



Agenda _____ December 8, 2015

ADMINISTRATION & INDIGENT HEALTH

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November 23, 2015

The Honorable Board of Supervisors
County Administration Building
1221 Oak Street
Oakland, CA 94612

Dear Board Members:

SUBJECT: APPROVE AN ANNUAL BASE ALLOCATION TOTALING \$31,500,000 IN MEASURE A FUNDS EACH YEAR BEGINNING IN FISCAL YEAR 2016-2017 FOR 3 YEARS ENDING IN FISCAL YEAR 2018-2019 TO PROVIDE ESSENTIAL HEALTH CARE SERVICES TO ALAMEDA COUNTY RESIDENTS

RECOMMENDATION

Approve an annual base allocation totaling \$31,500,000 in Measure A funds each year beginning in Fiscal Year 2016-2017 for 3 years ending in Fiscal Year 2018-2019 to provide essential health care services to Alameda County residents

SUMMARY

Health Care Services Agency (HCSA) requests your Board to approve the three-year Measure A base allocations totaling \$31,500,000 each year beginning in Fiscal Year (FY) 2016-2017 to provide essential health care services to Alameda County residents. On November 9, 2015, the Board of Supervisors' Health Committee agreed with the funding recommendations and directed HCSA to bring forth the recommendations to the full Board for final approval.

DISCUSSION/FINDINGS

Measure A, the Essential Health Care Services Initiative, was approved by 71% of Alameda County voters on March 2, 2004 and authorized Alameda County to raise its sales tax by one-half percent to provide financial support for emergency medical, hospital inpatient, outpatient, public health, mental health and substance abuse services to indigent, low-income, and uninsured adults, children, families, seniors and other residents of Alameda County. On June 3, 2014, 75% of county voters approved Measure AA, which reauthorized and extended the existing half-cent tax until 2034.

On May 11, 2015, HCSA presented to the Board of Supervisor's Health Committee a timeline and set of criteria to guide the reauthorization process for the Measure A base allocations for the next three-year funding cycle starting FY 2016-2017. These criteria included:

1. Ensure continuity of critical health care services by maintaining long-term base allocations for another 3 years with minimal changes and including long-term providers;
2. Prioritize services in underinvested areas or areas experiencing declining funding using existing needs assessment processes; and
3. Allocate additional available funding through a request for proposal process to address critical health care needs based on data.

Based on these criteria, HCSA developed funding recommendations (see Attachment A) that included the following types of allocations:

CONTINUING ALLOCATIONS

The majority of the base allocations in the current 2013-2016 funding cycle would continue at the existing funding levels to provide ongoing health care services.

DISCONTINUED ALLOCATIONS

Three allocations (A3, A6, G) would be discontinued at the end of the current funding cycle.

NEW ALLOCATIONS

The following new allocations would be included in the recommendations based on existing Board-approved countywide strategic health initiatives, significant community and stakeholder engagement, and/or identified additional unmet health care needs that lack sufficient available other funding sources:

- a. Health services for persons who inject drugs in North County (A4)
- b. St. Rose Hospital (A7)
- c. Home visiting services for mothers and their babies who are on Medi-Cal (C1)
- d. Public health services for homeless residents in South County (C3)
- e. Dental health services for children and families in East County (E3)
- f. Health services for unaccompanied minors in South County (E9)
- g. Countywide Plan for Seniors (E13)

BACKGROUND

On December 14, 2004, your Board approved the general criteria and allocations for the 25% of Measure A funds, which are not specifically designated for the Alameda County Medical Center, based on testimony given at public hearings held throughout the county. These general criteria included: the approval of funds every three fiscal years beginning FY 04/05, unless otherwise specified or adjusted by your Board; distribution to reflect the geographic and cultural diversity of the county; focus on the priority populations, specifically indigent, low-income, and uninsured adults, children, families and seniors; leveraging of existing administrative protocols, systems and safety net providers to minimize administrative costs and duplicated processes; and coordination among providers and an integrated approach to the delivery of services.

SELECTION CRITERIA

Not applicable

FINANCING

Funding will be provided utilizing Measure A revenue that will be considered by your Board as part of the final approved budgets for the three fiscal years. Approval of these recommendations will have no impact on net County costs.

Sincerely,



Alex Briscoe, Director
Health Care Services Agency

ATTACHMENT A

2016-2019 Measure A Base Allocation Funding Recommendations

Base Allocation by Category	Current Allocations	Recommended Allocations
A. Medical Services	\$12,403,487	\$12,303,487
1. Community College & Fire Station Health Portal	\$750,000	\$0
2. Direct Medical & Support Services	\$214,322	\$214,322
3. EMS Corps	\$604,924	\$604,924
4. Health Services for Persons Who Inject Drugs	\$0	\$150,000
5. Medical Costs for Juvenile Justice Health Services	\$505,963	\$505,963
6. Non-County Hospitals (San Leandro Hospital)	\$1,000,000	\$0
7. Non-County Hospitals (St. Rose Hospital)	\$0	\$1,500,000
8. Non-County Hospitals (UCSF Benioff Children's Hospital Oakland)	\$2,000,000	\$2,000,000
9. Primary Care Community-Based Organizations	\$5,370,494	\$5,370,494
10. School Health Centers	\$1,957,784	\$1,957,784
B. Mental Health Services	\$5,201,353	\$5,201,353
1. Behavioral Health Providers	\$535,353	\$535,353
2. Criminal Justice Screening & In-Custody Services	\$4,306,000	\$4,306,000
3. Mental Health Services for Juvenile Justice Center	\$360,000	\$360,000
C. Public Health Services	\$3,184,008	\$4,534,008
1. Home Visiting Services	\$0	\$1,250,000
2. Public Health Prevention Initiative	\$3,184,008	\$3,184,008
3. Public Health Services for Homeless Residents	\$0	\$100,000
D. Substance Abuse Services	\$2,383,719	\$2,383,719
1. Alcohol and Other Drug Use (AOD) Prevention	\$240,495	\$240,495
2. Detoxification and Sobering Services	\$2,143,224	\$2,143,224
E. Priority Populations	\$6,227,433	\$6,227,433
Children & Families		
1. Alameda Boys & Girls Club	\$107,161	\$107,161
2. Alameda County Asthma Start	\$100,000	\$100,000
3. Alameda County Dental Health	\$157,580	\$257,580
4. Center for Early Intervention on Deafness	\$53,581	\$53,581
5. Health Enrollment for Children	\$300,000	\$300,000
6. School Health Services	\$622,356	\$622,356
7. Youth & Family Opportunities	\$2,597,818	\$2,597,818
Newcomers & Immigrants		
8. Health Services for Day Laborers	\$267,903	\$267,903
9. Health Services for Unaccompanied Immigrant Youth	\$0	\$164,920
10. Mental Health Services for Newcomers & Immigrants	\$80,371	\$80,371
Seniors		
11. Center for Elders Independence	\$53,581	\$53,581
12. City of San Leandro Senior Services	\$53,581	\$53,581
13. Countywide Plan for Seniors	\$0	\$1,500,000
14. Fremont Aging & Family Services	\$53,581	\$53,581
15. Senior Injury Prevention Program	\$115,000	\$115,000
F. Board of Supervisors Discretionary Health Care Services Funds	\$750,000	\$750,000
G. Direct Service Planning & Administration	\$400,000	\$0
TOTAL	\$28,885,080	\$31,500,000

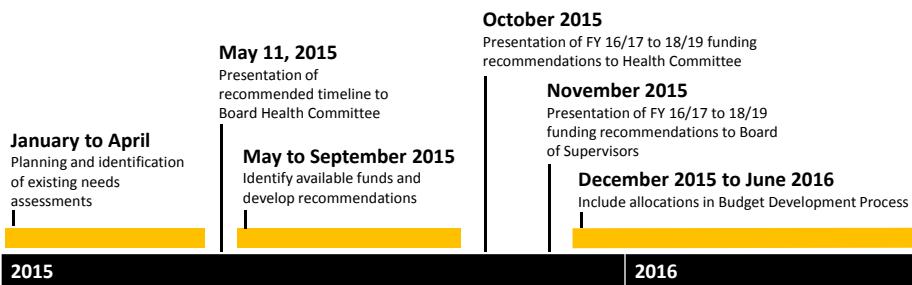


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Fiscal Year 2016 to 2019 Measure A Funding Recommendations



PROPOSED MEASURE A REAUTHORIZATION TIMELINE



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PROPOSED REAUTHORIZATION CRITERIA

1. Ensure continuity of critical health care services currently funded by Measure A
 - A. Maintain long-term base allocations for another 3 years with minimal changes
 - B. Include long-term providers in base allocation



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PROPOSED REAUTHORIZATION CRITERIA

2. Prioritize services in underinvested areas or areas experiencing declining funding using existing needs assessment process
 - A. ICPC Birth to 8 Initiative: School Readiness through Home Visiting
 - B. Countywide Plan for Seniors
 - C. Non-County hospitals



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PROPOSED REAUTHORIZATION CRITERIA

3. Allocate additional funding, if available, through a Request For Proposal (RFP) process to address critical health care needs based on data



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ADDITIONAL ANNUAL MEASURE A ALLOCATION

\$31,500,000

Proposed Annual Allocation

\$2,614,920

Additional Annual Allocation

\$28,885,080

Current Base Allocation



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PROPOSED REDUCTIONS TO MEASURE A BASE ALLOCATIONS

ALLOCATION BY CATEGORY	AMOUNT
MEDICAL SERVICES	-\$1,750,000
MENTAL HEALTH SERVICES	
PUBLIC HEALTH SERVICES	
SUBSTANCE ABUSE SERVICES	
PRIORITY POPULATIONS: CHILDREN & FAMILIES	
PRIORITY POPULATIONS: NEWCOMERS & IMMIGRANTS	
PRIORITY POPULATIONS: SENIORS	
BOARD DISCRETIONARY FUNDS	
DIRECT SERVICE PLANNING & ADMINISTRATION	-\$400,000
TOTAL	-2,150,000



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ADDITIONAL AVAILABLE ANNUAL MEASURE A FUNDING

\$2,614,920 Additional Annual Allocation

\$2,150,000 Proposed Allocation Reductions

\$4,764,920 Additional Available Funding



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ALAMEDA COUNTY STRATEGIC HEALTH INITIATIVES



2017-2020 Countywide Plan for Seniors



CHILDREN ARE READY FOR SCHOOL

Expand home visiting programs to reach all mothers and babies who are on Medi-Cal at birth

ADVANCE SOCIAL, HEALTH AND WELL-BEING OF OLDER ADULTS

Provide home-based nursing case management, injury prevention, and meals and nutrition services

ALL IN TO END HUNGER 2020

Eliminate food insecurity in Alameda County by 2020

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STAKEHOLDER ENGAGEMENT HOME VISITING STRATEGY



Developed recommendations using
RBA framework, research-based
strategies and national best practices
with 9 county partners, 10
community partners and parents

Presentation to ICPC

Presented Birth to 8 recommendations
to more than 100 community members
at School Readiness Forum

Presentation to Joint BOS
Health & Social Services
Committee

2013

2014

2015

Stakeholders Include

- Behavioral Health Care Services
- Center for Healthy Schools & Communities
- Child and Family Services
- Children's Hospital
- Child Solutions
- City of Oakland Human Services
- Community Assessment Planning Evaluation & Education
- Early Childhood Policy Committee
- Early Care and Education Planning Council
- East Bay Agency for Children
- Family Paths
- First 5
- Health Care Services Agency
- Interagency Children's Policy Council
- Jewish Family and Children's Services
- Kidango
- Packard Children's Hospital
- Public Health Department
- Safe Passages
- Through the Looking Glass

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COMMUNITY NEEDS ASSESSMENT COUNTYWIDE PLAN FOR SENIORS

Area Agency on Aging (AAA) Countywide Planning Process

❖ Planning Committee ❖ Data Analysis ❖ Community Survey (3,500+ Seniors) ❖ Focus Groups

2015

JUL

AUG

SEPT

OCT

Older Adults Brainstorm Sessions with
BHCS Providers, HCSA/SSA Senior Planning
Committee, HCSA Workgroup and Senior
Injury Prevention Program Providers

Listening Sessions hosted by United
Seniors of Oakland & Alameda
County and Planning Committee

Stakeholders Include

- Ashby Village
- Bay Area Community Services
- Behavioral Health Care Services
- City of Fremont Human Services Department
- City of Oakland Human Services Department
- Commission on Aging
- Community Assessment Planning Evaluation & Education
- Community Development Agency, Healthy Homes Department
- Eden Village
- Fruitvale Senior Center
- Health Care Services Agency
- Mercy Retirement Center
- Public Health Department
- SIEU – United Long Term Care Workers
- Senior Services Coalition
- Senior Support Services of the Tri-Valley
- Service Opportunities for Seniors/Meals on Wheels
- Spectrum Community Services
- Social Services Agency
- St. Mary's Center
- United Seniors of Oakland and Alameda County
- University of California, San Francisco

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STAKEHOLDER ENGAGEMENT



Campaign announcement &
Board of Supervisors resolution

Pre-Planning

Stakeholder Planning Process with 115 individuals
from more than 35 organizations

Community engagement,
governance structure and
strategy refinement

2014

2015

2016

Stakeholders Include

- Alameda County Board of Supervisors
- Alameda County Community Food Bank
- Alameda County Meals on Wheels
- Alameda County-Oakland Community Action Partnership
- California Association of Food Banks
- City Slicker Farms
- Community Development Agency
- Community Food and Justice Coalition
- Congresswoman Barbara Lee's office
- Cooperative Food Empowerment Directive
- Deputy Sheriff's Athletic League & Dig Deep Farms
- Early Care and Education Planning Council
- Early Edge California
- East Bay Community Foundation
- First 5 Alameda County
- FoodShift!
- Fresh Approach
- Health Care Services Agency
- Hope Collaborative
- Interagency Children's Policy Council
- Mandela Marketplace
- Namu Farm
- Northern California Recycling Association
- Oakland Food Policy Council
- Oakland Unified School District Nutrition Services
- Project Open Hand
- Public Health Department
- Pueblo
- Rise Together
- SEIU-UHW
- Social Services Agency
- Street Degree
- Thomas J. Long Foundation
- Tri-Valley Poverty Awareness Initiative
- Y&H Soda Foundation
- Youth Radio

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INVEST IN ALAMEDA COUNTY HEALTH PRIORITIES

Health Priorities	Amount
Home Visiting Strategy	\$1,250,000
Countywide Plan for Seniors	\$1,500,000
Emergency Medical (St. Rose Hospital)	\$1,500,000
Additional Health Priorities	\$514,920

Additional Available Funding \$4,764,920



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INVEST IN ALAMEDA COUNTY HEALTH PRIORITIES

POPULATION	Mothers and their babies who are on Medi-Cal at birth
GEOGRAPHIC REGION	Countywide
MEASURE A SERVICE CATEGORY	Public Health
SERVICES NEEDED	Early childhood home visiting services to provide intensive, long-term case management services
PROPOSED ANNUAL FUNDING	\$1,250,000
LEVERAGE POTENTIAL	\$625,000 to \$937,500 (Federal)



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INVEST IN ALAMEDA COUNTY HEALTH PRIORITIES

POPULATION	Older Adults & Seniors
GEOGRAPHIC REGION	Countywide
MEASURE A SERVICE CATEGORY	Public Health
SERVICES NEEDED	<ul style="list-style-type: none"> ▪ Home-Based Nursing Case Management (\$500,000) ▪ Hospice & Advance Life Planning (\$250,000) ▪ Injury Prevention & Meals/Nutrition (\$750,000)
PROPOSED ANNUAL FUNDING	\$1,500,000
LEVERAGE POTENTIAL	\$95,000 - \$165,000 (Federal)



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INVEST IN ALAMEDA COUNTY HEALTH PRIORITIES

POPULATION	Low-income, indigent and underinsured children and families who access St. Rose Hospital
GEOGRAPHIC REGION	Central and Southern Alameda County
MEASURE A SERVICE CATEGORY	Emergency Medical, Hospital Inpatient, Outpatient
SERVICES NEEDED	<ul style="list-style-type: none"> ▪ Emergency medical ▪ OB/GYN services ▪ Elective cardiac care
PROPOSED ANNUAL FUNDING	\$1,500,000
LEVERAGE POTENTIAL	\$1,500,000 (Federal)



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2016-2019 ALAMEDA COUNTY ADDITIONAL HEALTH PRIORITIES

East County

Dental Health Services for Children & Families \$100,000

North County

Health Services for Persons Who Inject Drugs \$150,000

South County

Public Health Services for Homeless Residents \$100,000

Health Services for Unaccompanied Minors \$164,920

ESTIMATED AVAILABLE FUNDS \$514,920



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PROPOSED 2016-2019 MEASURE A ALLOCATIONS

ALLOCATION BY CATEGORY	AMOUNT
MEDICAL SERVICES	\$12,403,487
MENTAL HEALTH SERVICES	\$5,201,353
PUBLIC HEALTH SERVICES	\$4,534,008
SUBSTANCE ABUSE SERVICES	\$2,383,719
PRIORITY POPULATIONS: CHILDREN & FAMILIES	\$3,938,496
PRIORITY POPULATIONS: NEWCOMERS & IMMIGRANTS	\$513,194
PRIORITY POPULATIONS: SENIORS	\$1,775,743
BOARD DISCRETIONARY FUNDS	\$750,000
DIRECT SERVICE PLANNING & ADMINISTRATION	\$0

TOTAL \$31,500,000 18



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Questions & Discussion

