Charity Care Report: 2020-2021

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Health Commission June 6, 2023



San Francisco Department of Public Health Office of Policy & Planning





Charity Care Overview and Background



2020-2021 Charity Care Trends



Charity Care Moving Forward

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Charity Care Ordinance and Reporting Hospitals

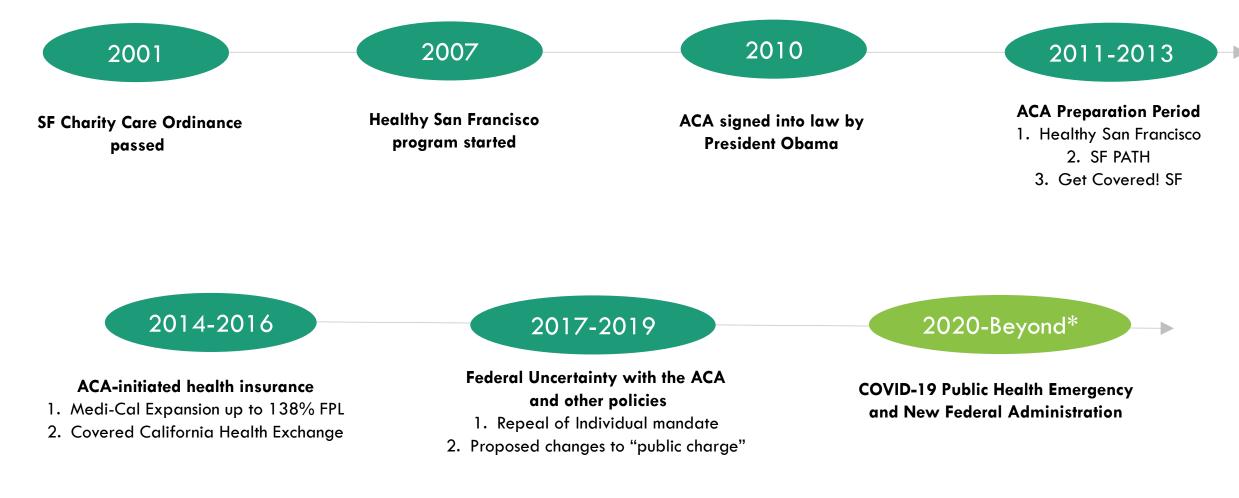
San Francisco Charity Care Ordinance 163-01 passed in 2001:

- Requires hospitals to notify patients about free and discounted services
 - Review conducted every two years of charity care posting and notifications
- Requires hospitals to annual report charity care data to DPH

"Charity Care is emergency, inpatient, and outpatient medical care, including ancillary services, provided to those who cannot afford to pay and without expectation of reimbursement"



Charity Care Landscape: Timeline



*Report Covers 2020 and 2021

Charity Care Report Overview

Goal: Understand and present trends related to charity care in San Francisco

- Showcases city-wide trends and hospital-specific data
- Tracks traditional charity care and HSF populations
- Engages representatives from the mandatory and voluntary reporting hospitals for development and review
- Report completed and presented to the Health Commission annually

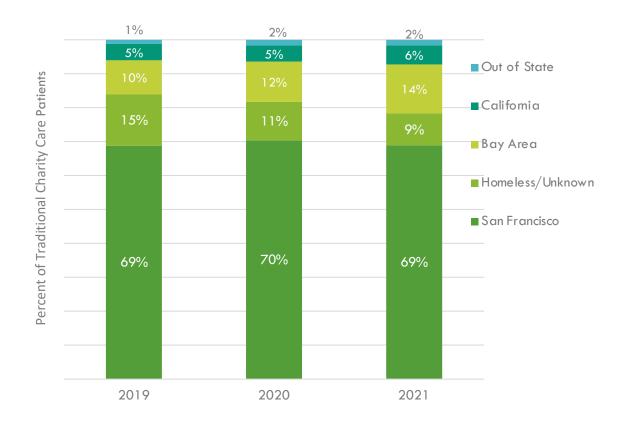
Traditional Charity Care: Care provided to under- or uninsured patients not enrolled in HSF, and may be ineligible for Medi-Cal.

Healthy San Francisco: A program created by local ordinance designed to make health care services available and affordable to uninsured San Francisco residents.

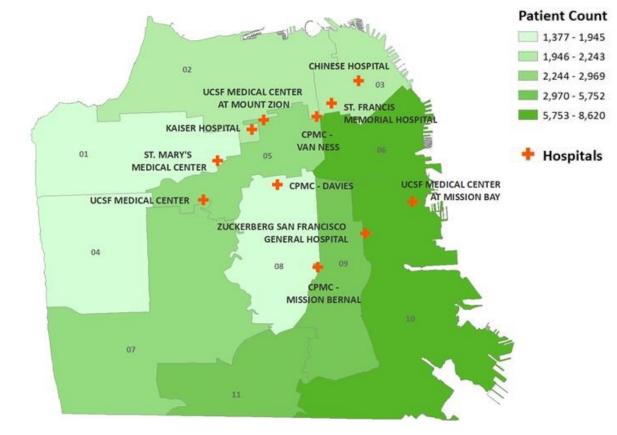
Charity Care Trends

- Traditional Charity Care serves the uninsured, those with public and commercial health coverage, and those most likely to experience health inequities – PEH, POC, and Lower SES.
- 2. Overall, Charity Care patients and expenditures increased citywide, however, many hospitals experienced decreased charity care patients during the reporting period.
- 3. Healthy San Francisco and Traditional Charity Care programs continue to serve distinct patient populations.

Traditional Charity Care serves the uninsured, those with public and commercial health coverage, and those most likely to experience health inequities – PEH, POC, and Lower SES.



Traditional Charity Care Patients Reported Residence, 2019-2021



Traditional Charity Care Patients by Supervisorial District, 2021

Traditional Charity Care continues to cover 1) majority San Franciscans concentrated in districts with lower income neighborhoods and 2) people experiencing homelessness.

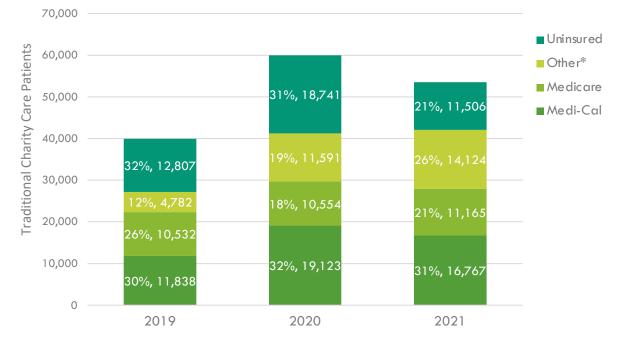
Traditional Charity Care serves the uninsured, those with public and commercial health coverage, and those most likely to experience health inequities – PEH, POC, and Lower SES.

Hispanic/Latinx Patients 00% 17% 90% White 26% Care 80% Unknown 70% of Traditional Charity Other 41% 25% 60% NH/PI 50% 2% 0% 40% 16% Decline 1% 2% 30% -0% Black / African 2% 0% 20% American 36% Asian Percent 10% 13% 1% 0% AI/AN 0% 2021 San Francisco

Traditional Charity Care Patients by Race/Ethnicity

Compared to SF Population, 2021

Traditional Charity Care Patients by Payor Source, 2019 to 2021



Traditional charity care patients are more likely to identify as Hispanic Latinx or Black/African American compared to the overall city population. * "Other" payor type includes those with commercial insurance and workers compensation. "Uninsured" indicates the number of patients who self-pay their medical expenses.

An estimated 78 percent of traditional charity care patients have some form of health coverage.

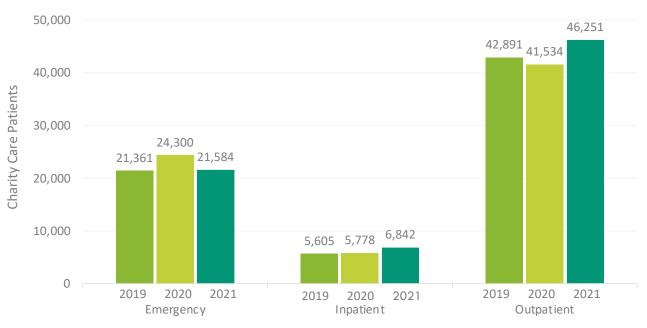
Charity Care Patients Increased Citywide from 2019 to 2021.

Unduplicated Charity Care Patients, 2017 to 2021



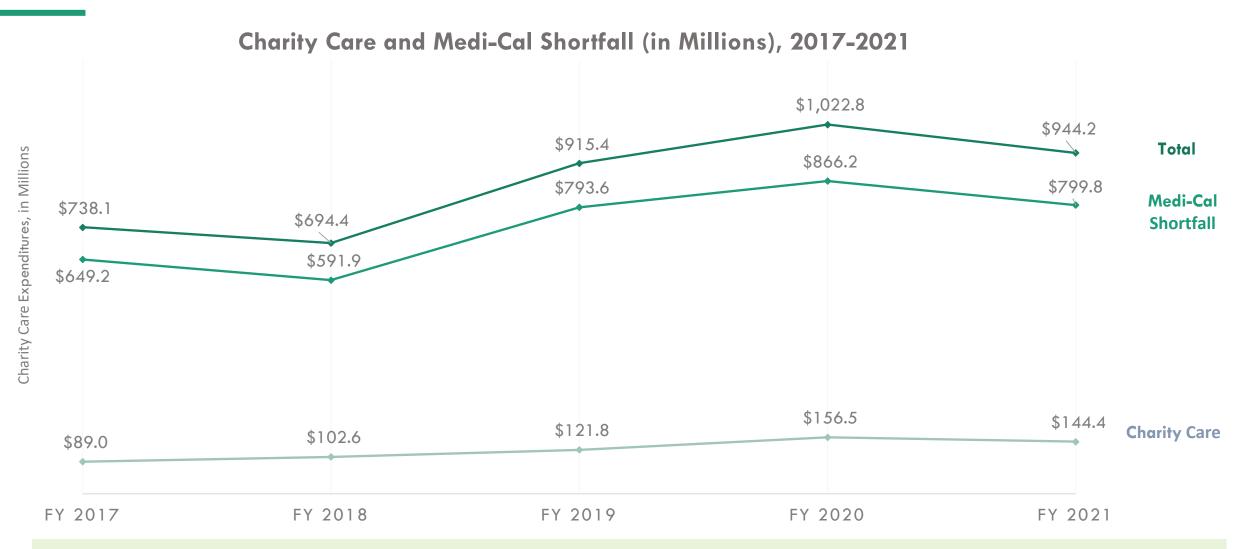
Charity Care Patients increased overall in San Francisco

Charity Care Patients by Service Type, 2019-2021



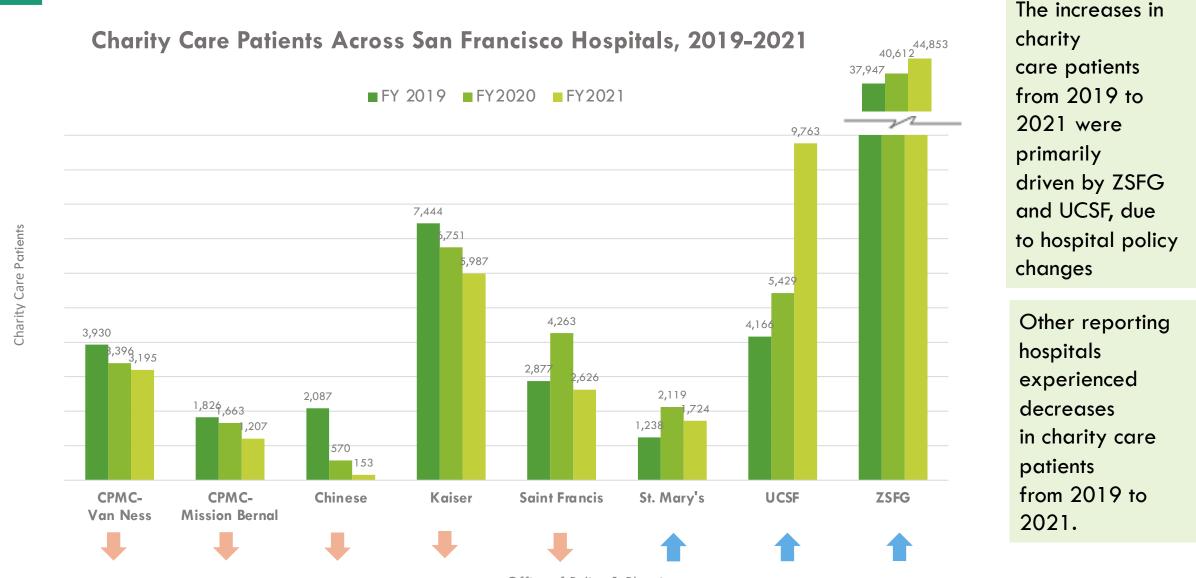
Utilization of charity care services has increased overall in San Francisco

Charity Care Expenditures Increased Citywide from 2019 to 2021.



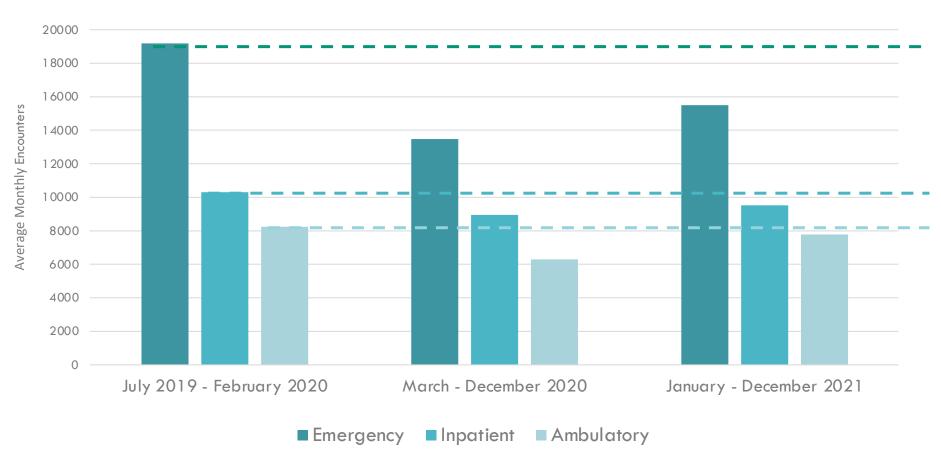
Charity care expenditures increased by 19 percent while Medi-Cal Shortfall increased by less than one percent from 2019-2021.

Five out of the Eight Reporting Hospitals Saw Decreases in Charity Care Patients from 2019 to 2021.



Office of Policy & Planning

Pandemic Resulted in Periods of Decreased Hospital Utilization for all Reporting Hospitals.



Average Monthly Encounters across Reporting Hospitals, July 2019-2021

The pandemic resulted in periods of **decreased hospital utilization** and overall services levels, including for emergency, ambulatory, and inpatient services across all reporting hospitals.

This led to decreases in charity patients across the majority of reporting hospitals.

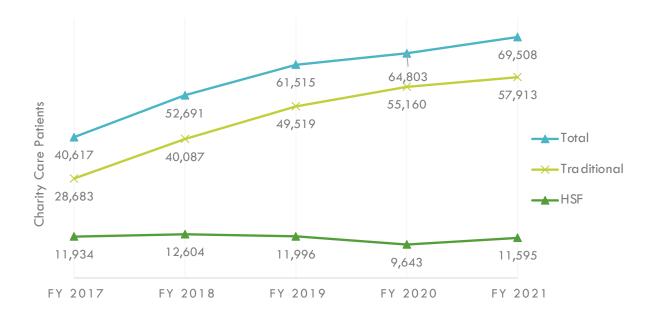
Ratio of Charity Care Costs to Net Patient Revenues

- Citywide trends in the ratio of charity care costs to net patient revenue varied among the eight reporting hospitals.
- Five out of seven reporting hospitals are above the state average.

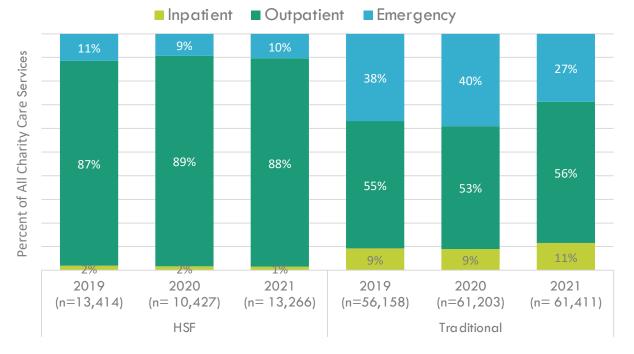
FY 2021 Charity Care as Compared to Net Patient Revenue					
Hospital	Net Patient Revenue	Cost-to- Charge Ratio	Charity Care Costs	Ratio of CC Costs to Net Pt. Revenue	State Avg. CC Costs to Net Pt. Revenue
CPMC Van Ness	\$1,186,580,139	36.94%	\$9,867,511	0.83%	
CPMC Mission Bernal	\$158,093,939	49.34%	\$3,942,203	2.49%	
Chinese	\$93,042,104	44.20%	\$197,168	0.21%	
Saint Francis	\$192,182,994	22.58%	\$6,882,350	3.58%	0.78%
St. Mary's	\$189,188,393	23.31%	\$4,180,537	2.21%	
UCSF	\$4,618,674,662	24.09%	\$14,565,612	0.32%	
ZSFG	\$727,861,536	33.10%	\$99,553,728	13.68%	

Healthy San Francisco and Traditional Charity Care Programs Continue to Serve Distinct Patient Populations.





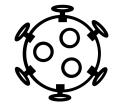
Proportion of all Services for HSF and Traditional, 2019 to 2021



Traditional charity care patients drove overall charity care increases; HSF population relatively stable

Traditional charity care patients more likely to utilize emergency services

Charity Care Moving Forward



COVID Policy Changes

and Unwinding of the

Public Health Emergency



Medi-Cal Changes

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Assembly Bill (AB) 532 and AB 1020 – Health Care Debt and Fair Billing Practices

- Medi-Cal Redeterminations
- Increases in health care utilization

 Medi-Cal expands to new populations

New notice requirements

Anticipated Impacts

Increase in Charity Care Decrease in Charity Care



Thank you!

Questions & Comments

Appendix: HSF Overview

Purpose: Healthy San Francisco was established in 2007 to make health care services available and affordable to uninsured San Francisco adults who are ineligible for Medi-Cal, and is managed by DPH's Office of Managed Care

Delivery System: HSF's services are provided through a public/private partnership that includes <u>medical homes</u>, <u>hospitals</u> as well as <u>behavioral health</u> and <u>pharmacy services</u>. In FY 20-21:

55% of participants had a medical home within the SF Health Network

33% of participants had a medical home within the SF Community Clinic Consortium.

Demographics: HSF participants have remained relatively similar over the last four years, and continues to see <u>immigration status as a driving factor in participants' ineligibility for other</u> <u>health insurance programs</u> – Latinx patients make up over 3/5 of participants.