



Healthy San Francisco

Our Health Access Program

Healthy San Francisco

- Healthy San Francisco provides universal, comprehensive, affordable health care to uninsured adults irrespective of the person's income level, employment status, immigration status or pre-existing medical conditions.
- It integrates public and private providers into a single system to provide universal care without relying on health insurance.
- Uninsured, adult residents enrolled in HSF have access to:
 - a broad-based network of providers (public, non-profit and private),
 - a choice of over 30 primary care medical homes/health centers (a usual source of care),
 - comprehensive services (primary, specialty, diagnostic, pharmacy, emergency, hospital, etc.),
 - an affordable fee structure that is designed not to impede access to care,
 - a common program eligibility and enrollment system shared by all provider systems and
 - centralized customer services (to provide clear information on the program's features).
- HSF is part of a comprehensive effort by the City and County of San Francisco to address lack of health care coverage. HSF works in tandem with the *Employer Spending Requirement* to address the health needs of San Francisco's uninsured residents and workers.
- HSF accomplishes universal access without relying on the creation of a publicly-funded, local health insurance product.
- HSF acknowledges that health insurance is not the only mechanism available to improve and/or expand access to health care services to uninsured residents.
- HSF is health care reform at the local government level, in the absence of state and federal reform.

Generalizable Features of Healthy San Francisco

- Aspects of the model can be replicated. This is not a cookie cutter approach – factors that make HSF work in San Francisco may not necessarily be the same factors for other places.
- California counties may be able to:
 - re-examine indigent care programs to ensure that they emphasize a medical home, comprehensive services, etc. and
 - maximize charity care services by non-profit hospitals.

- HSF features:
 - Focus on primary care home to reduce duplication and improve coordination
 - Centralized eligibility system to maximize public entitlement and increase coordination of benefits
 - Centralized system of record creates accountability and comprehensive database for planning & evaluation purposes
 - Non-insurance (care) model that can potentially result in lower costs and leverage federal/state funds for localities
 - Establishment of predictable, affordable participation fees; may not be viewed as charity by participants
 - Shared financial responsibility (public, participant, employer)
 - Public-private partnership maximizes available resources

Program Highlights to Date

Uninsured Residents Voluntarily Enroll in Program: Over 35,600 uninsured residents have voluntarily enrolled in the program.

Program has Expanded Access: To date, 24% of all those enrolled were not previous users of the health care delivery system (i.e., defined as an individual who had not received clinical services from a primary care medical home within the last two years).

Public Health Insurance Enrollment – Maximizing Revenues: HSF program has reduced the number of uninsured by identifying uninsured residents eligible for, but not enrolled in public health insurance (e.g., Medicaid). Approximately 2,500 residents have been identified as eligible for public health insurance.

Achieved a Broad Network of Providers: A variety of providers choose to participate, and in doing so, help guarantee participant choice and access to care. HSF currently has 14 public clinics, 14 community clinics, 1 public hospital, 4 non-profit hospitals and 1 private physician association (with two clinics).

Reduced Barriers to Entry through a Common Eligibility and Enrollment System: Implemented a County-wide eligibility and enrollment system shared by all providers. System also provides an actual unduplicated count of the number of uninsured residents, as opposed to, duplicated numbers gathered from various providers using different database systems.

Employers Offer HSF Program to Employees: A recently enacted local ordinance requires San Francisco employers to make health care expenditures on behalf of their employees to provide access to care. To date, over 850 employers have selected the City Option (which includes HSF) and committed \$27 million on behalf of 32,800 uninsured employees.

Low Number of HSF Participant Complaints: A review of first year participant complaints suggests few problems with access to care, the provider network or the quality of services. During the first year, the program's customer service tracking system logged only 168 participant complaints.