

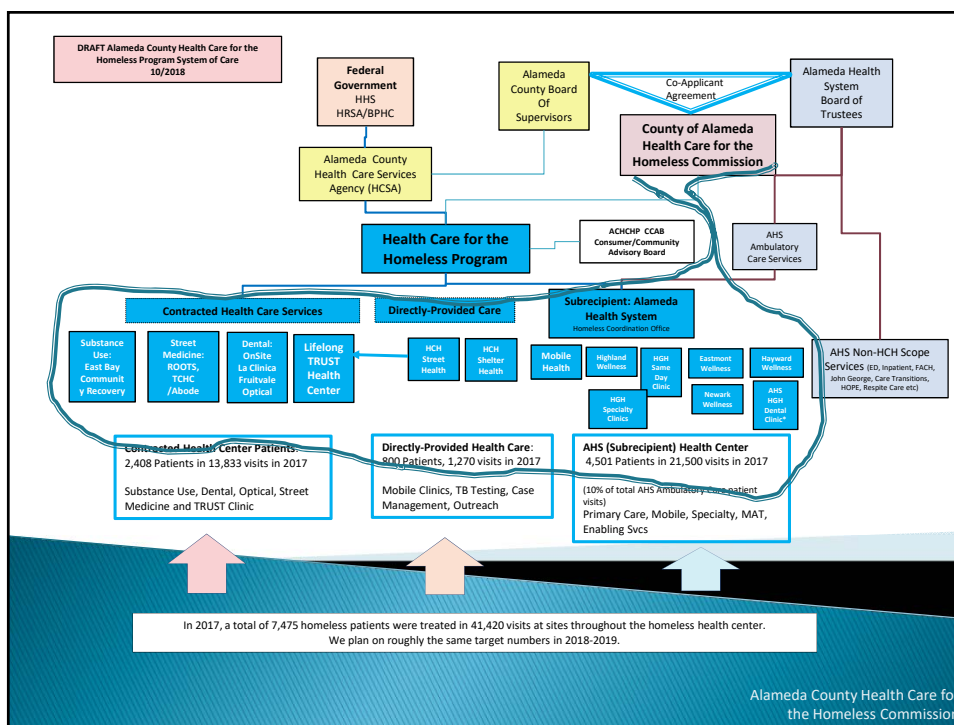
Alameda County Health Care for the Homeless
HEALTH CARE SERVICES AGENCY

Alameda County Health Care for the Homeless Commission

10/19/2018 Meeting

Subrecipient Alameda Health System Orientation and Update

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Alameda Health System ACHCH Subrecipient

ACHCH initiated in 1988, and included AHS clinics, labs, services as part of our HCH health center.

At that time, Alameda Health System was part of County of Alameda Health Care Services Agency. In 1999 AHS split from HCSA and became a Public Hospital Authority. To maintain continuity of services (and FQHC status), AHS became a **subrecipient** of the HCH program.

Subrecipient:

Pass Through of Federal Funds

- + Meets HRSA 19 Health Center Requirements
- + Monitoring and Oversight
- + Substantial part of health center work
- = FQHC status (for entire patient population) and federal grant funds.

AHS Facilities

Hospitals:

- Fairmont (140 beds),
- Highland (236 beds)
- San Leandro (93 beds)
- Alameda (281 beds)
- John George Psychiatric Hospital (80 beds)

Ambulatory Care Clinics:

- Highland Wellness
 - Same Day Clinic
 - Highland/HCP
- ### Specialty Care Clinics
- Eastmont Wellness
 - Hayward Wellness
 - Newark Wellness
 - HCH Mobile Health

AHS Governance and Leadership

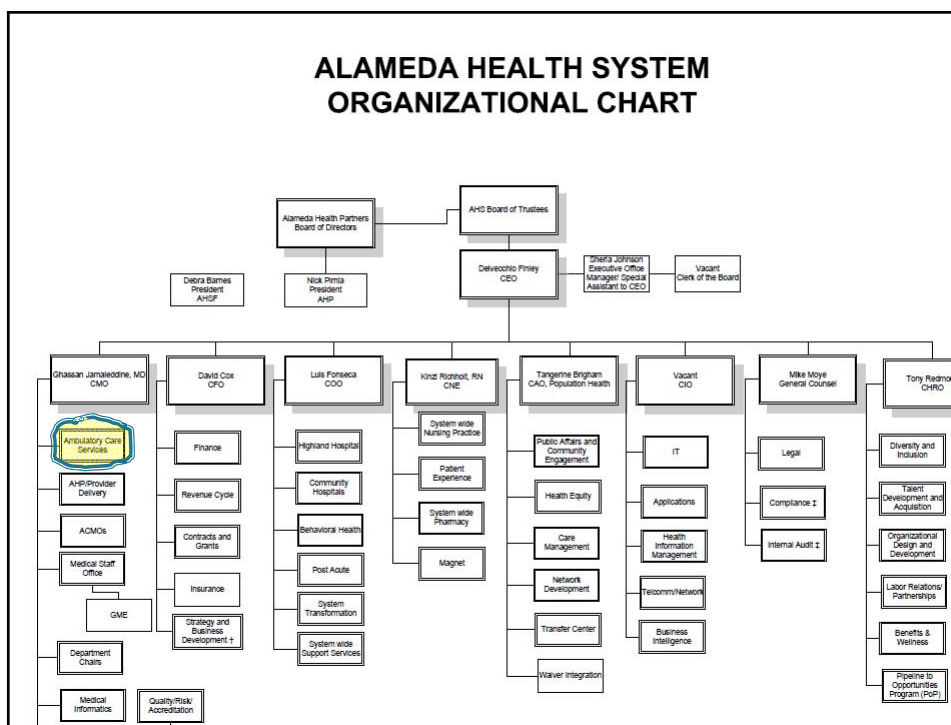
Board of Trustees
Joe DeVries, President



Executive Team
Delvecchio Finley, CEO



ALAMEDA HEALTH SYSTEM ORGANIZATIONAL CHART



Ambulatory Care Services



Dr. Palav Babaria, Chief Administrative Officer



Kathryn Horner, Vice President of Ambulatory Care Services

- Primary Care*
- Substance Use*
- Behavioral Health*
- Enabling Services*
- Cancer Care and Infusion Therapy
- Cardiovascular Care**
- Dental Care, Oral and Maxillofacial Surgery*
- Dermatology *
- Endocrinology *
- Eye Care *
- Gastroenterology **
- HIV Medical Care *
- Kidney Care **
- Maternal Child Health*
- Neurology **
- Nutrition and Weight Management Counseling*
- Orthopedics **
- Pediatrics *
- Podiatry **
- Psychiatric Care **
- Refugee Health Services *
- Rheumatology **
- Same Day Clinic *
- Senior Health *
- Urology **
- Wound Care *

ACHCH Homeless Health Center Scope and AHS Services



In HCH Scope <small>Homeless Care at:</small>	Out of Scope
5 Ambulatory Clinics	In-Patient Care (Hospital)
Primary Care services	Emergency Departments
Same Day Clinic	John George Psychiatric Hospital
Specialty Care	Laboratory Imaging
Dental (soon)	Non-Homeless Patients
Mobile Health	Surgery
	Respite Care

Quality Improvement Efforts for Patients Experiencing Homelessness

- Clinical and quantitative reviews of data at monthly Ambulatory Quality Steering Committee Meetings and Quarterly at Alameda County Healthcare for the Homeless Quality Committee Meetings


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How does one become an HCH Patient at AHS?

Registered as HCH patient at Mobile Clinic sites

Or

Walk-in or referred to ambulatory care clinics, and screened as experiencing homelessness.



All AHS patients are supposed to be screened at registration. Living arrangement is documented in AHS Soarian Financial System which feeds back AHS annual data on the number of patients served at AHS who are experiencing homelessness.

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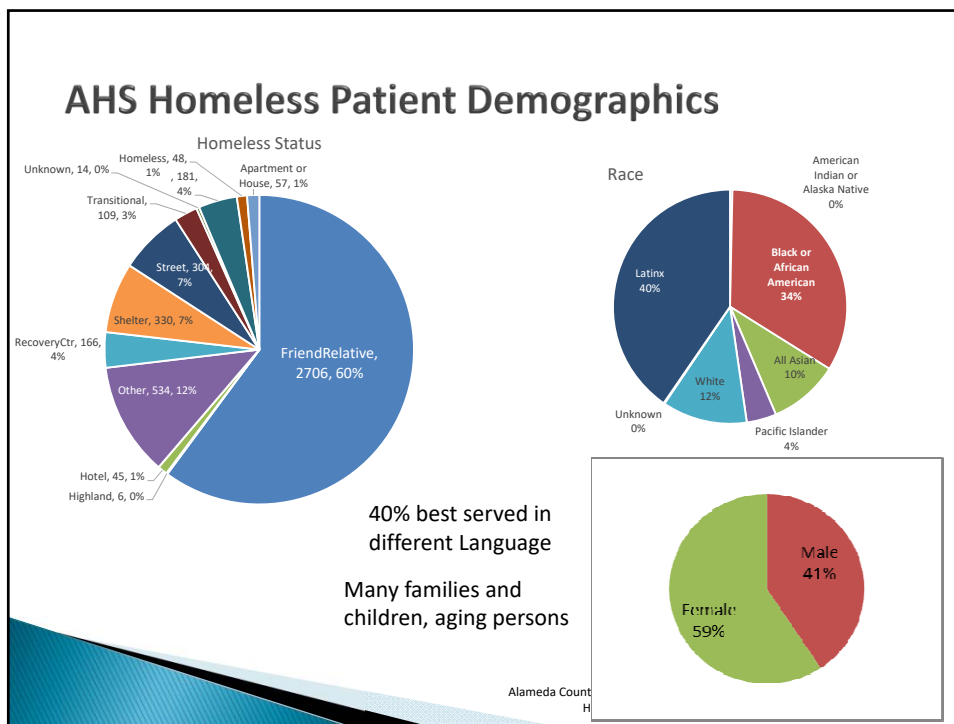
AHS Homeless Health Care Services 2017

- ▶ 21,420 visits in 2017
- ▶ 4,501 Unduplicated Patients
- ▶ 64 FTE equivalent Clinicians, support staff.
- ▶ 329 AHS clinicians touching HCH Patients
- ▶ Cost of \$10,026,479 Revenue of \$7.1M
- ▶ HCH subrecipient contract: \$611,000 in 2017
- ▶ AHS FQHC Revenue 2016: \$39M

AHS Homeless Health Care Services through Sep 2018

Highland Wellness	Eastmont Wellness	Newark Wellness	Hayward Wellness	Same Day Clinic	Mobile Health
629 patients	1,542 patients	478 patients	208 patients	349 patients	800 px
3,176 visits	7,650 visits	1,836 visits	1,020 visits	628 visits	1127 visits
4.7%	12%	7%	2.7%	NA	

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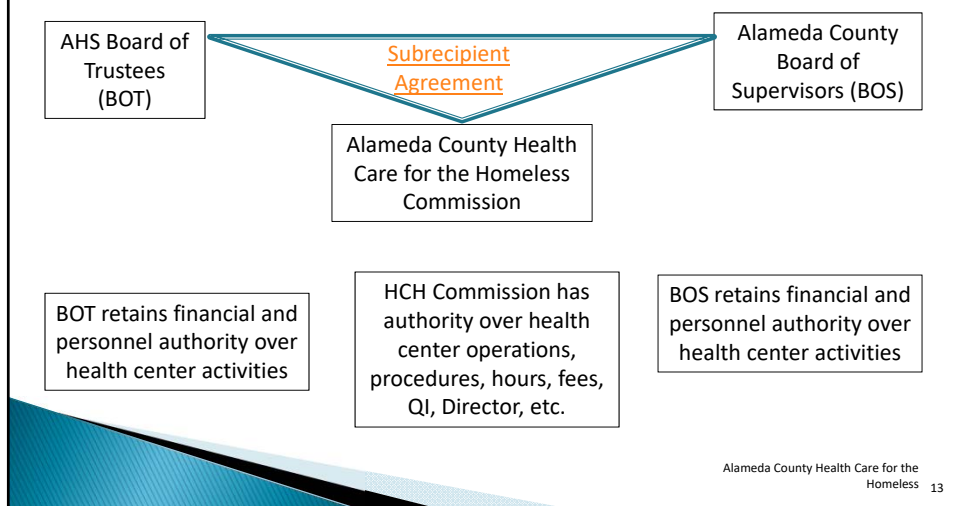


Current Issues in AHS-ACHCH Relationship:

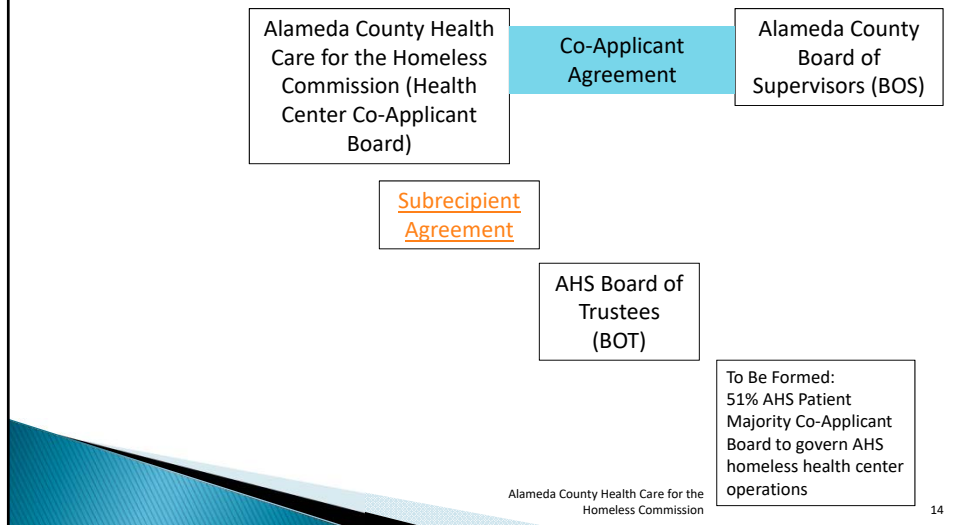
- ▶ **Homeless Coordination Office**
 - Initiated in 2015 in order to improve coordination of homeless services, reporting and health center compliance throughout AHS.
 - Currently inadequate AHS staffing hours dedicated to compliance, reporting, quality, staff training,
- ▶ **Homeless Registration & Screening**
 - not carried out effectively and consistently across AHS sites
- ▶ **Homeless Care Access Issues**
 - Hayward long waits, only 200 patients served last year.
- ▶ **Billing and Collections**
 - Homeless patients inappropriately billed
- ▶ **Quality and RBA Reporting**
 - HCH Staff working with AHS to develop appropriate RBA measures
- ▶ **Data Systems / HMIS Integration / SOGI / Homeless Status**
- ▶ **Governance and Leadership Relationships with HCSA – ACHCH – and HCH Commission**

ACHCH Health Center Governance

Beginning 9/2016 ACHCH required to follow federal public entity health center governance mandates:



Based on 10/1/2018 HRSA OSV Conditions, this appears to be new recommended ACHCH Health Center Governance structure:



Questions...?