Charity Care Report draft – FY 2016
Health Commission Finance and Planning Committee
April 3, 2018

San Francisco Department of Public Health
Office of Policy & Planning
Agenda

1. Charity Care Overview and Background

2. FY 2016 Charity Care Annual Report - City-Wide Charity Care Trends

3. FY 2016 Charity Care Report - Hospital-specific charity care data
Charity Care Ordinance and Reporting Hospitals

- San Francisco Charity Care Ordinance 163-01 passed in 2001
  - Requires hospitals to notify patients about free and discounted services
  - Requires hospitals to annually report charity care data to DPH

“Charity Care is emergency, inpatient, and outpatient medical care, including ancillary services, provided to those who cannot afford to pay and without expectation of reimbursement”

* Reports voluntarily
Charity Care Landscape: Timeline

2001
SF Charity Care Ordinance passed

2007
Healthy San Francisco program started

2010
ACA signed into law by President Obama

2011-2013
ACA Preparation Period
1. Healthy San Francisco
2. SF PATH
3. Get Covered! SF

2014-2016
ACA-initiated health insurance
1. Medi-Cal Expansion up to 138% FPL
2. Covered California Health Exchange

2017-2018
Federal Uncertainty with the ACA
1. Repeal of Individual mandate
2. Elimination of cost-sharing reductions

4/3/2018
Office of Policy & Planning
Charity Care Report Overview

Goal: Understand and present trends related to charity care in San Francisco

- Tracks traditional charity care and HSF populations
- Showcases City-wide trends and hospital-specific data
- Engages representatives from the mandatory and voluntary reporting hospitals for development and review
- Completed and presented to the Health Commission annually
City-Wide Charity Care Trends

• As expected with continued implementation of the Affordable Care Act, Charity Care has declined in San Francisco.

• The charity care declines continue to be greater for Healthy San Francisco, likely because program participants are accustomed to actively participating in their health care and have greater support to transition onto ACA-sponsored health insurance.

• Traditional Charity Care will continue to be essential for the hard-to-reach population and for those who cannot access insurance.
As expected with continued implementation of the Affordable Care Act, Charity Care has declined in San Francisco.

Charity Care Patients declined in San Francisco

Utilization of charity care services overall has declined in San Francisco
As expected with continued implementation of the Affordable Care Act, Charity Care has declined in San Francisco.

Charity Care Expenditures and Medi-Cal Shortfall, in Millions

- **Charity Care Expenditures**:
  - FY 2012: $536.5
  - FY 2013: $332.8
  - FY 2014: $203.7
  - FY 2015: $199.2
  - FY 2016: $178.0

- **Medi-Cal Shortfall**:
  - FY 2012: $382.9
  - FY 2013: $474.2
  - FY 2014: $566.4
  - FY 2015: $575.2
  - FY 2016: $607.5

**Total**:
- FY 2012: $919.4
- FY 2013: $807.1
- FY 2014: $831.2
- FY 2015: $861.6
- FY 2016: $867.7

**Notes**:
- Medi-Cal Shortfall continues to increase; Charity care expenditures are stable.
The charity care declines continue to be greater for Healthy San Francisco, likely because program participants are accustomed to actively participating in their health care and have greater support to transition onto ACA-sponsored health insurance.

HSF and Traditional Unduplicated Charity Care Patients

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<tbody>
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<td>HSF Charity Care Patients</td>
<td>59,053</td>
<td>51,654</td>
<td>45,556</td>
<td>42,032</td>
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<tr>
<td>Traditional Charity Care Patients</td>
<td>54,052</td>
<td>48,912</td>
<td>45,556</td>
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HSF and Traditional Charity Care Expenditures, in Millions

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<td>HSF Expenditures</td>
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<td>$126.3</td>
<td>$94.8</td>
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<td>Traditional Expenditures</td>
<td>$85.6</td>
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<td>$83.1</td>
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HSF charity care patients continue to decline more significantly

HSF expenditures continue to decline, while traditional charity care expenditures increased slightly
Traditional Charity Care will continue to be essential for the hard-to-reach population and for those who cannot access insurance.

There is a steadily increasing dependence on emergency care for traditional charity care patients.
Traditional Charity Care will continue to be essential for the hard-to-reach population and for those who cannot access insurance.

Traditional Charity Care remains relatively consistent, and continues to cover 1) majority San Franciscans concentrated in districts with lower income neighborhoods and 2) homeless residents.

Traditional Charity Care Patients by Reported Residence

Traditional Charity Care Patients by Supervisorial District

Traditional Charity Care remains relatively consistent, and continues to cover 1) majority San Franciscans concentrated in districts with lower income neighborhoods and 2) homeless residents.
Hospital-Specific Data

- City-wide trends in charity care patients, service utilization, expenditures, and Medi-Cal Shortfall varied among the eight reporting hospitals.
Charity Care — Moving Forward

• The federal administration has made changes to dismantle the ACA that may impact the health insurance and charity care landscapes for the City.
  • federal tax reform repealing the individual mandate
  • eliminating cost-sharing reductions

• San Francisco’s charity care ordinance and reports provides strong mechanisms for tracking and understanding the impacts on charity care due to ACA-related changes.