

Attachment D
Proposed Health Commission Resolution

Supporting Recommendations Contained in the Fiscal Year 2006 Charity Care Report

WHEREAS, in San Francisco, an estimated 73,000 people under the age of 65, or 10.9 percent of the non-elderly population, are uninsured; and,

WHEREAS, many of the uninsured rely on charity care services provided by hospitals to access needed primary and acute care services; and

WHEREAS, charity care is defined as the provision of health care services to those who cannot afford to pay and without expectation of reimbursement; and

WHEREAS, under California law, counties have an obligation to care for their most vulnerable residents; and

WHEREAS, in 2001, the Board of Supervisors passed Ordinance Number 163-01, the Charity Care Policy Reporting and Notice Requirement, (the Charity Care Ordinance), to enable the City to evaluate the need for charity care in the community and to plan for the continued fulfillment of its responsibility to provide care to indigents; and

WHEREAS, nonprofit hospitals provide charity care as part of their broader social obligation to provide community benefits in the public interest; and

WHEREAS, the Charity Care Ordinance requires hospitals to report to the Department of Public Health specific information related to the amount of charity care they provide and to notify patients of the hospital's charity care policies; and

WHEREAS, the charity care information provided by hospitals helps the San Francisco Health Commission evaluate the utilization of charity care services and health care needs of our City's low-income, uninsured and underinsured populations; and

WHEREAS, in 2003 the Health Commission recommended the formation of a charity care work group called the Charity Care Project which has met monthly for the last four years; and

WHEREAS, the Charity Care Project, which consists of San Francisco hospitals, the Hospital Council of Northern and Central California, Operation Access, the San Francisco Community Clinic Consortium, Service Employees International Union United Health Care Workers – West, the San Francisco Medical Society, and Consumers' Union, worked collaboratively on the preparation of the Fiscal Year 2006 Charity Care Report Summary; and

WHEREAS, the Charity Care Project was recognized by the National Association of Counties with a 2006 Achievement Award in recognition of an innovative program which contributes to and enhances county government in the United States; and

WHEREAS, in addition to reporting the charity care data provided by hospitals, the Fiscal Year 2006 Charity Care Report Summary also incorporates information from a variety of sources,

including the California Office of Statewide Health Planning and Development, the 2000 Census, the 2003 California Health Interview Survey, the Building a Healthier San Francisco Web site HealthMattersinSF.com, which was launched in 2007, and the Public Health Institute's Advancing the State of the Art in Community Benefit Demonstration Project; and

WHEREAS, based upon data from these sources, the fiscal year 2006 Charity Care Report Summary finds that:

- Healthy San Francisco (HSF) provides a unique opportunity for the non-profit and public health care delivery systems to collaborate on the provision of services to uninsured residents;
- Ongoing collaboration and planning around community benefits through the Charity Care Project will increase and improve access to health care, especially for populations with disproportionate unmet needs; and
- Continuing to standardize reporting, analysis and application of charity care and community benefit data will improve the provision of health care services in San Francisco to individuals with disproportionate health needs.

RESOLVED, that in accordance with these findings, the Fiscal Year 2006 Charity Care Report Summary recommends that:

- The Charity Care Project and its hospital members should pursue support for Healthy San Francisco in the following ways:
 1. Nonprofit hospitals will implement access to the web-based eligibility and enrollment system for Healthy San Francisco (One-e-App) to verify HSF participant eligibility as part of a hospital's screening process to determine eligibility for charity care or sliding scale.
 2. Nonprofit hospitals will continue to provide charity care to HSF participants with emergency health care needs.
 3. A new voluntary reporting category identified as "Healthy San Francisco Charity Care" will be added to the annual San Francisco Hospital Charity Care Report Summary.
 4. A new voluntary reporting category identified as "Healthy San Francisco Community Benefits" will be added to the annual San Francisco Hospital Charity Care Report Summary.;and
- The Charity Care Project should continue to meet and expand its conversation and efforts to increase and improve the provision of charity care and other community benefits to populations with disproportionate unmet health care needs, especially for residents of the following neighborhoods: Bayview/Hunters Point, Potrero Hill; Tenderloin, Civic Center; and Bernal Heights, Mission, and Visitacion Valley; and
- The Charity Care Project should continue to standardize, analyze, and apply reported data on charity care and other community benefits, collaborating with Building a Healthy San Francisco, and promoting institutional reforms and community benefits standards recommended by the Public Health Institute in its ongoing demonstration project, Advancing the State of the Art in Community Benefit.

FURTHER RESOLVED, that the San Francisco Health Commission recognizes the Charity Care Project for working together on the Fiscal Year 2006 Charity Care Report to create a more complete picture of charity care in San Francisco, and for engaging in the broader endeavor of improving access to needed health services for the City's underserved communities; and be it,

FURTHER RESOLVED, that the San Francisco Health Commission fully supports the recommendations put forth in the fiscal year 2006 Charity Care Report Summary and directs the Director of Health to work with San Francisco hospitals to implement these recommendations.