

HEALTHY SAN FRANCISCO



Healthy San Francisco (HSF) continued its overarching goal to provide universal, comprehensive, affordable health care to uninsured adults. It ended FY 2008-09 with over 43,200 uninsured adult residents enrolled in the program. This represented 72 percent of the estimated 60,000 uninsured adult residents.

Beyond HSF's expanded enrollment, FY 2008-09 was marked by a year of strengthened private provider partnerships, increased national interest, continued operational enhancements and laudable public recognition.

In the program's second year of operation, DPH continued to move forward on its phased implementation strategy. This strategy has proved invaluable in helping ensure that more uninsured adult residents have improved access to health care services in an effective and efficient manner. The expansion efforts in FY 2008-09 centered on expanding the population eligible to enroll in HSF and expanding the HSF provider network of medical homes.

Reaching More Uninsured Adult Residents

Recognizing that uninsured residents with modest incomes also have difficulty accessing comprehensive health care services, in February 2009, DPH raised the income eligibility threshold for the program allowing residents with annual incomes at or below 500 percent of the Federal Poverty Level (for one person \$54,000; for a family of four \$110,000) to enroll. This was the second income eligibility expansion for the program – having started the program at 100 percent FPL in July 2007 and raised it to 300 percent FPL in January 2008.

As DPH fulfilled its pledge to ensure that HSF served uninsured residents at various income levels, it also focused on ensuring that there was sufficient medical home access and choice for its expanded HSF population. It was able to do so with the support of San Francisco's private sector provider community.

Partnering With the Community

From the beginning, HSF has been a community-wide partnership between the public and private sectors. These partnerships help DPH meet the program's goal to improve access to care. In FY 2008-09, this manifested itself in the following ways:

- **Medical Home Expansion** –DPH added two primary care new medical home systems to the HSF provider network in September 2008: Chinese Community Health Care Association and Sister Mary Philippa Health Center. This resulted in the number of HSF medical homes in FY 2008-09 increasing from 27 to 29.
- **Hospital Expansion** –DPH partnered with non-profit hospitals to help ensure sufficient access to inpatient care. As a result, the number of hospital systems participating in HSF increased from one - San Francisco General Hospital - to six in FY 2008-09. Three non-profit hospital systems agreed to “adopt” specific HSF primary care medical homes and receive elective inpatient admissions from those medical homes. The hospitals and partnered medical homes are:

- California Pacific Medical Center (4 campuses) – North East Medical Services
- Saint Francis Hospital (CHW) – Glide Health
- St. Mary’s Medical Center (CHW) – Sr. Mary Philippa

The UCSF Medical Center partners with HSF by providing referral-based diagnostic imaging services at its China Basin site. Finally, Chinese Hospital participates in HSF through its Chinese Community Health Care Association affiliation. The HSF commitment from the hospitals is separate and apart from the charity care obligation that hospitals have to HSF participants.

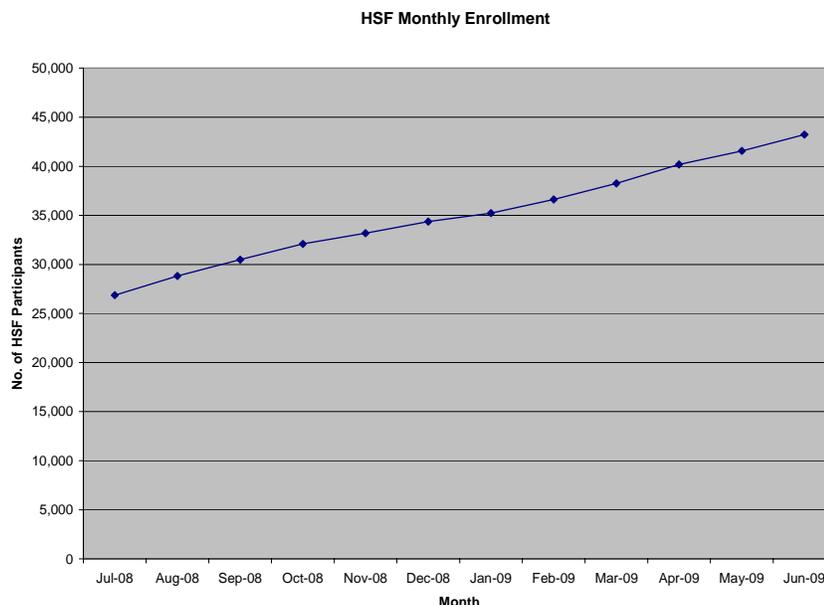
- Pharmacy Access – In February 2009, Pfizer, Inc. announced that it would provide free medicines for eligible HSF participants through the Pfizer’s *Sharing the Care* program. This extension of Pfizer’s prescription drug program applies to all *Sharing the Care* registered community health clinics providing access to HSF patients. HSF medical homes such as North East Medical Services benefit greatly from this program.

This fiscal year also marked the announcement that effective July 1, 2009 Kaiser Permanente would join the HSF provider network to care for uninsured residents. Kaiser is the first national health plan to participate in HSF. As a provider, Kaiser will serve as a medical home for HSF participants and provide emergency, specialty, diagnostic, pharmacy, and inpatient services. While Kaiser Permanente is a health insurance plan, it is not participating in HSF as a health insurer. As a result of this announcement, DPH began the HSF FY 2009-10 with one additional medical home system – bringing the total to five:

- Chinese Community Health Care Association
- Department of Public Health
- Kaiser Permanente
- San Francisco Community Clinic Consortium
- Sister Mary Philippa Health Center

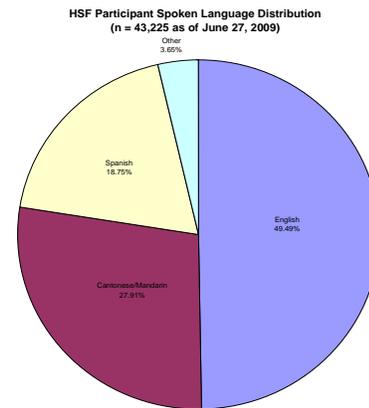
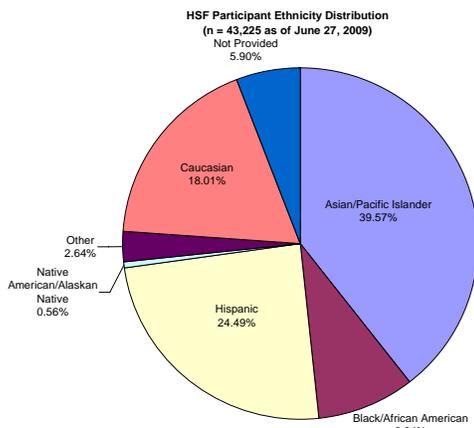
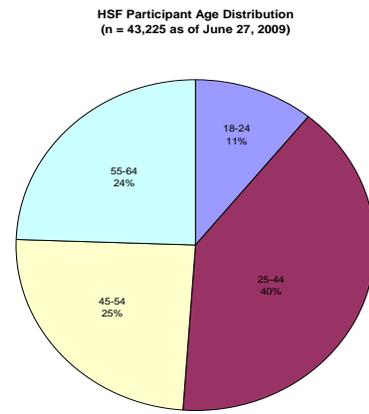
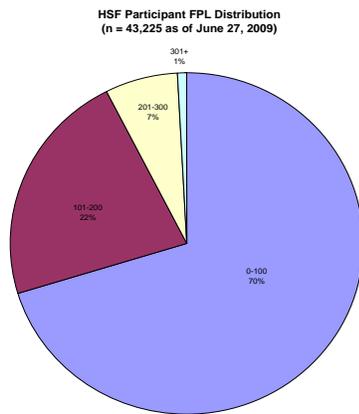
Expanding Access to Care

DPH dual strategy of expanding the eligible population and expanding the network of providers helps improve access to care. DPH ended the year with 43,225 participants into the HSF program. The monthly enrollment increased steadily over the year.

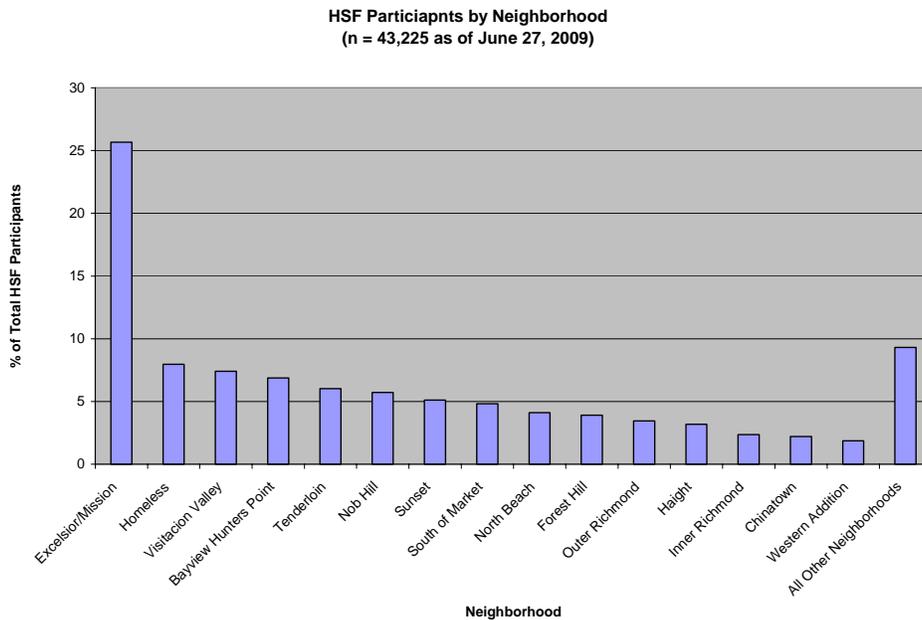


One tangible measure of HSF’s role in expanding access is that 27 percent of all those enrolled in HSF were not previous users of the health care delivery system (defined as an individual who indicates that he/she has not received clinical services from the primary care medical home he/she selected within the last 2 years). As a result of HSF, over 11,500 uninsured residents have access to a comprehensive, coordinated health care services system that they may not have had access to before HSF.

The demographics of participants during FY 2008-09 reflected the expansion of the program. There were over 40 languages spoken among HSF participants, which mirror the diversity of San Francisco’s population.



HSF participants live throughout the City. Collectively, the City’s Excelsior and Mission neighborhoods represented roughly 26 percent of all participants during the FY 2008-09. Homeless participants represented approximately 14 percent of the population, over half of whom did not have a mailing address.



In addition to residents enrolling into the program on their own, San Francisco employers may select the “City Option” to fulfill the provision under the Health Care Security Ordinance, which requires employers to spend a minimum amount of money on health care for their employees (known as the Employer Spending Requirement). San Francisco employers continued to select the City Option in FY 2008-09. By the end of FY 2008-09, 980 employers had elected to use the “City Option” on behalf of 42,300 employees (eligible for either Healthy San Francisco or a Medical Reimbursement Account depending upon the employee’s eligibility).

Accomplishing Our Goals

On an operational level, HSF accomplishments in FY 2008-09 included:

- **New Patient Appointment Unit:** In September 2008, DPH launched its New Patient Appointment Unit (NPAU). The NPAU was developed to assist *all* new Department patients with making their first clinical appointment at one of the Community Oriented Primary Care (COPC) clinics and SFGH Primary Care clinics. The NPAU makes new patient appointments for the following health care programs: Healthy Families, Healthy Kids, Healthy San Francisco, Healthy Workers, Medi-Cal, and Medicare. The NPAU only makes patient appointments over the phone. Data indicates that the majority of NPAU callers are enrolled in HSF.

- **Quality Improvement Launch:** HSF instituted its Quality Improvement (QI) structure and committee. The QI activities focus on adult preventative care and monitoring appointment wait times to promote health care access. In FY 2008-09, the HSF disease management program, *Strength in Numbers*, was formed. Its first effort focused on a program within the medical homes designed to support and expand use of registries for diabetes disease management.
- **Human Services Agency Collaboration:** In March 2009, the HSF One-e-App web-based eligibility and enrollment system, One-e-App, was modified to allow application assistants to electronically interface between Medi-Cal's enrollment database and the HSF applicant screening system for electronic submissions of Medi-Cal applications to HSA. This linkage improves efficiency.
- **Initial Services and Cost Data Released:** In March 2009, the HSF clinical data indicated that participant utilization would decrease or remain relatively constant from FY 2007-08 to the current FY 2008-09 (annualized). First to second year data indicated a potential 37 percent decrease in emergency room visits per 1,000 participants (175 to 128). In addition, hospitalization among HSF participants was lower than that found within two similar public health insurance programs (Healthy Workers and Medi-Cal). Based on Department expenditures, the monthly estimated HSF per participant cost was \$280 (FY 2008-09) or \$3,360 annually. A cost comparison of HSF with two California health insurance plans found monthly estimated premium costs were 39 percent to 120 percent higher than HSF.

Going Beyond San Francisco

While HSF services are confined to the 49-square mile jurisdiction of the City and County of San Francisco, the program's impact is not. Healthy San Francisco stands as a potential model for future universal health care access programs, on the regional, state and federal levels.

Following in the footsteps of Healthy San Francisco, in October 2008, Howard County, Maryland, created Healthy Howard, which aims to increase access to health care for uninsured county residents. Healthy Howard is not similar to HSF in every respect since it is a local program designed to meet the needs of a different community. However, like HSF, Healthy Howard is not health insurance as it provides participants with medical homes, has an affordable fee structure, and does not serve those eligible for state or federal health insurance program.

On a national scale, HSF and City leaders have contributed to the significant dialogue on universal health care in the United States:

- In February 2009, President Obama met with U.S. mayors and delivered remarks in which he mentioned Healthy San Francisco's efforts to provide accessible and affordable healthcare services to uninsured San Francisco residents. The President stated: "Instead of just talking about health care, mayors like Gavin Newsom in San Francisco have been ensuring that those in need receive it."

- In April 2009, Dr. Katz was invited to attend and speak at the Western Regional White House Forum on Health Reform, hosted by California Governor Schwarzenegger, Washington Governor Gregoire and Melody Barnes, Director of President Obama's Domestic Policy Council. Governor Schwarzenegger pointed out that while the states are laboratories for the federal government, counties can be laboratories for the State. The Governor said he was pleased with the success of Healthy San Francisco.
- In May 2009, Mayor Gavin Newsom was named Chair of the U.S. Conference of Mayors Task Force on Health Care Reform, which was created to identify and define mayoral priorities and to inform and advise the work of Congress and the Administration.

Recognizing the City's Efforts

As Healthy San Francisco continues to expand access to care for uninsured adult residents, numerous organizations have spoken out in recognition and appreciation of the progressive vision and efforts of the program.

- In October 2008, the San Francisco Health Commission recognized the work of over 100 DPH staff who had worked on the HSF Design, Development and Implementation Teams with the Employee Recognition Award. These employees were critical in ensuring the successful launch and first year of Healthy San Francisco.
- In December 2008, the Drum Major Institute for Public Policy (DMI), a non-partisan, non-profit think tank, named Healthy San Francisco as one of the top 10 policies of the year in their 2008 Year in Review. DMI praised HSF for its use of “medical homes,” emphasis on preventive care, and Employer Spending Requirement component, stating, “for an innovative approach to expanding health coverage, Healthy San Francisco gets a hale and hearty place on our best of 2008 list.”
- In April 2009, the Healthy San Francisco participant newsletter, *HeartBeat*, was recently honored with a Silver Award at the 26th Annual Healthcare Advertising Awards. A national panel of judges reviewed over 3,600 entries in 28 categories, choosing the winners on creativity, quality, message effectiveness, consumer appeal, graphic design and overall impact. This recognition was a direct result of the tremendous work done by HSF's third-party administrator, the San Francisco Health Plan.
- In June 2009, Consumer Action, a national non-profit advocacy and education organization, celebrated their 38th Anniversary by awarding Healthy San Francisco and three other programs with their 2009 “Award of Excellence.”

Moving the Department's Mission Forward

DPH is incredibly grateful to everyone who worked diligently over the past year to push Healthy San Francisco to the next phase in its development. Those efforts allowed HSF to further DPH's strategic goal to ensure that "San Franciscans have access to the health services they need." DPH staff (administrative, program and clinical), community providers, HSF work groups, the Healthy San Francisco Advisory Committee, the program's third-party administrator, San Francisco Health Plan and the Center to Promote HealthCare Access, are to be commended in helping turn HSF from an idea to a fully operational program. DPH will continue to work with these entities and others as it continues its phases in other aspects of the program into FY 2009-10.