Care

PROGRAM DESCRIPTION: (Description of Program Change)
(If proposing reductions to Contractors, provide name of contractor, program and amount)

For the past two years, the external reviewer who is responsible for EQRO for the San Francisco Mental Health Plan (Plan) has cited the Plan for having a lower than average penetration rate for serving children in foster care (Penetration rate of SF: 43%, Bay Area: 53%, Statewide: 51% for FY 04-05). Data from prior years also identifies this problem, meaning that a lower percentage of kids in foster care are receiving services in San Francisco than in other parts of the Bay Area. The proposed additional 1.0 FTE 2930/31 Psychiatric Social Worker would serve an estimated 30 additional foster care clients. Funding would be from EPSDT MediCal, with the five percent local match of $3,960 to be reallocated from within the existing Children's budget.

JUSTIFICATION: (required by the Mayor's Office)

To increase the number of children in foster care receiving behavioral health services, it is necessary to increase staffing. Ninety-five percent of the funding will be covered through State and Federal revenues.

IMPACT ON NUMBER OF CLIENTS SERVED AND UNITS OF SERVICE PROVIDED

An additional 30 Foster Care slots will become available for the provision of behavioral health services.

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

Increase in General Fund expenditures of $79,199

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

Increase of 0.75 FTE 2930 Psychiatric Social Worker, 1.0 FTE annually

ATTACHMENT B
SUMMARY OF PROGRAM COST

INITIATIVE TITLE: Behavioral Health Services for Children/Youth in Foster Care

		FY 2007-08	Ongoing
Sources:			
45416	Short-Doyle Medi-Cal FFP	$ 39,600	$ 52,800
45412	Comm Mental Health Svcs (EPSDT State Match)	35,640	47,520
	Internal Transfer of funding for Local Match)	3,959	5,279
Subtotal Sources		79,199	105,598
Uses:	Salaries and Fringes	79,199	$ 105,598
021	Professional Services	-	$ -
		-	-
Subtotal Uses		79,199	105,599
Net General Fund Subsidy Required (Uses less Sources)	**(reallocate from HMHMCP751594, subobj 027)**	$ 0	$ 0
Total FTE's		**0.75**	**1.0**

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

Class	Title	FTE's	
2930/31	Psychiatric Social Worker/MFT	0.75	$ 58,666
			-
			58,666
	Fringe (35%)		20,533
			$ 79,199

Operating Expenses

Index Code	Character/Subobject Code	
		-

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

Initiative Number C25
(Leave blank)

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:
PROGRAM CONTACT NAME/PHONE:
PROGRAM / INITIATIVE TITLE: **Special Program for Youth (SPY) . Integration of Primary Care and Behavioral Health services**
GENERAL FUND: **$0**

TARGETED CLIENTS: Post Adjudicated Youth in Juvenile Hall

PROGRAM DESCRIPTION: (Description of Program Change)
(If proposing reductions to Contractors, provide name of contractor, program and amount)

Proposed funding would be used to add 1.0 FTE 2930/31 Psychiatric Social Worker to provide mental health services to post-adjudicated youth in Juvenile Hall. Post-adjudicated youth are youth who have received a judge's referral to an alternative placement, such as a group home, a foster care home, a treatment program, etc. but due to unavailability of space in these referral sites must remain at Juvenile Hall pending an opening. During this period, services provided to MediCal eligible youth may be claimed to MediCal. Therefore, to expand access to behavioral health treatment, this proposal would fund one employee to provide services to these youth. Funding would be 50% Short Doyle MediCal, 45% State GF Match, and the 5% County match of $3,960 would be reallocated from within the existing DPH budget.

JUSTIFICATION: (required by the Mayor's Office)

There is a great need for the provision of behavioral health services to youth involved with Juvenile Hall. This is an underserved population. However, approval of this initiative would allow the Department to increase capacity to this population, and the initiative would be self-funding, since MediCal reimbursement is allowable for post-adjudicated youth (youth who have received a referral to placement, but no placement is currently available).

IMPACT ON NUMBER OF CLIENTS SERVED AND UNITS OF SERVICE PROVIDED

It is expected that 30 slots for the provision of behavioral health services would become available.

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

Funding would be 50% Short Doyle MediCal, 45% State GF Match, and the 5% County match of $3,960 would be reallocated from within the existing DPH budget.

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

Increase of .75 FTE 2930/31 Psychiatric Social Worker, 1.0 FTE annually

ATTACHMENT B
SUMMARY OF PROGRAM COST

INITIATIVE TITLE: Special Program for Youth (SPY)

		FY 2007-08	Ongoing
Sources:			
45416	Short-Doyle Medi-Cal FFP	$ 39,600	$ 52,800
45412	Comm Mental Health Svcs (EPSDT State Match)	35,640	47,520
	Local match to be transferred from HCHAPADMIWGF	3,959	5,279
Subtotal Sources		79,199	105,598
Uses:	Salaries and Fringes	79,199	$ 105,598
021	Professional Services	-	$ -
		-	-
Subtotal Uses		79,199	105,599
Net General Fund Subsidy Required (Uses less Sources)		$ 0	$ 0
Total FTE's		**0.75**	**1.0**

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

Class	Title	FTE's	
2930/31	Psychiatric Social Worker/MFT	0.75	$ 58,666
			-
			58,666
	Fringe (35%)		20,533
			$ 79,199

Operating Expenses

Index Code	Character/Subobject Code	
		-

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

Initiative Number C26
(Leave blank)

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: CBHS Mental Health
PROGRAM CONTACT NAME/PHONE: Irene Sung/255-3742
PROGRAM / INITIATIVE TITLE: **Child & Adolescent Psychiatry Training Program**
GENERAL FUND: **$0**

TARGETED CLIENTS: Children/youth requiring psychiatric services

PROGRAM DESCRIPTION: (Description of Program Change)
(If proposing reductions to Contractors, provide name of contractor, program and amount)

The purpose of this item is to address the need for Child/Youth Psychiatrists in Community Behavioral Health Services (CBHS) by initiating a pilot training program for psychiatry residents to provide psychiatric services for children and adolescents in CBHS's outpatient clinics. This pilot program will increase access to psychiatrists and create more collaborative and community oriented child and adolescent residents. The one-year pilot will be conducted to ensure that the program is self-funding through EPSDT MediCal revenues.

JUSTIFICATION: (required by the Mayor's Office)

Nationwide there is a shortage of child psychiatrists, and locally the problem is also significant. The proposed initiative would not only provide needed services, but it would provide an opportunity to generate interest for more psychiatrists to pursue the field of child psychiatry. It is also expected to be self-funding.

IMPACT ON NUMBER OF CLIENTS SERVED AND UNITS OF SERVICE PROVIDED

Two part-time psychiatric residents would be hired.

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

Increase of EPSDT MediCal revenues by $85,444 and equivalent expenditures.

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

None. Funding would be provided to the UC Dept. of Psychiatry to support a training program.

ATTACHMENT B
SUMMARY OF PROGRAM COST

INITIATIVE TITLE: Child & Adolescent Psychiatry Training Program

		FY 2007-08	Ongoing
Sources:			
45416	Short-Doyle Medi-Cal FFP	$ 46,994	$ 62,659
45412	Comm Mental Health Svcs (EPSDT State Match)	$ 38,450	$ 51,267
			$ -
Subtotal Sources		$ 85,444	$ 113,925
Uses:	Salaries and Fringes		
021	Professional Services	$ 85,444	$ 113,925
		-	-
Subtotal Uses		85,444	113,925
Net General Fund Subsidy Required (Uses less Sources)		$ -	$ -
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			
HMHMCP751594	021/02789 Professional Services	-	$	85,444

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

Initiative Number C27
(Leave blank)

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: Community Behavioral Health Services – Mental Health
PROGRAM CONTACT NAME/PHONE: Michelle Ruggels/255-3404
PROGRAM / INITIATIVE TITLE: **Short Doyle MediCal Request for Contractors.**
GENERAL FUND: **$0**
TARGETED CLIENTS: Clients served by DPH –CBHS contractors

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

The proposed initiative would enable DPH contractors to address funding shortfalls or program enhancements by budgeting the revenues that they are currently generating, but are not paid for because these revenues are outside of their contract limit. The proposed funding allocation is based on information previously provided by the contractors.

JUSTIFICATION: (required by the Mayor's Office)

With one exception (for a new revenue neutral initiative), these revenues are currently being generated by the contractors within their contracts, so budgeting the funds would allow them to benefit from the efforts that they are currently providing.

IMPACT ON NUMBER OF CLIENTS SERVED AND UNITS OF SERVICE PROVIDED

N/A

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

Increase of Short Doyle MediCal revenues by $783,701

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

None. Funding to 021 Professional Services.

ATTACHMENT B
SUMMARY OF PROGRAM COST

INITIATIVE TITLE: SD MCal request for Contractor

	FY 2007-08	Ongoing
Sources:		
45416 Short Doyle MediCal	$ - 783,701	$ - 783,701
Subtotal Sources	783,701	783,701
Uses:		
027 Professional Services	$ 783,701	$ 783,701
	-	-
Subtotal Uses	783,701	783,701
Net General Fund Subsidy Required (Uses less Sources)	$ -	$ -
Total FTE's	**0.0**	**0.0**

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

Class	FTE's	
		$ -
		-
		-
		-
Fringe (35%)	0.00	-
		$ -

Operating Expenses

	Character/Subobject Code		
027	Professional Services HMHMCC730515	-	$ 783,701

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

Initiative Number C28
(Leave blank)

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: Jail Health Services
PROGRAM CONTACT NAME/PHONE: Frank Patt, 995-1717
PROGRAM / INITIATIVE TITLE: **Jail Health Admin Building Rent Increase**
GENERAL FUND: **$0**

TARGETED CLIENTS:

PROGRAM DESCRIPTION: (Description of Program Change)
(If proposing reductions to Contractors, provide name of contractor, program and amount)

The last lease for Jail Health Administration at 650 5th Street was signed in October 2003. The rental agreement negotiated by CCSF Real Estate Division includes a market rate adjustment for FY 2007-08 and a flat rate for the following 5 years.

JUSTIFICATION: (required by the Mayor's Office)

Funding is required for the market rate adjustment. The department will request that the Sheriff's Department fund the increase in the Jail Health MOU.

IMPACT ON NUMBER OF CLIENTS SERVED AND UNITS OF SERVICE PROVIDED

No impact.

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

$19,584 in rent and $19,584 from the Sheriff

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

No impact.

ATTACHMENT B
SUMMARY OF PROGRAM COST

INITIATIVE TITLE: Jail Health Admin Building Rent Increase

		FY 2007-08	Ongoing
Sources:		$ -	$ -
Subtotal Sources		-	-
Uses:			
	Salaries and Fringes	$ -	$ -
	Operating Expenses	19,584	19,584
	Services of Other Departments	(19,584)	(19,584)
Subtotal Uses		-	-
Net General Fund Subsidy Required (Uses less Sources)		$ -	$ -
Total FTE's		**0.00**	0.00

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

Class	Title	FTE's
	Fringes (35%)	

Operating Expenses

Index Code	Character/Subobject Code	
HJAILHLTH-WO	021/03011 Property Rental	19,584
	Recovery from Sheriff	(19,584)

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

Initiative Number C29
(Leave blank)

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: HUH
PROGRAM CONTACT NAME/PHONE: Marc Trotz / 554-2565
PROGRAM / INITIATIVE TITLE: **New Podiatrist for the Housing and Urban Health Clinic**
GENERAL FUND: **($127,173)**

TARGETED CLIENTS: Housing and Urban Health Clinic Clients

PROGRAM DESCRIPTION: (Description of Program Change)
(If proposing reductions to Contractors, provide name of contractor, program and amount)

The Housing and Urban Health Clinic is now averaging approximately 900 encounters per month. With the target population of the clinic being persons who are now living in supportive housing but formerly chronically homeless, there is a huge on-going need for podiatry services. Having a half-time podiatrist on staff will be of great service to our clients and will increase the overall efficiency of our other providers.

JUSTIFICATION: (required by the Mayor's Office)

Foot care is a huge unmet need for the people who have been living in poverty and/or homeless for a long period of time. Having a podiatrist in the clinic will improve the comfort and hygiene of our clients. FQHC revenue generated by this physician will exceed the salary and benefit cost for the position thus being a positive financial contribution to DPH.

IMPACT ON NUMBER OF CLIENTS SERVED AND UNITS OF SERVICE PROVIDED

The podiatrist is expected to provide services to 1,664 clients per year.

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

Net decrease in General Fund of $127,173

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

N/A

ATTACHMENT B
SUMMARY OF PROGRAM COST

INITIATIVE TITLE: New Podiatrist for the Housing and Urban Health Clinic

	FY 2007-08	Ongoing
Sources:		
FQHC Revenues Index Code: HCHAPURBNCLN	$ 235,755	$ 235,755
Subtotal Sources	235,755	235,755
Uses:		
Salaries and Fringes	$ 108,582	$ 108,582
	-	-
	-	-
Subtotal Uses	108,582	108,582
Net General Fund Subsidy Required (Uses less Sources)	$ (127,173)	$ (127,173)
Total FTE's	**0.5**	**0.5**

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

Class	Title	FTE's		
2230	Physician Specialist / Podiatrist	0.50	$	80,431
	Fringe (35%)			28,151
Index Code:	HCHAPURBNCLN		$	108,582

Operating Expenses

Index Code	Character/Subobject Code			
		-	$	-

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

Initiative Number C30
(Leave blank)

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: HUH
PROGRAM CONTACT NAME/PHONE: Marc Trotz / 554-2565
PROGRAM / INITIATIVE TITLE: **New Permanent Housing for Homeless and Frail Seniors**
GENERAL FUND: **($12,705)**

TARGETED CLIENTS: Homeless and Frail Seniors

PROGRAM DESCRIPTION: (Description of Program Change)
(If proposing reductions to Contractors, provide name of contractor, program and amount)

The Health Department and the Human Services Agency are partners with the Mayor's Office of Housing and the San Francisco Redevelopment Agency on many new projects that are in the affordable housing development "pipeline". One of those projects, that typically takes 3-5 years to develop and open, will be ready for occupancy in January of 2008. Housing and Urban Health, on behalf of DPH, has negotiated 20 units in this new construction project by Chinese Community Development Corporation/Northern California Presbyterian Homes and Services' Octavia Blvd site known as Parcel A. DPH's set-asides will be for homeless and frail elderly living on the streets and shelters and those being discharged from higher levels of care. The funds included in this request will cover support service costs.

JUSTIFICATION: (required by the Mayor's Office)

This development is part of a long-range partnership between the City's housing capital agencies (MOH and SFRA) and the Health Department. Millions of local capital dollars have been invested in the acquisition and construction of this development. DPH's partnership completes the funding package and, importantly, secures access to 20 much-needed units for Health Department directed referrals.

IMPACT ON NUMBER OF CLIENTS SERVED AND UNITS OF SERVICE PROVIDED

This request will create 20 new permanent housing units for homeless and frail seniors

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

The General Fund subsidy requirement is reduced by $12,705 in FY 2007-08

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

Increase of 0.50 FTE in FY 2007-08. (1.00 FTE annualized in FY 08/09)

ATTACHMENT B
SUMMARY OF PROGRAM COST

INITIATIVE TITLE: New Permanent Housing for Homeless and Frail Seniors

		FY 2007-08	Ongoing
Sources:			
	FQHC Revenues Index Code: HCHAPURBNCLN	$ 168,397	$ 168,397
Subtotal Sources		168,397	168,397
Uses:			
	Salaries and Fringes	$ 98,192	$ 98,192
	Operating Expenses	57,500	57,500
		-	-
Subtotal Uses		155,692	155,692
Net General Fund Subsidy Required (Uses less Sources)		$ (12,705)	$ (12,705)
Total FTE's		**0.5**	0.5

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

Class	Title	FTE's	
2328	Nurse Practitioner	0.50	$ 72,735
	Fringe (35%)		25,457
Index Code	HCHAPURBNCLN		$ 98,192

Operating Expenses

Index Code	Character/Subobject Code	
HCHSHHOUSGGF	021 / 02700	57,500

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

Initiative Number D6
(Leave blank)

2007-2008 Program Change Request

DEPARTMENT NAME:

- X San Francisco General Hospital
- ☐ Laguna Honda Hospital
- ☐ Primary Care
- ☐ Jail Health
- ☐ Health At Home
- ☐ Public Health
- ☐ Mental Health
- ☐ Substance Abuse
- ☐

DPH SECTION: San Francisco General Hospital
PROGRAM CONTACT NAME/PHONE: Valerie Inouye, 206-3599
PROGRAM / INITIATIVE TITLE: **SFGH Increased Revenues**
GENERAL FUND: **($8,062,669)**

TARGETED CLIENTS: N/A

PROGRAM DESCRIPTION: (Description of Program Change)
(If proposing reductions to Contractors, provide name of contractor, program and amount)

Each year, SFGH Finance projects the expected revenue for the following year through a detailed analysis called the revenue build-up. Each revenue source is analyzed and projected separately and the final result is the year-to-year change in the total revenue baseline, which equals the General Fund impact of baseline revenue change. This excludes revenue from budget initiatives.

JUSTIFICATION: (required by the Mayor's Office)

N/A

IMPACT ON NUMBER OF CLIENTS SERVED AND UNITS OF SERVICE PROVIDED

None

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

Ongoing baseline revenue will increase by $8,062,669 resulting in a reduction in General Fund support.

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

None

ATTACHMENT B
SUMMARY OF PROGRAM COST

INITIATIVE TITLE: SFGH Baseline Revenue

	FY 2007-08	Ongoing
Sources:		
Inpatient Commercial Revenue	$ 1,933,669	$ 1,933,669
Inpatient Medicare and Medi-cal Revenue	5,829,000	5,829,000
Medicare Revenue Wage Index	152,544	152,544
Hospital - Rents (6% increase)	147,456	147,456
Subtotal Sources	8,062,669	8,062,669
Uses:		
Salaries and Fringes		
Subtotal Uses		
Net General Fund Subsidy Required (Uses less Sources)	$ (8,062,669)	$ (8,062,669)
Total FTE's	**0.00**	**0.00**

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

Class	Title	FTE's

Fringes (35%)

Operating Expenses

Index Code	Character/Subobject Code

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

Initiative Number D7
(Leave blank)

2007-2008 Program Change Request

DEPARTMENT NAME:

- ☐ San Francisco General Hospital
- X Laguna Honda Hospital
- ☐ Primary Care
- ☐ Jail Health
- ☐ Health At Home
- ☐ Public Health
- ☐ Mental Health
- ☐ Substance Abuse
- ☐

DPH SECTION: Laguna Honda Hospital
PROGRAM CONTACT NAME/PHONE: Valerie Inouye, 206-3599
PROGRAM / INITIATIVE TITLE: **LHH Baseline Revenue**
GENERAL FUND: **($6,573,605)**

TARGETED CLIENTS: N/A

PROGRAM DESCRIPTION: (Description of Program Change)

Each year, LHH Finance projects the expected revenue for the following year through a detailed analysis called the revenue build-up. Each revenue source is analyzed and projected separately and the final result is the year to year change in the total revenue baseline, which equals the general fund impact of baseline revenue change. This excludes revenue from budget initiatives.

JUSTIFICATION: (required by the Mayor's Office)

For the past several years the Medi-cal SNF per diem rate has increased modestly. The increase effective August 1, 2005 was $62.98 per day, which covered a three year period. The increase effective August 1, 2006 was $10.88 (3.6%) per day. This rate change will yield an increase of $3,926,723 ($10.88 X 1,030 average daily census X 96% Medi-Cal X 365 days). We have assumed an increase of $9.35 (3.0%) per day that would be effective August 1, 2007. This rate change will yield an increase of $3,093,317 ($9.35 X 1,030 average daily census X 96% Medi-Cal X 365 days X 11/12). The total amount realized from these actual and estimated changes in the Medi-Cal per diem rate will be $7,020,039.

Distinct Part Skilled Nursing Facilities, such as LHH that are operated by local governments, through Federal Funding Participation recover half of the difference between the California Department of Health Services projected cost per day and the Medi-Cal per diem rate in effect. The amount recoverable from this source will be $446,434 less than the current budget, given the estimated change in projected costs and per diem rates. The net effect of these Medi-Cal revenue sources will be an increase of $6,573,605.

IMPACT ON NUMBER OF CLIENTS SERVED AND UNITS OF SERVICE PROVIDED

None

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

Ongoing baseline revenue will increase by $6,573,605 resulting in a reduction in general fund support.

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

None

ATTACHMENT B
SUMMARY OF PROGRAM COST

INITIATIVE TITLE: LHH Baseline Revenues

	FY 2007-08	Ongoing
Sources:		
Medi-cal Inpatient Revenues	$ 7,020,039	$ 7,020,039
Medi-cal DP/NF Revenues	(446,434)	(446,434)
Subtotal Sources	6,573,605	6,573,605
Uses:		
Salaries and Fringes	$ -	$ -
	-	-
	-	-
Subtotal Uses	-	-
Net General Fund Subsidy Required (Uses less Sources)	$ (6,573,605)	$ (6,573,605)
Total FTE's	**0.0**	0.0

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

Class	Title	FTE's	
			-
			-
	Fringe (35%)		-
			$ -

Initiative Number D18
(Leave blank)

2007-2008 Program Change Request

DEPARTMENT NAME:

- X San Francisco General Hospital
- ☐ Laguna Honda Hospital
- ☐ Primary Care
- ☐ Jail Health
- ☐ Health At Home
- ☐ Public Health
- ☐ Mental Health
- ☐ Substance Abuse
- ☐

DPH SECTION: San Francisco General Hospital
PROGRAM CONTACT NAME/PHONE: Roland Pickens, 206-3528
PROGRAM / INITIATIVE TITLE: **MammoVan & Avon Breast Center Cancer Revenue**
GENERAL FUND AMOUNT: **($268,477)**

TARGETED CLIENTS: Patients needing mammograms and cancer education

PROGRAM DESCRIPTION: (Description of Program Change)
(If proposing reductions to Contractors, provide name of contractor, program and amount)

In 2003 the Regents of UC donated the Mammo Van to SFGH to start a mobile mammography screening program at the various Community Health Centers with the support of the AVON Foundation grant. SFGH is requesting to continue these vital services for the underserved women residing in the San Francisco community.

JUSTIFICATION: (required by the Mayor's Office)

The Medi-Cal program recently added funding for digital mammograms to their list of covered services.

IMPACT ON NUMBER OF CLIENTS SERVED AND UNITS OF SERVICE PROVIDED

None

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

Increase in revenues of $268,477 in FY 2007-08 and ongoing.

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

No impact.

ATTACHMENT B
SUMMARY OF PROGRAM COST

INITIATIVE TITLE: MammoVan & Avon Breast Center Cancer Revenues

		FY 2007-08	Ongoing
Sources:			
	Medi-Cal revenues	$ 268,477	$ 268,477
Subtotal Sources		$ 268,477	$ 268,477
Uses:			
	Operating Expenses	$ -	$ -
Subtotal Uses		$ -	$ -
Net General Fund Subsidy Required (Uses less Sources)		$ (268,477)	$ (268,477)
Total FTE's		**0.00**	**0.00**

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

Class	Title	FTE's
	Fringes (35%)	

Operating Expenses

Index Code	Character/Subobject Code

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

Initiative Number D19
(Leave blank)

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: Health at Home
PROGRAM CONTACT NAME/PHONE: Roland Pickens, 206-3528/Kathy Eng 206-6941
PROGRAM / INITIATIVE TITLE: **Medical High User Case Management Revenue**
GENERAL FUND: **($110,195)**

TARGETED CLIENTS: Frequent users of inpatient medical services at SFGH who need targeted case management

PROGRAM DESCRIPTION: (Description of Program Change)
(If proposing reductions to Contractors, provide name of contractor, program and amount)

The Medical High User Case Management Program (HUCM) at SFGH's Medical Center started in 2001 under the DPH General Fund. The program was an initiative to target frequent users of inpatient medical services with the goal of decreased preventable hospitalizations. The program's secondary goals are to assist this vulnerable and ill population with housing, entitlements, medication management, adherence to outpatient appointments, psychiatric and drug treatment and improvement in life skills. HUCM is a multidisciplinary program with social workers at the core. Since its inception, HUCM has screened about 200 patients and enrolled 113. Initial data shows that the median number of hospitalizations for those enrolled in HUCM decreased from four to one after one year in the program and the median number of bed days from 18 to 6. Furthermore, after enrollment, the team was able to increase the number of insured HUCM patients from 55% to 85%. To date, all the patients enrolled in HUCM have been housed (on average, 30-40% are homeless at the time of admission). HUCM has also played a key role in decreasing the numbers of "no-shows" or patients lost to follow-up, and decreasing overall provider and staff stress around working with this challenging patient population. In 2001 HUCM began with a commitment to patients seen in GMC and SEHC. Five years later it now targets all patients within the CHN and SFCCC, as well as patients not yet connected to primary care. This translates to an enormous increase in the number of referrals to the program. We have also begun to explore partnerships with other DPH programs such as the EMS High User Case Management Program and the DPH Respite Program and anticipate a growing referral base from these programs as well. Given our current staffing pattern, our capacity is 50 patients. Though we are actively trying to graduate patients and open up spots for new admissions, we are unable to expand services to accommodate all the referrals.

JUSTIFICATION: (required by the Mayor's Office)

As stated above, the Medical High user Case Management (HUCM) Program at San Francisco General Hospital is designed to decrease preventable hospital admissions for vulnerable patients with chronic illness complicated by mental illness and substance use.
The case manager/social worker's primary responsibilities are to:

- Assist patients in obtaining appropriate outpatient treatment by helping with paperwork, scheduling exams and treatments, transporting patients to appointments, and navigating clinics, radiology, laboratory, pharmacy, and social services.
- Assist patients in improving medication adherence by supporting medication reconciliation

among multiple providers and by delivering organized medications (medi-sets) on a weekly basis.

- Provide psychosocial support, crisis intervention, and appropriate referrals to psychiatry and therapy/counseling services as well as substance abuse treatment.
- Assist homeless patients in finding supportive and permanent housing.
- Advocate for entitlements such as General Assistance, SSI, and Medi-Cal, In Home Support Services and third party payee services when appropriate.
- Link patients to community-based programs such as Adult Day Health programs, cardio-pulmonary rehabilitation programs, smoking cessation programs, vocational rehabilitation programs, meal programs, support groups, and volunteer opportunities.
- Perform outreach and education to providers and programs involved in the care of this challenging patient population. Reduce provider stress.

IMPACT ON NUMBER OF CLIENTS SERVED AND UNITS OF SERVICE PROVIDED

In the last four years, HUCM has approached 283 patients, screened 181, and of an eligible 148 has enrolled 113. We have been able to house almost 100% of our homeless patients and transition all documented uninsured patients to Medi-Cal, allowing the hospital and clinics to bill for services. At any given time, each social worker in the program carries about 15 patients. With three full time social workers, in the past year we have had 1916 total visits, with 1264 billable encounters.

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

TCM revenues are expected to increase by $110,195.

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

No Impact.

ATTACHMENT B
SUMMARY OF PROGRAM COST

INITIATIVE TITLE: Health At Home Medical High User Case Management Revenue

	FY 2007-08 (12 Months)	**Ongoing** (12 Months)
Sources:		
TCM Revenue	110,195	110,195
Subtotal Sources	110,195	110,195
Uses:		
Subtotal Uses	-	-
Net General Fund Subsidy Required (Uses less Sources)	$ (110,195)	$ (110,195)
Total FTE's	**0.00**	0.00

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

Class	Title	FTE's

Fringe (35%)

Operating Expenses (List by Character)

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

Initiative Number D20
(Leave blank)

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: CBHS – Mental Health
PROGRAM CONTACT NAME/PHONE: Michelle Ruggels/255-3404
PROGRAM / INITIATIVE TITLE: **CBHS Short Doyle Medical Revenue Increase**
GENERAL FUND: **($1,000,000)**

TARGETED CLIENTS: N/A

PROGRAM DESCRIPTION: (Description of Program Change)
(If proposing reductions to Contractors, provide name of contractor, program and amount)

The proposed increase in Short Doyle MediCal revenues are being budgeted to reflect actual revenue generation.

JUSTIFICATION: (required by the Mayor's Office)

The proposed increase would reflect actual revenue generation based on historical data.

IMPACT ON NUMBER OF CLIENTS SERVED AND UNITS OF SERVICE PROVIDED

N/A

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

Increase of $1.0 Million in MediCal revenues.

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

None

ATTACHMENT B
SUMMARY OF PROGRAM COST

INITIATIVE TITLE: Short Doyle Medi-Cal Revenue

		FY 2007-08	Ongoing
Sources:			
	45416 Short Doyle MediCal	$ 1,000,000	$ 1,000,000
Subtotal Sources		1,000,000	1,000,000
Uses:			
	Salaries and Fringes	$ -	$ -
027	Professional Services	-	-
		-	-
Subtotal Uses		-	-
Net General Fund Subsidy Required (Uses less Sources)		$ (1,000,000)	$ (1,000,000)
Total FTE's		**0.00**	0.0

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

Class	Title	FTE's	
		0.00	$ -
			-
			-
	Fringe (35%)		-
			$ -

Operating Expenses

Index Code	Character/Subobject Code		
		-	$ -

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

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