City and County of San Francisco
Daniel Lurie, Mayor

San Francisco Department of Public Health
Daniel Tsai,
Director of Health

San Francisco Department of Public Health

*Policy & Procedure Detail**

Policy & Procedure Title: COM.4 Determining the Eligibility of Patients/Clients for Healthcare Benefits	
Category: Compliance	
Effective Date: July 1, 2006	**Last Reissue/Revision Date:** 3/2/2026
DPH Unit of Origin: Compliance	
Policy Contact - Employee Name and Title; and/or DPH Division: Garrett Chatfield, Chief Integrity Officer, Office of Compliance and Privacy Affairs (OCPA)	
Contact Phone Number(s): 855-729-6040	
Distribution: DPH-wide ☒	**If not DPH-wide, other distribution:**

All sections in table required.

I. **Purpose and Scope:**

A. **Purpose:** The purpose of this policy is to clarify that allowing or causing local, state, or federal government resources to be accessed or used based on false pretenses may constitute fraud and subject the individual to disciplinary action as well as civil or criminal sanctions. It is the policy of the Department of Public Health (DPH) that DPH workforce members shall not encourage, advise or instruct patients/clients to give deceiving, misleading or false information for the patient/client to become eligible for County, State, or Federal healthcare benefits. Eligibility determinations are foundational to health care program integrity because they ensure proper allocation of resources, minimize fraud, and promote public trust.

B. **Scope:** This policy applies to all DPH workforce members which include DPH employees, UCSF employees providing service for DPH, contracted staff, medical staff, interns, volunteers and other individuals representing or working at DPH.

II. **Policy:**

A. Workforce members shall not encourage, advise, or instruct patients/clients who do not reside in San Francisco to provide a false San Francisco address during the registration or eligibility process to receive DPH services.

B. Workforce members shall not encourage, advise, or instruct patients/clients to provide misinformation regarding their financial assets to qualify for the sliding scale or for Medi-Cal, Medicare, or other insurance coverage or benefits.

C. Violations of this policy shall result in disciplinary action, up to and including termination and may constitute fraud and cause an employee to incur civil and/or criminal sanctions and fines.

Last Reviewed/Revised Date: 7/1/2006; 11/7/2017; 1/25/2023; 2/5/2025; 3/2/2026