



Overview of the Health Care for the Homeless (HCH) Project Scope

Presentation to the SF HCH Co-Applicant Board March 14th, 2022

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HCH Program Overview



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- SFDPH's Health Care for the Homeless program's goal is to provide high quality health care in multiple clinics and programs for people experiencing homelessness.
- The federal definition of experiencing homelessness for this grant includes people who are:
 - Living outdoors, in vehicles, or in structures not intended to be housing
 - Staying in a shelter
 - Staying with a friend or family member (other than with a parent or child)
 - Currently residing in a treatment or transitional program
 - Living in a Single Room Occupancy hotel without tenancy rights
 - Experiencing any of the above eligible housing categories in the past twelve months

HCH Program Scope



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- SFDPH has 34 locations included in the Health Care for the Homeless grant scope
 - Locations are a mix of primary care, urgent care, school-based, and shelter-based sites
 - All are outpatient, and some are located on the ZSFG hospital campus including Castro Mission Health Center while the community clinic site is remodeled
- All visits to these locations attended by people experiencing homelessness are considered part of the HCH grant scope. Visits are considered part of the grant program for both insured and uninsured clients.
- The cost in 2021 to deliver all HCH scope outpatient visits was \$16,614,764 of which HCH grant covered \$1,118,586

HCH Sources of Funding - 2021



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Funding Source	% of Funding	HCH Budget
HCH Federal Grant	6.7%	\$ 1,118,586
Medi-Cal	6.1%	\$ 1,013,358
Medicare	4.8%	\$ 794,062
Other Public - Managed Care Capitated	10.1%	\$ 1,674,261
Private Insurance	0.1%	\$ 8,901
Patient Fees/Self Pay	0.0%	\$ 1,302
Other Federal Grants	0.9%	\$ 146,969
Local Government General Fund	71.4%	\$ 11,857,325
Total Funding for HCH-scope Services in 2021		\$ 16,614,764

* SFDPH 2021 Uniform Data System Reporting for 1/1/21-12/31/21 grant period, from Tables 8A Financial Costs, 9D Patient Revenue, and 9E Other Revenue

SFDPH HCH Population Demographics - 2021 *(Federal Demographic Categories)*



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Race	Hispanic	Non-Hispanic	Total	Percentage
Asian	21	389	410	5.8%
Native Hawaiian / Other Pacific Islander	8	60	68	1.0%
Black / African American	60	2,000	2,060	29.3%
American Indian / Alaska Native	56	68	124	1.8%
White	246	2,501	2,717	39.1%
More than One Race	28	167	195	2.8%
Unreported / Declined to report race	1,136	280	1,416	20.2%
Total Patients	1,555	5,443	7,020	

Gender Identity (% based on completed data fields)	Percentage
Male	65.3%
Female	27.3%
Transgender Man	0.3%
Transgender Woman	3.9%
Other	1.6%
Chose not to disclose	1.7%

* SFDPH 2021 Uniform Data System Reporting for 1/1/21-12/31/21 grant period, Table 3B Demographic Characteristics

HCH Annual Visits - 2021



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Visit Type	In Person	Phone or Video	Patients served
Physician	12,885	2,865	
Nurse Practitioner / Physician Assistant / CNM	10,029	1,406	
Nurse	3,109	115	
Total Medical Care Services	26,023	4,386	6,754
Dentist	1,243	3	578
Mental Health	2,605	570	893
Other: Podiatry / Acupuncture / Nutrition	820	147	553
Total Enabling Services	671	141	378
Grand Total – All Categories Above	31,362	5,274	7,020

* SFDPH 2021 Uniform Data System Reporting for 1/1/21-12/31/21 grant period, Table 5 Staffing and Utilization

HCH Grant Background for San Francisco



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- The Health Resources and Services Administration (HRSA) is the federal agency that runs the HCH grant program. HRSA focuses on improving health care for people who are either economically or medically vulnerable, and/or geographically isolated.
- The federal McKinney Homeless Assistance Act of 1987 established the Health Care for the Homeless (HCH) grant program
- San Francisco Community Clinic Consortium (SFCCC) applied for a HCH grant with SFDPH and local Community Based Organizations collaborating to deliver services
 - SFCCC is the “grantee” who directly works with HRSA
 - SFDPH is a “sub-recipient” and reports to SFCCC in the HCH program
- HCH awards funding in three-year periods

SF HCH Co-Applicant Board



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- As part of a local government, SFDPH and the San Francisco Health Commission have an option defined in HRSA's Health Center Compliance Manual to create a Co-Applicant Board
- A Co-Applicant Board prioritizes the goals of patient input into program management decisions and monthly HCH program supervision
- A Co-Applicant Board is slightly unique and different from a non-profit board because local governments have some types of fiscal and personnel authorities that cannot be delegated for a specific project
- This Co-Applicant Board has been designed to meet the dedicated oversight described in HRSA HCH federal requirements and harmonize with the City's local government structure

Health Commission Resolution



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- The San Francisco Health Commission and SFDPH Director acted to create the HCH CAB. The City Attorney helped DPH draft both the HCH Co-Applicant Agreement and Bylaws.
- On October 5th, the Health Commission passed Resolution 21-11 establishing a San Francisco Health Care for the Homeless Co-Applicant Board
- This resolution described the relationships between HRSA, SFCCC, SFDPH, and the Health Commission
- The resolution also referred to the draft Bylaws and Co-Applicant Agreement that the HCH CAB, once formed, would review and act on. We will review these documents in the next presentation.

Q&A



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- Thank you
- Any questions let us know