

SAN FRANCISCO DEPARTMENT OF PUBLIC HEALTH							
FY 2009-10 PROPOSED BUDGET - JUNE 1, 2009							
Item	Div	Description	09-10 FTE Change	Mayor's Budget	May 21 Health Commission	Difference Cost/ (Savings)	Comment
REVENUE							
A1	GH	Base Revenue	-	(17,262,904)	(17,262,904)		- Revenue Increases based on revenue build up net Commercial, Medicare and Medi-Cal and SNCP.
A2	LHH	Base Revenue	-	(6,176,276)	(6,176,276)		- Revenue increases based on revenue build up.
A3	AITC	Adult Immunization and Travel Clinic Fee Revenue	-	196,399	196,399		- Projected decrease in revenues due to declining number of travelers.
A4	GH	Revenue from Supply Implants and Emergency Department	1.54	(648,584)	(648,584)		- This proposal is to increase net patient revenue by better charge capture and reporting of supply implants used throughout SFGH and better charge capture of procedures performed in the Emergency Department. One additional FTE will be required to meet the documentation requirements for billing the implants. Another additional FTE will be required to code the procedures performed in the ED.
A5	GH	SFGH Liens Recovery from Municipal Transportation Authority	-	(1,600,000)	(1,600,000)		- Reimbursement from SFMTA for the waiver of medical charges incurred by persons injured by MTA operations. Funds will be recovered based on actual claims settled.
A6	SFGH and PC	Amendment to FFP for Managed Medi-Cal	-	(4,900,000)	(4,900,000)		- Based on a program in place in LA County, other Counties are finalizing contracts with the State and their local initiatives (for SF, the San Francisco Health Authority) to secure federal matching revenues (FMAP) for managed Medi-Cal expenditures funded with intergovernmental transfers. A state plan amendment is expected to be approved soon with an effective date of October 1 2008.
A7	Dept. Wide	Temporary Increases to Federal Medical Assistance Percentage (FMAP)	-	(49,626,220)	(49,843,000)	216,780	The proposed Federal stimulus package include increases to the Federal match for FMAP. This funding will expire in December 2010.
A8	CBHS	Base Revenue	-	3,500,000	3,500,000		- Baseline adjustments to Short-Doyle Medi-Cal revenues based on current year projections.
A9	LHH	Medi-Care Patch Revenue from Acute Care Hospitals	-	(507,602)	(507,602)		- Laguna Honda Hospital will charge other acute care hospitals and insurance carriers for patients they refer to LHH without Medi-Care 90 coverage, for the first 3 months.
A10	LHH	Rehabilitation Services Revenue Enhancement	6.04	(270,898)	(253,417)	(17,481)	The new LHH will have 19 additional rehabilitation beds (currently there are 26). This will increase the volume of rehabilitation services which can be reimbursed by Medi-Cal.
A11	LHH	Acute Rehabilitation Services Revenue Enhancement	2.50	(220,146)	(213,154)	(6,992)	The new LHH will have 9 additional rehabilitation beds (currently there are 6), where the patients will require 18 hours of therapy in a seven day period. This will increase the volume of rehabilitation services which can be reimbursed by Medi-Cal.
A12	EHS	Environmental Health Baseline Revenue	-	(796,705)	(796,705)		- Projected revenue increase related to factors such as changes in inventory, state and federal reimbursement.
A13	EHS	Environmental Health Fee Increases to Cover Program Costs	1.54	(699,368)	(699,368)		- Fee increases to ensure that Environmental Health Programs expenses are covered by related fees or fines. Salary increases have already be accounted for in the base budget, but rent and revenue increases have not been included. In addition, there are two ordinances passed in the last year that will require two new positions.

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A14	EHS	Vector Control Increase and Program Change	3.85	(915,792)	(915,792)	-	- Fee for vector control program is increasing so that program costs are 100% recovered by fees not requiring additional support from the General Fund. Four inspectors were not included in last year's budget to perform the inspections. This role is currently being covered by temporary positions, but permanent positions need to be added. An additional accountant is also needed for this program.
A15	MH	UCSF Infant, Child and Adolescent Psychiatry Early Periodic and Diagnostic Screening and Testing	-	(326,131)	(326,131)	-	- This initiative will redirect this UCSF program will provide mental health treatment to youth have experienced trauma and will draw down EPSDT funding.
A16	LHH	Reversal of 10% Medi-Cal cut to Hospital based skilled nursing rates	-	(4,000,000)	(4,000,000)	-	- Final court decision still pending. One time revenue for 08-09.
A17	GH and PC	Healthy Families Capitation Increase	-	(375,000)	(375,000)	-	- Services to Healthy Family enrollees at our FQHC clinics will be eligible for full FQHC PPS payments and the Department will recover additional reimbursement based on the difference between capitation revenues from the SFHP and FQHC prospective rates.
A18	CBHS	Short Doyle SPA -- Increase in Federal match of county costs	-	(12,500,000)	(12,500,000)	-	- The State Department of Health Care Services is developing and implementing a State Plan Amendment to allow public entities to draw down federal financial participation (FFP) for the difference between the State schedule of maximum allowances and cost of outpatient mental health services provided under the Short-Doyle / Medi-Cal program.
A19	GH and PC	Medi-Cal Managed Care IGT for Blue Cross	-	(1,400,000)	(1,400,000)	-	- Based on a program in place in LA County, other Counties are finalizing contracts with the State and their local initiatives (for SF, Blue Cross) to secure federal matching revenues (FMAP) for managed Medi-Cal expenditures funded with intergovernmental transfers. A state plan amendment is expected to be approved soon with an effective date of October 1 2008.
A20	GH	Healthy Worker Premiums	-	(1,503,261)	(1,500,000)	(3,261)	- Continued growth in enrollment based on current trends will result in an increase in capitation payments of \$3M annually offset by a \$1.5M increase in the workorder to the Human Services Agency. There is also an increase in the worker payroll deduction for health benefits from \$3 to \$10 per month.
A21	MH	Trauma Recovery Center	-	(80,000)	(80,000)	-	- To maximize the revenue generation capacity of the UC Trauma Recovery Center (TRC), and to address the City's budget deficit, an amount of \$80k in General Fund monies will be removed from the UC Trauma Recovery Center. These funds will be replaced with \$50k in Short Doyle Medi-Cal and \$30k in State Victim Witness Compensation reimbursement.
A22	CBHS	Billing for Physician Consultations	-	(250,000)	(250,000)	-	- Currently, Community Behavioral Health Services provides 2.5 FTE psychiatrists to consult with physicians in the Department's Community Oriented Primary Care clinics regarding behavioral health and related medication needs for specific patients. This initiative would maximize the revenue generation capacity of these services by claiming Short Doyle Medi-Cal reimbursement.
A23	HIV	Increase in Ryan White Stop Loss Funding	-	(600,000)	(600,000)	-	- We are expecting an increase of \$2.5 million in Ryan White Care funding. A portion of this will need to backfill other grant losses, but \$600k will be available to fund services were previously funded by Ryan White dollars, but backfilled by the General fund.
A24	GH and PC	Release of One-Time Reserves for FQHC Billings	-	(6,300,000)	(6,300,000)	-	- One time release of reserves in FY 08-09 related to billing crossover.

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A25 - NEW	SF-GH and PC	Increase in Health Accountability Ordinance In-Lieu Fee	-	(50,000)	-	(50,000)	Department submitted amendments to the HCAO to increase the fees for the in lieu payments starting in FY 0708 and FY 0910, and to increase the minimum hours per employee (in order to be covered) from 15 to 20 hours per week starting in FY0910. The Department estimates that with these changes to the program, and based on the FY0809 budget and actual collections, an additional \$50,000 can be budgeted for FY0910.
TOTAL REVENUE			15.47	(107,312,488)	(107,451,534)	139,046	
INFLATIONARY							
B1	Dept Wide	Pharmaceutical Inflation	-	1,526,764	1,526,764	-	The FY09-10 inflation rate for pharmaceuticals is estimated at 4%. Although the industry wide projected rate of 7% is projected, since DPH uses federal programs and substitution of generic equivalents for patented agents as they become available, a lower inflation rate is used. LHH \$206k, GH \$885k, JHS \$111k, and MH \$323k. No change in revenue.
B2	LHH	Laundry contract increases	-	523,778	523,778	-	Laundry cleaning rates are increasing.
B3		0.00	-	-	-	-	Moved to new initiatives
B4	GH	UCSF Non-Faculty Staff COLA	-	-	-	-	This request is to add funding to the UCSF Affiliation Agreement for amounts contractually obligated to the UCSF staff based on anticipated increases in the MOUs. This amount of \$702,154 does not include any increases in physician compensation. UC will reprogram existing expenses in their budget to cover this increase without additional general fund in 09-10.
B5	HUH	Direct Access to Housing (DAH) Master Lease and operating costs	-	250,072	250,072	-	Increased annual lease payments, utilities, maintenance and repair for the six DAH master lease buildings
B6	Dept. Wide	Rent Increases Per Lease Agreements and Delays in moves	-	361,706	361,706	-	Rent increases resulting from lease negotiations for programs located in non-city owned space.
TOTAL INFLATIONARY			-	2,662,320	2,662,320	-	
TOTAL INFLATIONARY & REVENUE			15.47	(104,650,168)	(104,789,214)	139,046	
REVENUE NEUTRAL							
C1	GH	ED Residency Program - Yr 2	6.00	-	-	-	This request will support second year of a four year Emergency Medicine Residency Program recently approved by the ACGME. The first year of the Program started in July 1, 2008, and the request for the first year was ongoing funding for 6 R1's (Resident year 1). Year 2 (FY 09-10) will request ongoing funding for 6 R2's, then subsequent years will request funding for 6 R3's and 6 R4's. Eventually in FY 11-12 there will be 24 residents training in the program. This program will greatly improve recruitment and retention of attending physicians and improve on the long wait times.
C2	JH	ADAP Adjustment - Jail Health	-	-	-	-	Based on FY 07-08 actual and FY 08-09 projection, reimbursement from State AIDS Drug Assistance Program (ADAP) for pharmaceutical supplies will increase by \$175,979 for the HIV patients in jail. Inflationary costs are not included in this initiative.

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C3	CBHS	Therapeutic Foster Care	-	-	-	-	The department will leverage Early Prevention, Screening, Diagnosis and Treatment (EPSDT) funding to provide treatment services under Therapeutic Foster Care Program for children/youth placed in Foster Family Agencies (FFA) homes. In partnership with SF-DHSA-Families & Children's Services, one to two mental health Medi-Cal providers with experience of working with children/youth in FFA homes, will be recruited to provide a range of in-home therapeutic services, both in SF counties and in the neighboring Bay Area counties, for San Francisco children/youth in foster care.
C4	PHP	California Healthcare for Indigents Program (CHIP) Reduction	-	-	-	-	As the State has eliminated Prop 99 CHIP Funding, program administration will be moved to Prop 99 EMSA funds.
C5	CBHS	EPSTD Revenue Maximization for Joint Violence Prevention Program	-	-	-	-	Working with other City departments, the purpose of this EPSTD Revenue Maximization Initiative is to request Early Prevention, Screening, Diagnosis and Treatment (EPSTD) funding to provide services for Medi-Cal recipients between the age of birth and 21, who present with problems that can be ameliorated through mental health treatment.
C6	MH	Settlement Implementation Plan for Therapeutic Behavioral Services	-	-	-	-	Mandated services by State Department of Mental Health, as part of the State's recent settlement agreement with the federal court on the Emily Q. v. Bonta case
C7 - NEW	HSF	Healthy San Francisco	-	-	-	-	Healthy San Francisco provides universal, comprehensive, affordable health care to uninsured adults. Increases in expenditures are higher in the categories of pharmacy, home health services, the third-party administrative contract with the San Francisco Health Plan, non-profit provider payments and the ongoing costs related to the county-wide information technology system that enrolls applicants into the program due to increasing enrollment. The revenue budget reflects a full year of Health Care Coverage Initiative funding, participant fees and increased contributions from employers as a result of the Health Care Security Ordinance.
TOTAL REVENUE NEUTRAL			6.00	-	-	-	
TOTAL REVENUE NEUTRAL, INFLATIONAR			21.47	(104,650,168)	(104,789,214)	139,046	
REGULATORY							
D1	GH	Infection Control	-	-	143,000	(143,000)	This initiative will add a new hospital Infection Surveillance Worker, as well as materials and supplies expenses to the Infection Control team to conduct hospital wide surveillance for healthcare-associated infection particularly MRSA, to develop and implement infection prevention program, and to coordinate the review of all infection root cause analysis as mandated by the State Senate Bills 158 and 1058, effective January 1, 2009. No additional funds were included in FY09-10 budget, but the Department has found one time savings in the UC contract to fund this project for FY 09-10.
TOTAL REGULATORY			-	-	143,000	(143,000)	
TOTAL REGULATORY, REVENUE NEUTRAL			21.47	(104,650,168)	(104,646,214)	(3,954)	
STRUCTURAL							
E1	GH	Salary Structural Fix	-	2,998,563	2,998,563	-	This request increases funding for temp as needed Nursing Care Assistants used as sitters for patient safety.
E2	LHH	Salary Structural Fix	5.81	1,477,545	2,174,262	(696,717)	This request increases funding for temp as needed Nursing Care Assistants used as sitters for patient safety.

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E3	LHH	Pharmaceuticals Structural Fix	-	-	900,000	(900,000)	While the census at LHH is decreasing, the remaining residents have more acute and complex medical issues that require more medication. The revenue related to these pharmaceuticals is already included in the baseline revenue.
E4	CBHS	Buprenorphine pharmacy costs	-	397,500	397,500	-	Federal and corporate funding for Buprenorphine costs, an effective, alternative treatment for opioid addiction are no longer available as the generic version of this drug becomes available.
E5	CBHS	Community Placement Program Shortfall	-	-	5,034,998	(5,034,998)	This program, responsible for authorizing, referring and placing all clients at SFGH Psychiatric Emergency Services and Laguna Honda Hospital into alternative placements into alternative care.
E6	MH	Salary Structural Fix	-	900,000	935,000	(35,000)	This is a request to correct a structural problem in Mental Health salaries that has existed for two fiscal years. This will increase the budget for salaries to restore a portion of the \$2.6 million cut in salaries in FY 07-08 and FY 08-09.
TOTAL STRUCTURAL			5.81	5,773,608	12,440,323	(6,666,715)	
TOTAL STRUCTURAL, REGULATORY, REVE			27.28	(98,876,560)	(92,205,891)	(6,670,669)	
REDUCTIONS							
F1	Dept. Wide	Security Outsource	-	(1,626,678)	(2,711,130)	1,084,452	Upon approval, all security services at DPH hospitals and clinics would be outsourced. Additional savings would also be achieved by the Sheriff as deputies are redeployed to the jails. Layoff may occur in Sheriff's Department. Figures assume an January 1, 2010 start date.
F2	GH	Conversion of Acute Psych Unit to a Non-Acute unit	(11.00)	(1,423,077)	(1,423,077)	-	A 21 bed acute psychiatric unit would be reconfigured to an 18 Bed unit for non-acute patients waiting for placement at a lower level of care in a non-acute hospital setting. Patients would be evaluated using Medi-Cal guidelines and classified as non-acute by the SFGH Psychiatry Utilization Review Department.
F3	GH	Reduction to UCSF Affiliation Agreement	-	(1,542,678)	(1,542,678)	-	This initiative will reduce the UCSF Affiliation Agreement by \$4,205,765 in FY 09-10. \$2,663,087 of this amount is reduced in the FY 09-10 base budget as part of the FY 08-09 mid year cuts. The reduction of \$4,205,765 does not include the portion of UC costs that are found in other budget reduction initiatives, such as the Medicine High User Program. This amount, plus the amounts in other budget reduction initiatives, will bring the total reduction to the 5% target. This reduction will be achieved primarily by eliminating positions in several departments and not filling vacant positions in the clinical laboratories and several sub-specialty areas.
F4	HAH	30% Reduction to Health at Home	-	(970,852)	(970,852)	-	30% Reduction of the HAH licensed home health agency budget, decreasing nursing management, RN field and non-field staff, Public Health nurse, nurse practitioner, home health aide and other administrative support necessary to provide services to clients needing acute, skilled clinical services in the home. Assumes a July 1, 2009 start date.
F5	Disease Control	Consolidations in disease control program	(0.97)	(832,503)	(832,503)	-	Both the Tuberculosis Control Program and the STD Control will be scaled back and reconfigured separately.
F6	HIV	HIV Health Services Reduction	(0.50)	(370,780)	(370,780)	-	Eliminates \$200,000 contract for program design evaluation, \$110,943 contract for outpatient mental health and position reductions.
F7	JH	Jail Health Services Reduction	(1.00)	(168,350)	(168,350)	-	Eliminate 1.00 FTE vacant RN position that was funded to staff additional Pods at County Jail #5.

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F8	HUH	Leverage Short-Doyle Medi-Cal at 3 Supportive Housing Sites	-	(380,264)	(380,264)	-	In an effort to reduce General Fund expense, support services that have been provided by Baker Places in three DAH buildings will be replaced by existing DPH clinicians who will be able to bill Medi-Cal for services provided.
F9	HUH	10% Reduction in HIV/AIDS Housing Subsidy Funding	-	(559,360)	(559,360)	-	This initiative will offset the General Fund costs of housing through increasing the rent contribution to the tenant.
F10	CBHS - MH	Prioritize Mental Health Services to persons with serious mental illness	(6.00)	(707,352)	(707,352)	-	This proposal would limit ongoing mental health services for indigent clients to only those clients who have a serious mental illness. Acute services would remain available for all clients, as needed. This revision delays the start-date of implementation to October 1, 2009. This would require a legislative change to the existing ordinance.
F11	CBHS	Additional reductions to CBHS Civil Service Staff	(12.24)	(671,675)	(671,675)	-	Effective: May 1, 2009. This second mid-year reduction to civil service clinics will refocus services to clinical case management and medication management for clients to prevent use of higher levels of care.
F12	CBHS	Administrative Position Reductions	(4.38)	(1,699,421)	(1,699,421)	-	Effective May 1, 2009. Administrative positions will be eliminated or reassigned to produce General Fund Savings
F13	CBHS	Community Programs Business Office Formation	(4.00)	(546,673)	(546,673)	-	Effective May 1, 2009. Contracting in Community Programs will be consolidated into one location and operations will be streamlined to achieve efficiencies.
F14	MH	Redirection of Behavioral Health Programs to Provide Services for the Mental Health Services Act	-	(1,039,533)	(1,039,533)	-	Community Health Program contracts will be redirected to provide services for the Mental Health Services Act.
F15	CBHS	Behavioral Health Contractor Reductions	-	(5,559,742)	(5,747,759)	188,017	Reduction in funding for 18 CBHS contractors. The department will work with each contractor to manage these losses effectively.
F16	LHH	Nursing Administrative Position Changes	-	(35,759)	(35,759)	-	Position conversion that will enable the hospital to provide services without compromising care.
F17	LHH	Nursing Skill Mix Changes	29.62	(239,381)	(188,496)	(50,885)	Beginning on May 1, this initiative will use Home Health Aides to provide non-personal care to support residents care and allow care staff to provide direct care services. This initiative will also change RN to LVN in areas where use of LVN meets staffing regulatory requirements without compromising standard of care.
F18	GH	Cancer Health Education Reduction	(0.85)	(98,806)	(98,806)	-	The Department is pursuing grant funding for this position and anticipates this position can be moved to grant funding in the fall.
F19	PC	Reorganization of Special Programs for Youth at the Juvenile Justice Center (Youth Guidance Center)	(4.10)	(746,016)	(746,016)	-	Reorganization of Special Programs for Youth (SPY) at the Juvenile Justice Center (Youth Guidance Center) to improve service delivery and integration of behavioral health services and primary care.
F20	HUH	Reduction of 100 Stabilization Beds as new supportive housing is added	-	(750,000)	(750,000)	-	Over the last five years, the Stabilization Housing program expanded from 50 units to over 300 units and from an annual budget of \$450,000 to over \$2.3 million. The Department will phase out 100 these units out gradually and SFHOT will work with clients to secure alternative placements.
F21	LHH	Contingency Savings from LHH Rebuild Project	-	(9,000,000)	(9,000,000)	-	Full amount budgeted for contingency for cost overruns in the first phase of the Laguna Honda Hospital rebuild project, has been determined to be not needed after initial claims have been settled.

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F22	HIV	HIV Prevention Reduction	(2.30)	(289,049)	(289,049)	-	Effective May 1: One position will be eliminated in administration. Effective July 1: Two grant funded positions will be eliminated and funds will be used.
F23	Health Promotion	Civil Service Reductions in Health Promotion	(0.80)	(155,778)	(155,778)	-	Reduction of clinical pharmacist who focuses on health education does not provide direct health services.
F24	MH	Additional GF Positions Transferred to Cover MHSA Activities	-	(2,062,493)	(2,062,493)	-	CBHS proposes to have 11.75 positions currently funded by General Fund transferred to MHSA funds to cover MHSA activities
F25	EMSA	Transfer of the Emergency Services Agency	-	(90,279)	(90,279)	-	The transition of the Emergency Medical Services Agency (EMS Agency) from the Department of Public Health (DPH) to the Department of Emergency Management (DEM) will consolidate planning and oversight of City emergency services into one City department. Two positions will be eliminated and savings will be shared by the departments, and DPH's portion is reflected here.
F26	CBHS	Reduction to Request for Proposals for Mental Health and Substance Abuse Contracts	-	(4,000,000)	(7,000,000)	3,000,000	The Department expects to issue the Request for Proposals in June 2009 with proposal review, contractor selection, and contractor awards to be effective January 1, 2010. The revenue impact is to be determined.
F27	HIV	HIV Benefit Counseling and Advocacy (HIV Health Services)	-	(230,133)	(230,133)	-	Reduction to benefits counseling contract and not direct health services.
F28	HIV	HIV Prevention - Outreach and Testing Contract Reductions	-	(283,332)	(356,811)	73,479	Contract reductions for HIV outreach for after school funding programs, non-core HIV testing and counselor training.
F29	SA	Drug Court Assessment, Referral and Client Representation at Drug Court	-	(125,000)	(125,000)	-	Reducing drug court services by \$125K from \$1,244,912 to \$1,119,912, or 10%. This will reduce the number of case managers from eight to six.
F30	MH	Vocational Services	-	(1,000,000)	(1,000,000)	-	Elimination of general fund support for 5 CBHS-funded vocational programs for individuals with disabilities resulting from behavioral health disorders. \$626,000 in planned matching funds to be drawn down through an expansion of the collaborative with CA Department of Rehabilitation (DOR) toward vocational rehabilitation services for individuals with mental illness disability
F31	Dept. Wide	Position Reductions - both filled and vacant	(18.50)	(1,872,241)	(2,033,845)	161,604	18.5 Positions, both vacant and filled have been identified for elimination and/or substitution to achieve savings.
F32	Dept. Wide	Prior Year Grant and Project Close Outs	-	(6,050,000)	(5,850,000)	(200,000)	This initiative includes one time savings from the Health Young Adults Program (\$750,000), the first year of the Scatter Site Housing (\$200,000) and one-time close out of prior year grant reserves (\$5,100,000)
F33	MH	Relocation of Southeast Mission Geriatric Older Adult Behavioral Health Clinic	-	(36,646)	(36,646)	-	Relocation of Southeast Mission Geriatric Older Adult Behavioral Health Clinic from 3901 Mission to OMI Adult Behavioral Health clinic at 1760 Ocean to address infrastructure deficiencies, and coverage needs of the older adult system of care.
F34 - NEW	CBHS	Reprogramming Mobile Assistance Patrol Transportation Program	-	(366,667)	-	(366,667)	Transportation services provided to shelter clients will now only be available in the evening, and day transportation services will focus on moving clients between emergency departments and community medical respite and community crisis stabilization programs. Reduction effective 8/1/09.

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F35 - NEW	JHS	Contracting Out Jail Health	(86.45)	(7,769,728)	-	(7,769,728)	Effective January 1, 2010: The Sheriff's Department has proposed outsourcing all health services and health screenings provided by the Department of Public Health to San Francisco County inmates at the county jails and San Francisco General Hospital. Note the value of expenditure decrease and ongoing savings reflects a contract expenditure increase of \$15 million annually in the Sheriff's Department, but is not budgeted at DPH.
F36 - NEW	Dept. Wide	Increased Attrition Savings for Salary Savings	-	(16,998,384)	-	(16,998,384)	Almost \$17 Million of attrition savings was loaded into the department's budget as a place holder positions eliminations City wide. This figure will change with the introduction of technical adjustment to the budget in June. The total number of positions eliminated in the department may not reflect this figure. To date DPH has issued layoff notices to clerical staff. In addition, Certified Nursing Assistants will be converted to Patient Care Assistants.
F37 - NEW	CBHS	Reduction - Single Room Occupancy (SRO) Collaborative	-	(750,000)	-	(750,000)	To help address their budget deficit in light of declining revenues, the Department of Building Inspection will be eliminating their funding to DPH to support the SRO Collaborative. While this change is budget neutral for DPH, there will be a net savings Citywide of \$750,000. The value of this Citywide savings is reflected here.
		TOTAL REDUCTIONS	(37.01)	(71,048,629)	(49,420,517)	(21,628,112)	
		TOTAL REDUCTIONS, STRUCTURAL	(96.18)	(169,925,189)	(141,626,408)	(28,298,781)	
NEW INITIATIVES							
G1	LHH	Increased Operating Costs for New Facility	-	292,050	548,050	(256,000)	The new Laguna Honda Facility will be operational in the Spring of 2010. This state of the art facility will require additional operating expense changes in maintenance contracts.
G2	HUH	New Supportive Housing at 149 Mason Street	-	268,799	268,799	-	Additional funding needed for first year start up costs, operations and on-site supportive services for 56 new units of housing for the chronically homeless, set to open in January 2010.
G3	Dept. Wide	DPH Information Technology Operating Expenses Increase	2.50	-	777,583	(777,583)	Additional funding needed to address expanded IT service needs in DPH
G4	Dept. Wide	Electronic Ambulatory Medical Record Project	-	-	-	-	This initiative pertains to the acquisition and implementation of an Electronic Medical Record (EMR) at Hospital and Community based Primary Care and specialty clinics. The EMR system will provide a cohesive information systems infrastructure for Ambulatory patient care services including Clinical Documentation; Progress Notes; Electronic Medication Ordering (e Prescribing) and integration with other Key departmental clinical and financial systems. DPH will be pursuing federal stimulus funding for this project.
		TOTAL NEW INITIATIVES	2.50	560,849	1,594,432	(1,033,583)	
		TOTAL ALL INITIATIVES	(93.68)	(169,364,340)	(140,031,976)	(29,332,364)	