

# MEASURE A

## Essential Health Care Services Tax Ordinance

OVERSIGHT COMMITTEE  
3RD REPORT  
TO THE ALAMEDA COUNTY  
BOARD OF SUPERVISORS  
AND THE PUBLIC

REVIEW OF EXPENDITURES IN  
Fiscal Year (FY) 2007/2008  
July 1, 2007 – June 30, 2008

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# MEASURE A OVERSIGHT COMMITTEE MEMBERS

<b>COMMITTEE MEMBER</b>	<b>REPRESENTING/NOMINATED BY</b>
Ken Ballard, Pharm D.	League of Women Voters
John Becker	City Manager's Association
Louis Chicoine	Supervisorial District 1
Bradley Cleveland	Central Labor Council of Alameda County
Kay Eisenhower	Supervisorial District 4
Jay Garfinkle, M.D.	Alameda-Contra Costa Medical Association
Arthur Geen	Alameda County Taxpayers Association
Neil Marks	Hospital Council of Northern California
Sumi Paranjape*	Supervisorial District 5
Larry Platt, M.D.	Alameda County Public Health Commission
Beth Pollard	City Manager's Association
Don Sheppard	Supervisorial District 2
Ronald Tauber	Alameda County Mental Health Board
Sal Tedesco	League of Women Voters
Mee Ling Tung	Supervisorial District 3

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\* Did not participate in the production of this report



**T**HIS IS THE THIRD report of the Measure A Oversight Committee. It reviews the expenditure of Measure A sales tax revenue for fiscal year 2007/2008 (FY 07/08). The Committee's major conclusion, highlights, and concerns are summarized below and discussed in greater detail in the body of the report.

This report is based on a number of sources:

- self-reported information provided by recipients of Measure A funds
- presentations by the Alameda County Medical Center (ACMC), Alameda County Behavioral Health Care Services (BHCS), the Alameda County Board of Supervisors (BOS), the Detoxification Center/Sobering Station, and the Alameda Health Consortium
- the County Health Care Services Agency (HCSA), which monitors the contracts with recipients of Measure A funds—including negotiating scope of work and payment schedule, developing actual contracts, preparing Board letters for approval, authorizing payments, and tracking expenditures.

Measure A, the Essential Health Care Services Initiative, was passed by 71% of Alameda County voters in March 2004. It authorized the County of Alameda to raise its sales tax by one-half cent in order to provide additional 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. These services faced sharply increasing costs with inadequate resources to meet the needs of County residents. Measure A funds substantially eased the countywide crisis in health care; however, the current economic downturn threatens some of the gains achieved.

The initiative generated \$115,852,743 in FY 07/08. ACMC received 75% of these funds, and the BOS distributed the remainder of the funds to other health care providers, including:

- initiatives funded by the Alameda County Public Health Department and BHCS
- emergency room physicians
- primary care clinics
- Children's and St. Rose Hospitals
- school-based health centers.

In addition to helping ACMC stabilize its budget and expand its health care services, Measure A has helped enable serious long-term planning to meet future health care needs for County residents. For example, the Public Health Department has used Measure A funds to examine and address health inequities within the client population and to develop a strategic plan. These initiatives will continue to bear fruit over time.

## MAJOR CONCLUSION

The Oversight Committee found that APMC and the other recipients of sales tax revenue spent the funds in compliance with the strictures of Measure A. In addition, the Committee found that in FY 07/08 Measure A enabled expansions in services and facilities, equipment purchases, and more, which reflects the original primary goal of the Measure. In prior years, Measure A funding recipients used the money primarily to fill service gaps.

## HIGHLIGHTS

Measure A revenues are critical to maintain access to medical services by indigent, uninsured, and low income residents of Alameda County, who depend on the County's health care safety net. According to state data, 18% of County residents, about 233,000 people, are uninsured, and another 20% are eligible for public health insurance programs, including Medi-Cal and Healthy Families, that target low income individuals and families.

In addition to continuing existing programs, during the year under review, the sales tax revenue allowed a number of health care providers to expand services and plan for future growth:

- Measure A funds increased access to health care services for organizations ranging from APMC to school-based health centers.
- The Capital Investment fund served geographically diverse areas offering a large range of services.
- Several recipients, such as St. Rose Hospital, used Measure A funds as leverage to draw down matching funds, both federal and foundation grants. The Capital Investment fund required any recipient of a capital grant over \$50,000 to obtain matching funds.
- The opening of the long-planned Detox/Sobering Station during this fiscal year represents a key capital achievement.
- Many organizations and departments, including the Public Health Department and the school-based health centers, used Measure A funds to increase health outreach and education efforts, with a focus on prevention.
- FY 07/08 saw a growing collaboration among the County, APMC, the Public Health Department, and community-based clinics. Measure A helped fund some of these collaborative efforts.
- Measure A gives the County flexibility to address unmet needs and unanticipated costs. Specifically, the \$1 million BOS allocation gives the Supervisors the flexibility to respond to unanticipated needs in their districts.

## CONCERNS

In developing this report, the Oversight Committee has identified several concerns regarding the state of health care funding during the years of Measure A implementation (2004-2008), including a decrease in the rate of growth in sales tax revenue, health care funding cuts, and an increase in the number of uninsured Alameda County residents. Sales tax receipts are growing at a slower rate each year or even decreasing, meaning that Measure A funding increases grow more slowly also. The Oversight Committee is concerned that continuing cuts in state and federal support for health care, combined with slower growth in Measure A sales tax revenue, will result in an increase in the health disparities across different communities that the Measure addresses.

County health care funding has undergone specific losses as well, such as the elimination of \$1 million in emergency medical services funding from the state. At the same time, unemployment has been on the rise from FY 07/08 into FY 08/09 and FY 09/10, potentially increasing the number of indigent, uninsured, and low income Alameda County residents who might seek Measure A-funded services.

Recent and proposed federal regulations and funding cuts will add to the County's health care burden. Measure A revenues help fill this gap, but as federal and state cuts continue, it will be harder for County medical services to meet the increased needs of low income, uninsured, and indigent patients.

Outside of the area of health care funding, the Committee has an ongoing concern that the composition of the Committee does not reflect the diverse make-up of the population served by Measure A.

The Committee raised concerns regarding Measure A funding specifically, including the following:

### **General Concern Regarding Allocations**

Because the Measure A allocations were based on public hearings in 2004, the Committee is concerned that the BOS might renew these allocations for another three years without considering the best use of these limited resources, given the changes that have occurred over the past six years, and the promise of health reform on the horizon.

### **Reporting and Review Concerns**

- The Committee expresses concern that the County Counsel's interpretation of the Measure A ordinance limits the Committee's ability to review program efficacy and cost-effectiveness.
- The Committee has not reviewed HCSA's process of controls and review of how the money is spent—via audit or other method. The Committee has not reviewed any of the documentation HCSA has received to monitor their control of how the Measure A money has been spent. In response to this, the Committee is trying to address its process to do a better job soliciting the information it needs.
- The Committee's review was impacted by the varying level of detail provided in the reports, as well as varying levels of responsiveness to specific questions posed by the Committee to specific recipients. This makes it difficult for the Committee to determine whether money is being spent on the Measure A target population. As one example, many fund recipients provide services to seniors—however, the Committee is aware that many seniors do not qualify as low income, uninsured, or indigent.

### **ACMC**

- Some committee members are concerned that the County requires ACMC to make significant loan and interest payments to the County, which come out of Measure A revenue. ACMC incurred much of this debt before Measure A passed in 2004. Other members believe that this creates a political more than a legal problem that might affect broader community support for the continuation of Measure A in the future. At the same time, some Committee members recognize the importance of debt repayment to the County budget.
- The Committee requested data from ACMC similar to that provided last year, which enabled the Committee to examine Measure A results by specific sites. ACMC has not yet provided these data.

### **Bay Area Consortium for Quality Health Care (BACQHC)**

The Oversight Committee is concerned that BACQHC was out of compliance with its contract with HCSA, which specifies that BACQHC must provide at least 95% of contracted visits.

### **Alameda County BHCS Community-Based Organization (CBO) Providers**

BHCS has implemented a cumbersome process and rules that have made it difficult for CBOs to access all Measure A funds. BHCS has attempted to streamline the process, but this hasn't resulted in all the money being disbursed. The Committee's concern is that service providers that have been allocated funds haven't received all of them because of these rules.

## Capital Investment Fund

- Some Committee members are concerned that there appears to be no requirement that recipients of capital funds provide services to indigent, underinsured, or low income patients for any specified period.
- In addition, the Committee is not aware of any requirements concerning the ultimate purpose of capital projects that relied on Measure A funds. For example, if a building changes hands, the Committee does not know if there is any requirement that the new building owner continue to provide services to the Measure A target population.
- The Oversight Committee is also concerned that there is no continuing Capital Investment fund, and recommends that the BOS identify Measure A funds that can be used to meet the capital needs of nonprofit health care services providers in Alameda County.

## ValleyCare

The Oversight Committee is concerned that Measure A funds paid 50% of the construction costs for an expansion that serves such a low proportion of Measure A's targeted population. Of course, over time the percentages should equalize, given no additional allocations of Measure A funds. However, ValleyCare signaled in its report to the Committee that they may be applying for Measure A funds for additional expansion in the future.

The language of Measure A includes a commitment to geographic distribution of the funds raised, and the allocation to ValleyCare helps to keep that commitment. But it is also important that Measure A funds be restricted to providing services to the target population as laid out in the ballot language.

## BOS Discretionary Allocations

The Committee acknowledges that the Supervisors responded to some of the concerns raised in last year's report, but notes the following ongoing and new concerns:

- No specified process exists to announce the availability of funding or to request a District allocation.
- As income from the sales tax decreases, the BOS fixed dollar amount of the allocation becomes a larger percentage of the whole.

## CITIZEN OVERSIGHT COMMITTEE

One of the provisions of Measure A required the establishment of a Citizen Oversight Committee. The role of the Oversight Committee is to annually review Measure A expenditures for each fiscal year and report to the BOS on the conformity of such expenditures to the purposes set forth in the Measure.

The Measure explicitly states that the Committee's charge does not include reviewing the efficiency of programs funded by Measure A.

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The full report of the Oversight Committee and all supporting documents are available online at [www.acgov.org/health/](http://www.acgov.org/health/). For more information about Measure A expenditures or the Oversight Committee, please contact Linda Truong at (510) 667-7994 or [Linda.Truong@acgov.org](mailto:Linda.Truong@acgov.org).

## FUNDING ALLOCATION AND REVIEW PROCESS

The language of Measure A allocates funds as follows:

- The Alameda County Medical Center (ACMC) receives a direct allocation of 75% of funds.
- The Alameda County Board of Supervisors (BOS) allocates the remaining 25%.

On December 14, 2004, after initial passage of the Measure, the BOS approved three-year funding allocations of its 25% share of Measure A funds in eight general categories:

- The Alameda County Public Health Department Prevention Initiative
- Emergency Room and On-Call Physician Compensation
- Alameda County Behavioral Health Care Services (BHCS) Community-Based Organization (CBO) Providers
- Alameda County Detoxification/Sober Station
- Community-Based Organization Primary Care Clinics
- Private and District Hospitals
- School-Based Health Centers
- Health Insurance Expansion and Board of Supervisors Discretionary Allocation.

When these three-year funding allocations expired in June 2007, the BOS agreed that maintaining most of the existing allocations would best sustain a level of care to the County's residents. The funding allocations in the eight categories generally remained the same and, in December 2007, the BOS approved another three-year allocation through June 2010.

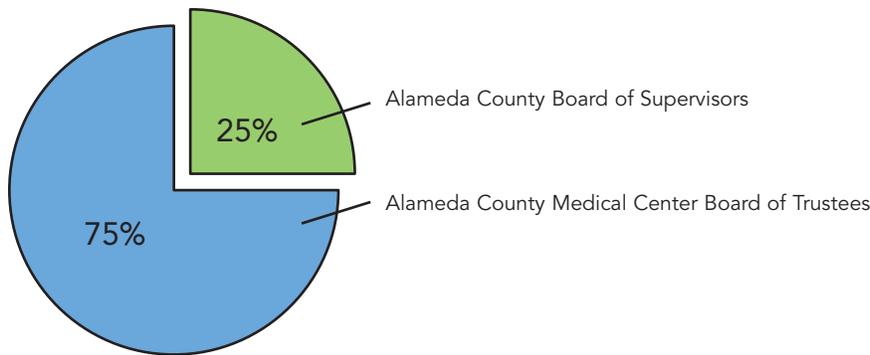
As a tool for reviewing funding allocations, the Measure A Oversight Committee developed a reporting form, containing questions on specific uses of funds received, for all Measure A fund recipients to complete. The Committee also heard presentations on selected programs including, among others, ACMC, BHCS, the BOS, the Detoxification Center/Sobering Station, and the Alameda Health Consortium. The Committee used the report forms returned by most Measure A fund recipients, along with the presentations where applicable, to review all funding allocations. The varying level of detail provided in the reports, as well as varying levels of responsiveness to specific questions posed by the Committee to specific recipients, made it difficult for the Committee to evaluate the reports consistently and thoroughly. The following sections discuss the Committee's findings in detail.



## HOW THE MONEY WAS SPENT

THE ALAMEDA COUNTY MEDICAL CENTER (ACMC) receives 75% of Measure A funds through a specific designation. The ACMC Board of Trustees allocates these funds within ACMC. The Alameda County Board of Supervisors (BOS) allocates the remaining 25% of Measure A funds. The Alameda County Health Care Services Agency (HCSA) manages these funds.

Figure 1  
DISTRIBUTION OF MEASURE A FUNDS



Measure A generated \$115,852,743 (not including interest earned) in FY 07/08. The funds were allocated as follows::

Funds Specifically Designated for ACMC (75%)	\$86,889,558
Funds Allocated by the BOS (25%)	\$28,963,185
<b>TOTAL</b>	<b>\$115,852,743</b>

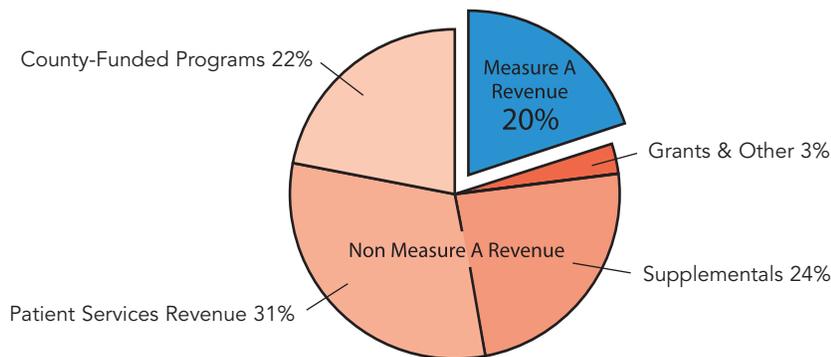
In FY 07/08, the Alameda County budget totaled \$2,262,889,978. The HCSA budget totaled \$523,121,455, or 23.12% of the total County budget. Measure A funds not specifically designated for ACMC accounted for 5.5% of the HCSA budget.

The following sections provide more detail on the allocation and expenditure of Measure A funds.

# REVIEW OF FY 07/08 EXPENDITURES: 75% OF MEASURE A FUNDS ALLOCATED TO THE ALAMEDA COUNTY MEDICAL CENTER

**FY 07/08 allocation:** \$86,889,558  
**Expended/encumbered:** \$86,889,558

Figure 2  
ALAMEDA COUNTY MEDICAL CENTER TOTAL ANNUAL REVENUE



The Alameda County Medical Center (ACMC) received a total of \$86,889,558 in Measure A revenue in FY 07/08. Measure A revenue represented approximately 20% of ACMC’s total annual revenue of approximately \$459,757,387. By comparison, ACMC received a total of \$85,777,759 in Measure A revenue in FY 06/07. Thus, Measure A funding to ACMC increased 1% between the two fiscal years.

ACMC accounts for over half of all indigent, uncompensated, and charity care provided in Alameda County. Medi-Cal and Medicare, ACMC’s most significant payors, cover slightly more than half its costs for the provision of care. Measure A revenue helps to fill this “funding gap.” As last year’s Oversight Committee report commented, ACMC continues to face the problem of sporadic, uneven state and federal reimbursements at the same time that sales tax revenues are declining, thus reducing ACMC’s ability to cope with escalating health care costs.

ACMC receives 75% of all Measure A revenue to support its network of three hospitals – Highland, Fairmont, and John George Psychiatric Pavilion—and its three satellite clinics: Eastmont Wellness, Winton Wellness, and Newark Health Center.

## HIGHLIGHTS

With the support of Measure A funds in FY 07/08, ACMC increased all of the following over FY 06/07:

- Total patient days
- Average daily census
- Inpatient and outpatient surgeries performed
- Emergency room (ER) visits
- Outpatient visits at all sites, although these were not as high as in FY 05/06.

Specifically, Measure A funds helped ACMC address health disparities across neighborhoods in the following ways:

- Establishment of a new program, the Healthy Hearts Clinic, a skill-building service. Patients with heart failure receive tools they need to prevent readmission to the hospital.
- Development of the Primary Care Health Coach Program to provide productive self-management support to patients with chronic health conditions.
- Clinic redesign in all of ACMC’s freestanding health centers, which allows more patients to be served in each clinic without reducing contact time with their physicians.
- Creation of an asthma lounge, to treat patients in distress rapidly, through the Emergency Department (ED) Rapid Evaluation Accelerated Care at Triage (REACT). This award-winning program cuts waiting times in the ED. REACT reduced average triage time from 128 minutes to 24 minutes and reduced “left without treatment” from 21.9% to 8.4%.
- Reduction in the wait time for Adult Medicine physician appointments to 25 days from baseline of 75 days.

**ACMC HIGHLIGHTS FOR FY 07/08**

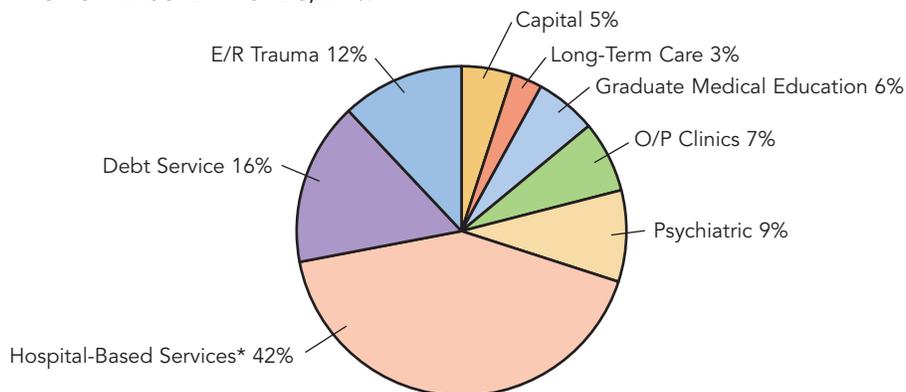
- increased total patient days, daily census, inpatient and outpatient surgeries, and outpatient visits over FY 06/07
- expanded service offerings through the newly established Healthy Hearts Clinic, Primary Care Health Coach Program, and asthma lounge
- redesigned all freestanding health centers to improve the patient experience
- reduced triage times and appointment wait times in targeted departments

**CONCERNS**

Some members of the Oversight Committee are concerned that the County requires ACMC to make significant loan and interest payments to the County, which come out of Measure A revenue. Much of this debt was incurred before Measure A passed in 2004. It is unlikely that voters foresaw this use of Measure A funds, and some committee members question its legality. Other members believe that this creates a political more than a legal problem, which might affect broader community support for the continuation of Measure A in the future. At the same time, some Committee members recognize the importance of debt repayment to the County budget.

The Committee requested data from ACMC similar to that provided last year, which enabled the Committee to examine Measure A results by specific sites. ACMC has not yet provided these data.

Figure 3  
ALLOCATION OF ACMC MEASURE A FUNDS, BY %



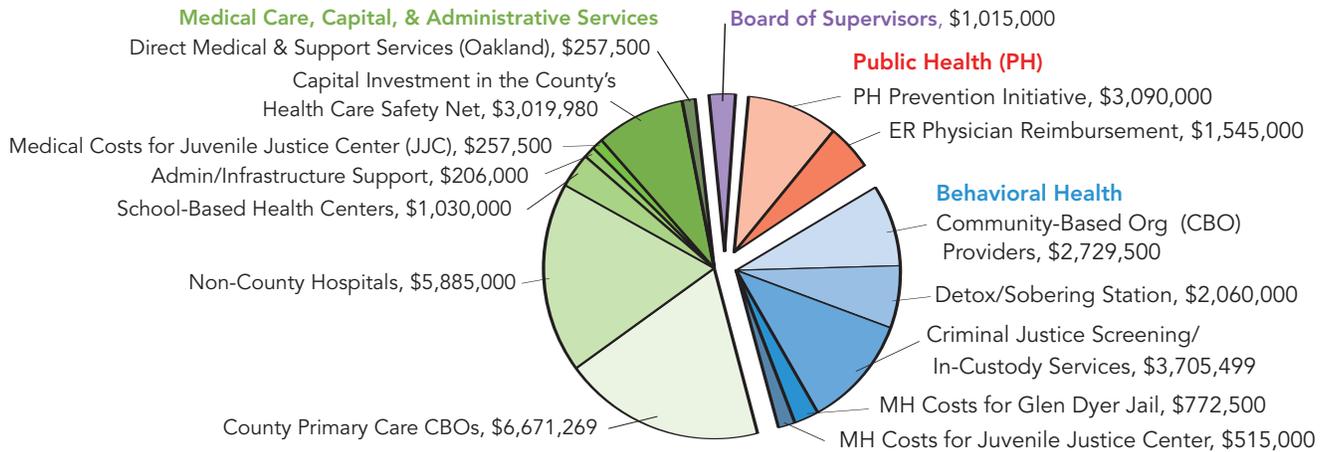
\* Hospital-Based Services includes ICU, TCU, Medical/Surgical, Preoperative, Labor and Delivery, Nursery and NICU, Oncology, Skilled Nursing, and Ancillaries (i.e., laboratory, radiology, therapies).

# REVIEW OF FY 07/08 EXPENDITURES: 25% OF MEASURE A FUNDS ALLOCATED BY THE ALAMEDA COUNTY BOARD OF SUPERVISORS

In FY 07/08, the 25% of Measure A revenue allocated by the Board of Supervisors (BOS) totaled approximately \$32.8 million. The BOS allocated these funds as follows:

Figure 4

FY 07/08 MEASURE A FUNDING ALLOCATED BY THE BOARD OF SUPERVISORS



Department	FY 07/08 Allocation	Carryover from Previous FY*	Budget Adjustments **	Total Allocation	Expended and/or Encumbered	Carryover to Next FY*	Total	Savings ***
<b>Public Health (Total: 4,635,000)</b>								
Public Health Prevention Initiative	3,000,000		90,000	3,090,000	3,084,852	0	3,084,852	5,148
ER Physician Reimbursement	1,500,000	150,000	45,000	1,695,000	1,545,000	150,000	1,695,000	0
<b>Behavioral Health (Total: 9,782,499)</b>								
CBO Providers	2,650,000		79,500	2,729,500	2,603,908	0	2,603,908	125,592
Detox/Sobering Station	2,000,000	2,695,000	60,000	4,755,000	2,249,035	2,505,965	4,755,000	0
Criminal Justice Screening/ In-Custody Services	3,597,572		107,927	3,705,499	3,705,499	0	3,705,499	0
MH Costs for Glen Dyer Jail	750,000		22,500	772,500	772,500	0	772,500	0
MH Costs for Juvenile Justice Center	500,000		15,000	515,000	515,000	0	515,000	0
<b>Medical Care, Capital, &amp; Administrative Services (Total: 17,327,249)</b>								
Primary Care CBOs	6,476,960		194,309	6,671,269	6,366,769	304,500	6,671,269	0
Non-County Hospitals*	4,500,000		1,385,000	5,885,000	5,750,000	135,000	5,885,000	0
School Based Health Centers	1,000,000	210,000	30,000	1,240,000	1,139,212	100,788	1,240,000	0
Insurance Expansion	250,000		(250,000)	0	0	0	0	0
Admin/Infrastructure Support	200,000		6,000	206,000	117,473	0	117,473	88,527
Medical Costs for JJC	250,000		7,500	257,500	130,619	126,881	257,500	0
Other Capital	0	1,100,000	0	1,100,000	1,000,000	100,000	1,100,000	0
Healthy Oakland	0	125,000	0	125,000	125,000	0	125,000	0
Capital Investment in the County's Health Care Safety Net	0		3,019,980	3,019,980	1,679,695	1,340,285	3,019,980	0
Direct Medical & Support Svc. (Oak.)	0		257,500	257,500	257,500	0	257,500	0
<b>BOS Discretionary Allocation****</b>	500,000	474,205	515,000	1,489,205	803,761	685,444	1,489,205	0
<b>TOTAL FY 07/08</b>	<b>27,174,532</b>	<b>4,754,205</b>	<b>5,585,216</b>	<b>37,513,953</b>	<b>31,845,823</b>	<b>5,448,863</b>	<b>37,294,686</b>	<b>219,267</b>

\* Carryover amounts are approved by the BOS and must be used for the same purpose for which the BOS approved the original allocation.

\*\* Budget adjustments are approved by the BOS. In FY 07/08 these adjustments included a 3% across the board COLA for all allocations, increased allocation of \$1.25M for non-county hospitals, a redirection of the Insurance Expansion allocation to direct medical and support services (Oakland), a capital RFP, and an increase to the BOS allocation of \$515,000.

\*\*\* Savings are unexpended funds that will revert to the general Measure A account for reallocation.

\*\*\*\* The BOS as a whole allocates 25% of Measure A funds. Within this 25%, each Supervisor was allocated \$203,000 for discretionary spending within within his or her district: a total of \$1,015,000

FUNDS ALLOCATED BY THE ALAMEDA COUNTY BOARD OF SUPERVISORS  
**GROUP 1: PUBLIC HEALTH**

**Alameda County Public Health Department: Prevention Initiative  
 Emergency Room and On-Call Physician Compensation**

**ALAMEDA COUNTY PUBLIC HEALTH DEPARTMENT:  
 PREVENTION INITIATIVE**

**FY 07/08 allocation:** \$3,090,000  
**Amount carried over from prior year allocations:** 0  
**Expended/encumbered in FY 07/08:** \$3,084,852  
**Amount carried over to FY 08/09:** 0  
**FY 07/08 savings transferred to reserve:** \$ 5,148

The Alameda County Public Health Department Prevention Initiative operated in conformance with Measure A provisions in FY 07/08. The dollars allocated represent about 4% of the overall Alameda County Public Health Department budget.

The Alameda County Public Health Department Prevention Initiative operates in the context of an overall vision of comprehensive health and a developing strategic plan aimed at reducing health disparities among various geographic and other communities within the Measure A target population. Measure A funds under the Public Health Department Prevention Initiative supported three main priorities, listed here with the funding for each:

“Eliminating health disparities requires long-term commitment to medical treatment as well as interventions that address BOTH internal neighborhood context (low rates of social cohesion, neighborhood disorganization, and lack of leadership) as well as external context (discriminatory political, economic, and social policies).”

— from the Alameda County Public Health Department Report

<b>Priority</b>	<b>FY 07/08 Expended</b>
Chronic Disease and Injury Prevention	\$848,310
Health Inequities and Community Capacity-Building	\$1,240,306
Obesity Prevention and School Health	\$996,236

Examples of projects funded under each of the priorities are as follows.

**CHRONIC DISEASE AND INJURY PREVENTION**

- The **Asthma Start Program** provided case management to more than 250 low income children diagnosed with asthma. This helped significantly lower the rate of Emergency Room (ER) visits, from 66% to 25%, and hospitalizations, from 53% to 23%.

- **The Diabetes Program** provided clients with diabetes self-management classes in English, Spanish, Chinese, Punjabi, Hindi, and Farsi. The program helped significantly reduce ER and hospitalization rates for these clients. It is the only program offering in-home case management for persons with diabetes.

## HEALTH INEQUITIES AND COMMUNITY CAPACITY BUILDING

- Public Health Department nurses conducted 115 immunizations by partnering with the Oakland Unified School District to sponsor the James Madison Middle School **Back to School IZ Clinic**.
- Healthy Passages implemented the **Adolescent Reproductive Health and Social Marketing Initiative**.
- **Community Assessment Planning and Evaluation (CAPE)** used Measure A funds to work with Sobrante Park and West Oakland residents to improve community environments, offer after-school activities, support mentoring, teach emergency preparedness, and provide training to youth.

## OBESITY PREVENTION AND SCHOOL HEALTH

- The City of Berkeley developed a referral system for families, teachers, and school staff to refer a child and/or family to the **Berkeley School Nurses Project**, averaging 20 consultations a month.
- Nutrition Services conducted the **Soda-Free Summer** social marketing campaign, developed **Healthy Living Councils**, performed **community mini-granting**, and supported **school wellness policy development and implementation** through active participation in Oakland’s Coordinated School Health Council and Food Policy Council.
- Nursing formed **Grannies for Sobrante**, a community group to support healthy eating and physical activity.

The Public Health Department used the following review criteria when determining which projects to fund:

- Consistency with Measure A requirements
- Capacity for leveraging funds
- Focus on addressing disparities in health status among different groups.

The department used Measure A funds to leverage an additional \$81,896 in FY 07/08, as well as significant in-kind contributions and volunteer services.

## EMERGENCY ROOM AND ON-CALL PHYSICIAN COMPENSATION

**FY 07/08 allocation:** \$1,545,000

**Amount carried over from prior year allocations:** \$150,000

**Expended/encumbered in FY 07/08:** \$1,545,000

**Amount carried over to FY 08/09:** \$150,000

**FY 07/08 savings transferred to reserve:** 0

Measure A funds paid for the cost of emergency care for almost 21,000 indigent and uninsured patients treated at emergency rooms throughout Alameda County. The law requires hospital emergency rooms to treat all patients needing urgent care, but doctors receive only partial payment—if any—for emergency services rendered to these patients.

Measure A helps to fill a funding gap created by state and federal policy. Funding for emergency care provided by physicians decreased significantly in 1983, when the California legislature transferred financial responsibility for providing care to indigent adults from the state to counties. Payments to private physicians for emergency care of these patients disappeared rapidly. In addition, the state fails to fully reimburse physicians who treat patients with Medi-Cal, the public insurance program available to some low income families.

In FY 07/08, the Alameda County Public Health Department reimbursed emergency room (ER) and on-call physicians a total of \$2,951,694 using funds generated from SB 12/612 (Maddy) legislation, the Proposition 99 Emergency Medical Services Appropriation, and Measure A. Measure A funds accounted for approximately 52% of those reimbursements—a total of \$1,545,000.

Payments were made to 19 medical groups and 23 individual physicians, and the total number of claims paid was 20,735.

FUNDS ALLOCATED BY THE ALAMEDA COUNTY BOARD OF SUPERVISORS  
GROUP 2: BEHAVIORAL HEALTH

**Alameda County Behavioral Health Care Services Community-Based Organization Providers**

**Alameda County Behavioral Health Care Services Detox/Sobering Station**

**Mental Health Costs for Juvenile Justice Center**

**Mental Health Costs for Glen Dyer Jail in Oakland**

**Criminal Justice Screening/In-Custody Services at Santa Rita Jail**

**ALAMEDA COUNTY BEHAVIORAL HEALTH CARE SERVICES COMMUNITY-BASED ORGANIZATION PROVIDERS**

**FY 07/08 allocation:** \$2,729,500

**Amount carried over from prior year allocations:** 0

**Expended/encumbered in FY 07/08:** \$2,603,908

**Amount carried over to FY 08/09:** 0

**FY 07/08 savings transferred to reserve:** \$ 125,592

In FY 07/08, community-based organizations (CBOs) received \$2,729,500 in Measure A Funds. These funds helped enable the CBOs to maintain the same level of service even as the cost of providing these services escalates annually. This is known as “Maintenance of Effort” (MOE).

Because the County’s cost of living adjustments for Behavioral Health Care Services (BHCS) do not keep pace with increases in business and facility costs, employee salaries do not keep up with inflation. Loss of Measure A funding would result in a decrease in the number of services provided and the number of clients seen.

BHCS manages the contracts with CBO providers. For FY 07/08, BHCS objectives included:

- provide appropriate behavioral health care services
- minimize hospitalizations
- reduce the incidence of drug abuse problems
- provide individualization of treatment to product better outcomes.

BHCS used these objectives as criteria to allocate funding to over 80 nonprofit and for-profit CBO service providers throughout Alameda County.

Challenges in the BHCS allocation process resulted in the inability of some CBOs to access all of the Measure A funds. The BHCS agreement with the providers includes the “last dollar” standard, which states that providers must spend all other revenue before using Measure A revenue. BHCS has since implemented a mitigating policy that allows CBOs to expand the categories they may use for Measure A reimbursement to include costs outside of service delivery—for example, capital improvement and non-Medi-Cal allowable costs.

## HIGHLIGHTS

Measure A funding helped CBO providers restore 60,000 units of service to 2,000 clients. The funding also helped CBOs offset a 7% increase in costs from FY 06/07 to FY 07/08.

## CONCERNS

BHCS has implemented a cumbersome process and rules that have made it difficult for CBOs to access all Measure A funds. There is an attempt to streamline this process, but it hasn't resulted in all the money being disbursed. The Committee's concern is that service providers that have been allocated funds haven't received all of them because of these rules.

## ALAMEDA COUNTY BEHAVIORAL HEALTH CARE SERVICES DETOX/SOBERING STATION

**FY 07/08 allocation:** \$2,060,000

**Amount carried over from prior year allocations:** \$2,695,000

**Expended/encumbered in FY 07/08:** \$2,249,035

**Amount carried over to FY 08/09:** \$2,505,965

**FY 07/08 savings transferred to reserve:** 0

In January 2008, Alameda County completed construction of a new Detox/Sobering Station at the County's Fairmont Hospital Campus on the San Leandro/Castro Valley border. The Measure A Oversight Committee reviewed the history of planning and constructing the Detox/Sobering station in its FY 05/06-FY 06/07 report. Further information on the project development is contained in the "Building Acceptance and Recovery" brochure prepared by Alameda County.

The impetus for the project includes the following:

- An increasing countywide population of low income and indigent residents
- A high incidence of alcohol and drug/substance overuse among this population, often resulting in debilitating health effects
- Frequently co-occurring mental disorders
- The increase in cost over the years of treating this population.

In February 2008, the Alameda County Health Care Services Agency (HCSA) began offering services at the new Detox/Sobering Station through the Behavioral Health Care Services (BHCS). The facilities and services provided there are:

- Cherry Hill, a 24/7, 32-bed monitored residential detoxification center for persons withdrawing from the effects of overuse, with average stays of three to five days. The facility offers comprehensive intervention services including 12-step and similar support groups, accommodations for non-English speakers, HIV and Hepatitis C testing and education, assessment, post-detoxification planning, placement, referral, and transportation to treatment interviews.
- Safe House, a 24/7, 50-person capacity sobering center where adults may stay an average of four to six hours to "sleep it off." A hospital, law enforcement, or other approved source must directly refer residents to the center. Discharge services may include referrals to alcohol and drug treatment providers and mental health services.

- The Transport Van Program, which includes several vans, staffed with an EMT and an Outreach Worker, who transport individuals throughout the County to and from the Safe House.

The Detox/Sobering Station receives 100% of its funding from Measure A. During the first four months of operations, utilization steadily increased at both facilities, with the Detox Center being at capacity within two months. Over this four-month period, the center received referrals from 10 hospitals and six law enforcement agencies.

**HIGHLIGHTS**

- The opening of this long-awaited center, which faced difficulty in finding an acceptable location to the community, fills a noticeable void in the greater system of care.
- Measure A was completely responsible for bringing the center to fruition.
- The center has the potential to be a cost-effective alternative to traditional services of institutional care, ambulance and police transports, hospital admittance or care, and booking/incarceration into County jails.

**MENTAL HEALTH COSTS FOR JUVENILE JUSTICE CENTER**

**FY 07/08 allocation:** \$515,000  
**Amount carried over from prior year allocations:** 0  
**Expended/encumbered in FY 07/08:** \$515,000  
**Amount carried over to FY 08/09:** 0  
**FY 07/08 savings transferred to reserve:** 0

During the design process for the new Juvenile Justice Center (JJC), planners identified a shortfall. The Board of Supervisors (BOS) approved the use of Measure A funds in the amount of \$500,000 to cover this shortfall. Measure A funds prevented staff cuts that would have decreased the quality of care currently received at JJC. This prevented a loss of approximately 15%, or 3,800 hours, of services provided.

**HIGHLIGHTS**

Planners used Measure A funding in the redesign of services at the new JJC Guidance Center for increased staffing, to place treatment staff in each housing unit.

**MENTAL HEALTH COSTS FOR GLEN DYER JAIL IN OAKLAND**

**FY 07/08 allocation:** \$772,000  
**Amount carried over from prior year allocations:** 0  
**Expended/encumbered in FY 07/08:** \$772,000  
**Amount carried over to FY 08/09:** 0  
**FY 07/08 savings transferred to reserve:** 0

In FY 07/08, Behavioral Health Care Services (BHCS) received \$750,000 in Measure A funds to cover additional costs that arose from the closure of the Oakland City jail, which caused expanded use of the

County's Glen Dyer jail. BHCS used the Measure A funds to hire additional staff to serve the increased number of inmates with mental health needs. The funds also enabled improved care for adults and youth in the justice system by providing timely access to medications and reducing potential medication abuse in the jail setting. Mental health care services in the criminal justice settings increased by approximately 12%, or approximately 1,200 hours of direct services.

## **CRIMINAL JUSTICE SCREENING/IN-CUSTODY SERVICES AT SANTA RITA JAIL**

**FY 07/08 allocation:** \$3,705,499

**Amount carried over from prior year allocations:** 0

**Expended/encumbered in FY 07/08:** \$3,705,499

**Amount carried over to FY 08/09:** 0

**FY 07/08 savings transferred to reserve:** 0

During the FY 07/08, the Health Care Services Agency (HCSA) received \$3,705,499 in Measure A funds as part of a budget deficit reduction plan. Rather than spreading the Measure A funds throughout the HCSA budget, the Board of Supervisors (BOS) allocated these funds to the Criminal Justice Screening Program. In turn, HCSA disbursed general funds dollars that previously were in the Criminal Justice Screening budget throughout the HSCA budget. Allocating the Measure A funding to one program allowed the agency to simplify the accounting of the Measure A funds. HCSA used the funds to improve care for adults in the justice system, by providing timely access to medications and reducing potential medication abuse at Santa Rita. In FY 07/08, the program provided 9,887 services to 3,806 clients.

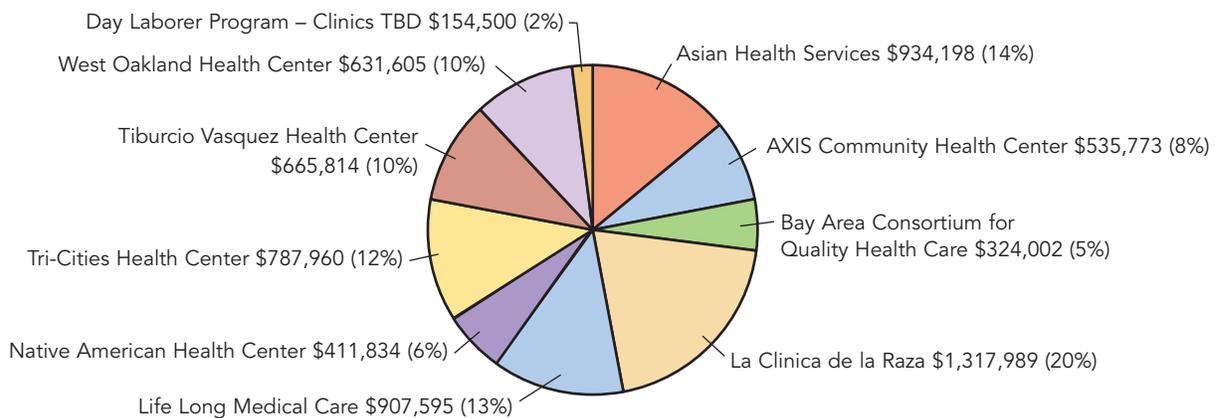
FUNDS ALLOCATED BY THE ALAMEDA COUNTY BOARD OF SUPERVISORS  
**GROUP 3: MEDICAL CARE, CAPITAL, and ADMINISTRATIVE SERVICES**

- Primary Care Community-Based Organizations**
- Non-County Hospitals**
- School-Based Health Centers**
- Medical Costs for Juvenile Justice Center**
- Capital Investment in the County’s Health Care Safety Net**
- Other Capital**
- Administration/Infrastructure Support**
- Healthy Communities, Inc. (dba Healthy Oakland)**
- Direct Medical and Support Services (Oakland)**

**PRIMARY CARE COMMUNITY-BASED ORGANIZATIONS**

**FY 07/08 allocation:** \$6,671,269  
**Amount carried over from prior year allocations:** 0  
**Expended/encumbered in FY 07/08:** \$6,366,769  
**Amount carried over to FY 08/09:** \$304,500  
**FY 07/08 savings transferred to reserve:** 0

Figure 5  
 ALLOCATIONS PER INDIVIDUAL CBO/CLINIC, FY 07/08



**ALAMEDA HEALTH CONSORTIUM CLINICS**

The Alameda Health Consortium and its member clinics—eight nonprofit corporations operating 23 community clinics throughout Alameda County—provide primary and dental care, mental health, and health education services to 150,000 County residents.

Since the passage of Measure A in 2004, total County funding for its clinics has grown almost 50%, from about \$12 million to \$18 million in FY 08. This funding has allowed Asian Health Services, Axis Community Health, La Clinica de la Raza, Life Long Medical Care, Native American Health Center, Tiburcio Vasquez Health Center, Tri-City Health Center, and West Oakland Health Center to improve health outcomes for low income patients by augmenting their services, investing in clinic expansion, and working with the Alameda County Medical Center (ACMC) and the County Public Health Department to coordinate care to those living with chronic diseases.

The consortium member clinics provided nearly 700,000 patient visits, and worked to enroll patients into appropriate public insurance plans: Medi-Cal, Healthy Families, and Medicare. Ninety percent of consortium patients are low income, 41% qualify for Medi-Cal, and another 42% are uninsured.

Even with the Measure A funding, the consortium clinics are unable to meet the needs of the growing number of uninsured. To address their financial constraints, clinics are focusing on improved health outcomes by expanding primary and preventive care in order to reduce expensive hospitalization, and by coordinating care for patients with diabetes, asthma, and depression.

## **HIGHLIGHTS**

### **County Collaboration Improves Care**

The Alameda Health Consortium collaborates with ACMC and the County Public Health Department to implement best practices in the management of three chronic diseases: diabetes, asthma, and depression. Clinicians from consortium clinics, ACMC, and the Public Health Department meet monthly to coordinate care, which has reduced unnecessary hospitalizations, lowered the cost of care, and exceeded national benchmarks that measure quality outcomes.

### **Alameda County Excellence**

Consortium clinics are participating in the second year of a three-year chronic disease management program, funded with supplemental federal payments. The consortium has received \$3 million in new revenue through the Alameda County Excellence (ACE) program, which has allowed its member clinics to install a new computer system to better monitor care, and to provide an additional 17,500 visits in 2008 to patients with asthma and diabetes.

### **Consortium Exceeds Expectations**

Member clinics have exceeded the goals established in the consortium's County contracts. The clinics provided almost 82,000 clinic visits to medically indigent patients, 11.5% more than required under its County Medical Services Program contract. The clinics have provided 7,600 more clinic visits than specified in the ACE contract, 75% over the target.

County investment in the community clinics has paid off. For every \$1 the County provides to consortium clinics, other revenue sources have provided \$10 to the clinics.

### **Measure A Capital Grants**

Axis Community Health in the Pleasanton-Livermore area received two capital grants, funded with Measure A revenue. Axis used the supplemental Measure A grants to open a clinic site dedicated to mental health services, and to help fund the expansion of its women's health clinic.

## BAY AREA CONSORTIUM FOR QUALITY HEALTH CARE (BACQHC)

The Bay Area Consortium for Quality Health Care (BACQHC) received \$324,000 in Measure A funds to expand the availability of services at the Berkeley Health Center for Women and Men. BACQHC agreed to provide an additional 3,040 clinic visits with the Measure A funds. As in previous years, BACQHC failed to meet its target, providing only an additional 2,690 visits, or 85% of the contracted visits.

### CONCERNS

The Oversight Committee is concerned that BACQHC was out of compliance with its contract with the Health Care Services Agency (HCSA), which specifies that BACQHC must provide at least 95% of contracted visits.

## NON-COUNTY HOSPITALS

**FY 07/08 allocation:** \$5,885,000

**Amount carried over from prior year allocations:** 0

**Expended/encumbered in FY 07/08:** \$5,750,000

**Amount carried over to FY 08/09:** \$135,000

**FY 07/08 savings transferred to reserve:** 0

### NOTES:

*A one-time budget adjustment in FY 07/08 resulted in a higher total allocation for St. Rose relative to Children's Hospital.*

*A third non-county hospital, ValleyCare, received Measure A funding for a capital project. See "Other Capital" for information.*

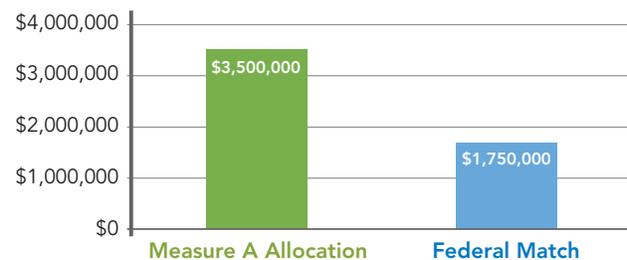
## ST. ROSE HOSPITAL

St. Rose Hospital is a 175-bed nonprofit hospital serving a disproportionately large number of Medi-Cal and uninsured recipients. In FY 07/08, St. Rose saw 14,000 visits to its pediatric clinics from Alameda County residents.

Key accomplishments using Measure A funds include acquiring seismic retrofit plans approved by the State and implementing a diagnostic radiology picture archiving system. Measure A funds continued to be applied almost exclusively to "maintenance of effort"—maintaining service levels even as costs escalate—and St. Rose was able to leverage Measure A funds to obtain matching federal monies.

Continuation of Measure A funds annually is critical to the operation of St. Rose Hospital.

Figure 6  
ST. ROSE HOSPITAL USE OF MEASURE A FUNDING  
TO OBTAIN FEDERAL MATCHING FUNDS



## CHILDREN’S HOSPITAL AND RESEARCH CENTER

Children’s Hospital and Research Center in Oakland received \$2,250,000 in Measure A revenue in FY 07/08. The federal government provided an additional \$1,125,000 in matching funds, thus increasing the impact of the tax revenue. While Children’s Hospital serves as a regional pediatric center, Alameda County residents received 66.8% of the total outpatient services and 51.2% of the hospital’s inpatient care.

Children’s Hospital allocated the Measure A and federal matching dollars among five outpatient services. The hospital based this allocation on subsidizing primary outpatient programs for Alameda County residents with high Medi-Cal and California Children’s Services (CCS) usage. These programs appear to be consistent with the intent of Measure A. Each of these programs operates at a loss. The programs include:

- the hospital-based adolescent medicine and school-based health clinics
- the emergency department
- the Center for Child Protection
- the hematology/oncology program
- the audiology service.

As a result of the Measure A funding, the hospital continues to serve youth in its adolescent clinics with a wide range of services for the treatment of asthma, obesity, mental health, reproductive health care, sports examinations, acute and chronic medical care issues, and child abuse. The funding also allows the hospital to continue to offer emergency services to a wide spectrum of patients as well as providing education, screening, counseling, and advocacy services to battered caregivers and to children exposed to domestic violence. The hospital continues to provide surgical implants to address hearing loss in children.

Figure 7  
CHILDREN’S HOSPITAL USE OF MEASURE A FUNDING TO OBTAIN FEDERAL MATCHING FUNDS



## SCHOOL-BASED HEALTH CENTERS

**FY 07/08 allocation:** \$1,030,000

**Amount carried over from prior year allocations:** \$210,000

**Expended/encumbered in FY 07/08:** \$1,139,212

**Amount carried over to FY 08/09:** \$100,788

**FY 07/08 savings transferred to reserve:** 0

Alameda County’s School Health Services continues to expand its programs as it implements the second year of its three-year strategic plan. The plan seeks to expand its program of “comprehensive, holistic adolescent health services” and ensure long-term sustainability by diversifying its funding base.

Measure A revenues provide nearly half of the programs’ annual funding, \$1.1 million of the School Health Services’ \$2.9 million budget. The program spent 75% of the Measure A funds on medical, mental health,

health education, and family planning services at its 12 school-based clinics. The remaining revenue funded program evaluation and support, as well as planning for new clinics in Fremont and the Pleasanton-Livermore Tri-Valley area.

The program used Measure A revenue to help secure \$7 million in matching funds from participating school districts; local, state, and federal agencies; and foundations and nonprofit agencies, along with health insurance payments.

**HIGHLIGHTS**

**School Health Services Opens Its 12th Clinic**

The program contracted with East Bay Asian Youth Center (EBAYC) to open the Shop55 Wellness at Oakland High School, for a total of 12 school-based clinics. EBAYC received grants from the Oakland Unified School District and the Measure A capital fund to renovate the clinic space and purchase needed equipment.

In FY 07/08, its first year of operation, Shop55 Wellness provided medical, mental health, health education, and family planning services to 300 adolescents, or 16% of the student body.

**New Computer System Links 12 Sites**

School Health Services installed a new computer system to collect and analyze data from its 12 school-based sites. The program connected eight of its 12 sites to the system during its first year of operation. The transition to the new system resulted in incomplete clinic data for FY 07/08.

According to this incomplete data, the 12 sites provided 24,000 clinic visits—two-thirds of which were for medical and health education and family planning, and one-third of which were for mental health services.

**Students and Non-Students Receive Needed Care**

Youth UpRising opened its two Oakland sites—the Chappell Hayes Health Clinic at McClymonds and the Castlemont Health Center—to adolescents not enrolled at the schools. This move allows the clinics to reach youth who might not otherwise have access to needed medical and mental health services.

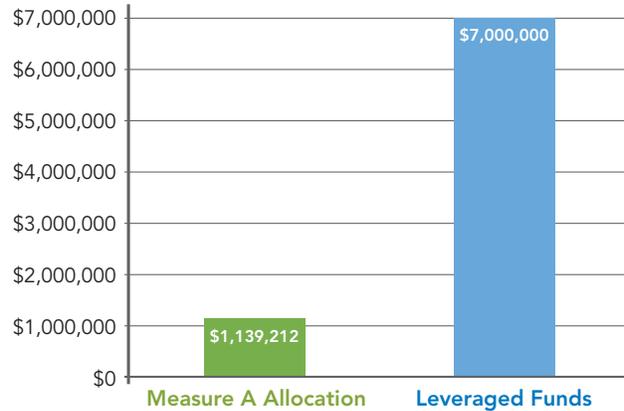
**Youth Action Institute Launches**

School Health Services established the Youth Action Institute in the spring of 2008, to engage youth in the assessment and design of its health and wellness services. The Institute trained 30 student researchers who interviewed over 1,500 fellow students on needs and effectiveness of services. The Institute released its report in January 2009.

**Tiburcio Vasquez Expands Services at San Lorenzo Schools**

Tiburcio Vasquez expanded mental health services at its two San Lorenzo School sites, Edendale and Bohannon, with a \$35,000 Measure A grant. The school clinics used the funds to offer over 1,400 hours of

Figure 8  
ALAMEDA COUNTY SCHOOL HEALTH SERVICES (SHS)  
USE OF MEASURE A FUNDING TO OBTAIN  
LEVERAGED FUNDS, FY 07/08

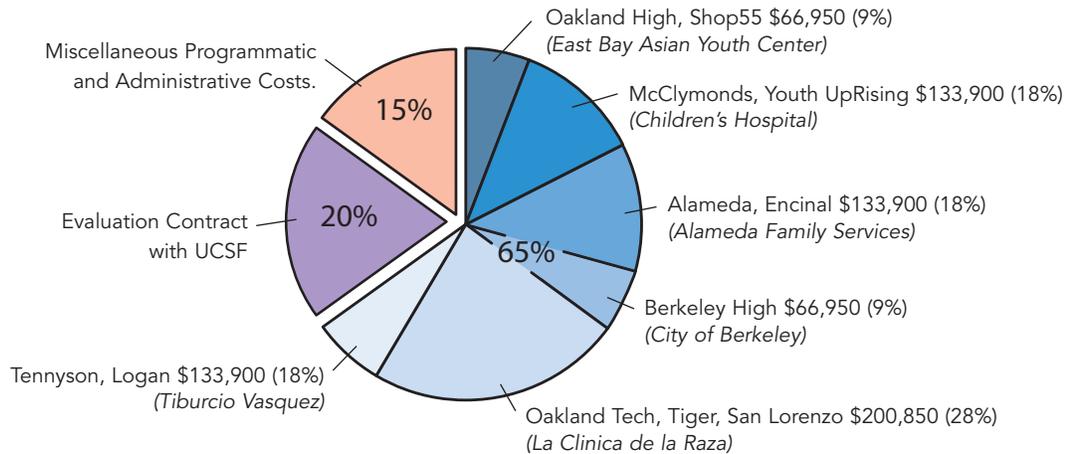


therapy and counseling to students who were not eligible for Medi-Cal-funded services. The grant also allowed Tiburcio Vasquez to draw down additional federal matching funds.

Figure 9

DISTRIBUTION OF MEASURE A FUNDS ALLOCATED TO SCHOOL-BASED HEALTH CENTERS

(Providers are italicized and listed below the clinics in parentheses)



## MEDICAL COSTS FOR JUVENILE JUSTICE CENTER

**FY 07/08 allocation:** \$257,500

**Amount carried over from prior year allocations:** 0

**Expended/encumbered in FY 07/08:** \$130,619

**Amount carried over to FY 08/09:** \$126,881

**FY 07/08 savings transferred to reserve:** 0

The Board of Supervisors (BOS) allocated \$772,500 in FY 07/08 to provide medical and mental health services to youth residing at the Juvenile Justice Center (JJC). This included \$257,500 under Administration/Indigent Health to provide medical services and \$515,000 under Alameda County Behavioral Health Care Services (BHCS) to provide mental health services (discussed in “Mental Health Costs for Juvenile Justice Center”).

Of the \$257,500 allocation under Administration/Indigent Health, JJC used \$80,619 for the provision of billing services to the Victims of Crime (VOC) unit. JJC leveraged this \$80,619 investment to generate an additional \$200,000 in funding.

The \$257,500 included an allocation of \$50,000 to the Mind Body Awareness (MBA) Project, Inc., a non-profit organization dedicated to the health and well-being of incarcerated and at-risk youth. MBA works with youth both during and after incarceration, preparing them for successful re-entry into their families and communities. MBA conducted 191 classes serving 495 separate youths. The youths gave the program the average overall rating of 8.3 out of 10. They found the class taught them to relax, calm down, and control themselves, and that its benefits lasted beyond the class time. The youth learned meditation techniques, which positively impacted their sleep. They were very interested in having more class time.

JJC will carry over the remaining \$126,88 and use it to reimburse Children’s Hospital and Research Center of Oakland (CHRCO), the provider of medical services at JJC, for cost overruns incurred in FY 07/08 due to the provision of increased lab panels and increased pharmacy costs. CHRCO’s clinical program at JJC has received rave results from all collaborating agencies, most notably the Probation Department.

## CAPITAL INVESTMENT IN THE COUNTY’S HEALTH CARE SAFETY NET

**FY 07/08 allocation:** \$3,019,980

**Amount carried over from prior year allocations:** 0

**Expended/encumbered in FY 07/08:** \$1,679,695

**Amount carried over to FY 08/09:** \$1,340,285

**FY 07/08 savings transferred to reserve:** 0

The Alameda County Board of Supervisors (BOS) allocated \$3 million of Measure A revenue for a Capital Investment fund. The Supervisors directed the County Health Care Services Agency (HCSA) to develop and release the “Request for Proposals”; review the capital investment proposals submitted by community-based, nonprofit health care agencies; and submit recommendations for funding to the BOS for consideration.

During the Measure A Community Hearings, conducted in 2004 following the passage of the ballot initiative, many nonprofit agencies urged the BOS to use a portion of the Measure A revenue for capital investments. Health clinics find it difficult to expand their services and invest in needed medical equipment because money is tight and there are few sources of funding for critical investments in facilities and equipment.

In response to the need for a Capital Investment fund, the BOS allocated \$3 million in unspent Measure A revenue to invest in new buildings and clinic expansion, computer equipment and medical equipment, transportation vans, and facility renovations.

HCSA established the eligibility guidelines for the capital fund. Eligibility for funding was limited to non-profit agencies providing:

- A AIDS/HIV services
- SA Substance abuse programs
- MH Mental health services
- P Primary care
- O Other health providers.

HCSA set two additional requirements:

- Organizations requesting \$50,000 or more must secure matching fund.
- Recipients must adhere to the requirements of the County’s Small, Local, and Emerging Businesses Program. (Go to [www.agov.org](http://www.agov.org) to learn more about the program requirements).

HCSA received 67 proposals, requesting over \$7.5 million, demonstrating the significant need for capital investments in the County’s health care safety net. The review panel, convened by the agency, recommended funding for 38 of these proposals.

<b>Agency</b>	<b>Award Amount</b>	<b>Purpose</b>	<b>Location</b>
AIDS Project of the East Bay <b>A</b>	\$125,000	elevator, renovation, MIS	Oakland
Alameda Family Services <b>MH</b>	\$25,000	HVAC	Oakland
Asian Health Services <b>C</b>	\$135,000	equipment	Oakland
Asian Pacific Psychological Services <b>MH</b>	\$41,000	MIS, renovation	Oakland
Axis Community Health <b>C</b>	\$135,000	clinic expansion	Pleasanton
Axis Community Health <b>MH</b>	\$108,570	telephone system, practice management, system, tenant improvements, furnishings	Pleasanton
Berkeley Youth Alternatives <b>C</b>	\$26,525	MIS, security gates	Berkeley
Brighter Beginnings <b>C</b>	\$44,392	case management database	Oakland
C. U. R. A., Inc. <b>SA</b>	\$68,218	water and electrical systems renovation	Fremont
Center for Elders' Independence <b>C</b>	\$90,375	dental equipment	Oakland
Crisis Support Services of Alameda County <b>MH</b>	\$25,517	MIS	Oakland
Davis Street Family Resource Center <b>MH</b>	\$32,500	MIS	San Leandro
Davis Street Family Resource Center <b>C</b>	\$100,000	acquisition of property	San Leandro
East Bay Community Recovery Project <b>SA</b>	\$149,750	acquisition of property	Oakland
East Oakland Community Project <b>C</b>	\$137,500	equipment and furniture	Oakland
Emergency Shelter Program <b>C</b>	\$55,000	renovation and expansion	Hayward
Family Paths Inc. <b>MH</b>	\$45,384	roof	Oakland
Fred Finch Youth Center <b>MH</b>	\$75,000	MIS, acquisition of property	Oakland
Girls Inc. <b>C</b>	\$52,000	MIS, equipment purchase, renovation	San Leandro
Health & Human Resource Education Center <b>MH</b>	\$25,041	equipment	Berkeley
HIV Education and Prevention Project of Alameda County <b>A</b>	\$80,000	expansion	Oakland
Horizon Services Inc. <b>SA</b>	\$60,000	renovation	Hayward
Humanistic Alternatives to Addiction Research & Treatment <b>SA</b>	\$50,000	renovation	Oakland
La Clinica de la Raza Inc. <b>C</b>	\$144,082	dental equipment	Oakland
Lifelong Medical Center <b>C</b>	\$135,000	expansion, renovation, IT	Berkeley
Lincoln Child Center <b>MH</b>	\$80,000	appliances	Oakland
Magnolia Women's Recovery Program <b>SA</b>	\$100,000	acquisition of property	Hayward
Native American Health Center <b>C</b>	\$135,000	construction	Oakland
Options Recovery Services <b>SA</b>	\$74,618	plumbing and electrical	Berkeley
Shuman-Liles Clinic, Inc. <b>MH</b>	\$30,000	MIS	Fremont/ Oakland
St. Mary's Center <b>MH</b>	\$135,000	land acquisition	Oakland

Continued on next page.

Agency	Award Amount	Purpose	Location
The Solid Foundation <b>SA</b>	\$50,000	renovation, equipment	Oakland
Through the Looking Glass <b>C</b>	\$43,682	MIS	Berkeley
Tiburcio Vasquez Health Center, Inc. <b>C</b>	\$77,055	renovation	Hayward/ Union City
Tiburcio Vasquez Health Center, Inc. <b>C</b>	\$48,720	furniture and equipment	Hayward/ Union City
Tri-City Health Center <b>C</b>	\$75,000	renovation	Fremont
West Oakland Health Council <b>C</b>	\$100,000	MIS	Oakland
Women on the Way Recovery Center <b>SA</b>	\$100,000	acquisition of property	Hayward
<b>TOTAL</b>	<b>\$3,014,929</b>		

Specific examples of the purposes listed above include the following:

- **Acquisition:** purchase of land or a facility
- **Equipment purchase:** generally, purchase of large pieces of equipment such as dental chairs, exam tables, or X-ray machines
- **Renovation:** renovation of an existing facility or a portion of a facility, for example exam rooms, a kitchen, or a roof
- **MIS:** purchase and installation of various Management Information Systems equipment, such as computers, servers, consultant time, or new billing systems.

## HIGHLIGHTS

The Measure A Capital Investment fund helped 38 nonprofit agencies modernize their equipment and computer technology, expand and renovate facilities, repair broken elevators, and fix leaky plumbing. This investment is critical to improve clinic operations and ensure quality patient care.

## CONCERNS

The Committee is concerned that there appears to be no requirement that recipients of capital funds provide services to indigent, underinsured, or low income patients for a specified period. In addition, the Committee is not aware of any requirements concerning the ultimate purpose of capital projects that relied on Measure A funds. For example, if a building changes hands, the Committee does not know if there is any requirement that the new building owner continue to provide services to the Measure A target population.

The Oversight Committee is also concerned that there is no continuing Capital Investment fund, and recommends that the BOS identify Measure A funds that can be used to meet the capital needs of nonprofit health care services providers in Alameda County.

## OTHER CAPITAL

### VALLEYCARE MEDICAL CENTER

**FY 07/08 allocation:** 0

**Amount carried over from prior year allocations:** \$1,100,000

**Expended/encumbered in FY 07/08:** \$1,000,000

**Amount carried over to FY 08/09:** \$100,000

**FY 07/08 savings transferred to reserve:** 0

*NOTE: ValleyCare did not receive a Measure A allocation in FY 07/08. ValleyCare spent a prior year's allocation in FY 07/08.*

ValleyCare Medical Center received its first Measure A allocation for capital expansion of its Emergency Department (ED). With this expansion ValleyCare added seven single-exam rooms and one Sexual Assault Response Team exam room. This was the first expansion of the ED since it opened in 1991. ValleyCare provides emergency department services to any patient who presents to the ED, without regard to ability to pay.

Measure A funds accounted for approximately 50% of the construction. The Oversight Committee requested additional information from ValleyCare regarding the percentage of its ED patients who are part of the Measure A targeted population, which includes indigent, low income, and uninsured residents of Alameda County. ValleyCare replied that in FY 07 the Measure A target population was 19% of total visits; in FY 08 it was 21% of total visits.

### CONCERNS

The Oversight Committee is concerned that Measure A funds paid 50% of the construction costs for an expansion that serves such a low proportion of Measure A's targeted population. Of course, over time the percentages should equalize, given no additional allocations of Measure A funds. However, ValleyCare signaled in its report to the Committee that they may be applying for Measure A funds for additional expansion in the future.

The language of Measure A includes a commitment to geographic distribution of the funds raised, and the allocation to ValleyCare helps to keep that commitment. But it is also important that Measure A funds be restricted to providing services to the target population as laid out in the ballot language.

## ADMINISTRATION/INFRASTRUCTURE SUPPORT

**FY 07/08 allocation:** \$206,000

**Amount carried over from prior year allocations:** 0

**Expended/encumbered in FY 07/08:** \$117,473

**Amount carried over to FY 08/09:** 0

**FY 07/08 savings transferred to reserve:** \$88,527

This allocation provides administrative support for the management of Measure A, including, but not limited to, contract development and monitoring, management of capital request for proposal (RFP) projects, budget oversight, and staffing of the Oversight Committee.

Measure A funds in FY 07/08 included an allocation of \$206,000 for this purpose, of which \$117,473 was expended for the following: Measure A Financial Manager salary and benefits, postage and/or other mail delivery services for Measure A correspondence, facility rental fee for the Capital RFP applicants' conference, expenses related to Measure A Oversight Committee meetings, and the Oversight Committee Report Consultant fee. The remaining unspent \$88,527 reverted back to the general Measure A account for redistribution at a later date.

## **HEALTHY COMMUNITIES, INC. (DOING BUSINESS AS HEALTHY OAKLAND)**

**FY 07/08 allocation:** 0

**Amount carried over from prior year allocations:** \$125,000

**Expended/encumbered in FY 07/08:** \$125,000

**Amount carried over to FY 08/09:** 0

**FY 07/08 savings transferred to reserve:** 0

In FY 06/07, the Board of Supervisors (BOS) redirected \$250,000 originally allocated for expansion of a state-administered insurance program that failed to materialize. Of these redirected funds, the BOS allocated \$125,000 each to Healthy Oakland and to the Bay Area Consortium for Quality Health Care (BACQHC). The BOS negotiated a contract with Healthy Oakland in FY 06/07, but not with BACQHC. Therefore, in FY 07/08 the BOS allocated the remaining unspent \$125,000 to Healthy Oakland.

### **HIGHLIGHTS**

This funding enhanced and supplemented the prior year allocation and was used for infrastructure development and capacity building. As a result of this Measure A investment, Healthy Oakland accomplished the following:

- Conducted a practice management and billing assessment
- Prepared audited financial statements for the first time
- Submitted a Community Clinic State Licensing application, which resulted in Healthy Communities Inc. becoming a licensed clinic
- Submitted an application for State Alcohol and Other Drugs certification
- Developed the first Healthy Communities, Inc. Business Plan (2009-2011).

Additionally, Measure A funds helped leverage an additional \$225,000 from a combination of sources including the Public Health Department, Bechtel Foundation, and TIDES Foundation.

## **DIRECT MEDICAL AND SUPPORT SERVICES (OAKLAND)**

**FY 07/08 allocation:** \$257,500

**Amount carried over from prior year allocations:** 0

**Expended/encumbered in FY 07/08:** \$257,500

**Amount carried over to FY 08/09:** 0

**FY 07/08 savings transferred to reserve:** 0

On June 12, 2007, the Board of Supervisors (BOS) directed \$250,000 of Measure A funds originally allocated for health insurance expansion to high-risk populations within Alameda County. The BOS

authorized the Health Care Services Agency (HCSA) to work with the Board's Health Committee and Board representatives to develop a process and recommend specific programs and providers.

On September 11, 2007, the BOS approved a Request for Qualification (RFQ) for direct medical and support services to adult residents of Oakland who are disproportionately impacted by health disparities, with an emphasis on serving County residents who:

- are re-entering the community from the correctional system
- experience co-occurring disorders
- have incomes that fall below 200% of the Federal Poverty Level.

On December 18, 2007, the BOS authorized HCSA to negotiate and execute standard agreements with Healthy Communities, Inc. and Preventive Care Pathways in the amount of \$128,750 each (this includes a 3% COLA that was awarded in FY 07/08), with 50% to be used for direct medical and support services and 50% to be used to support start-up and/or one-time capital and development costs in FY 07/08. The BOS approved this funding to continue through FY 09/10—however, from FY 08/09 forward the BOS required the funds to be used for direct medical and support services exclusively. Of six proposals received in the RFQ process, the BOS rated these two providers as the top two proposals and encouraged them to collaborate on a single, integrated approach.

FUNDS ALLOCATED BY THE ALAMEDA COUNTY BOARD OF SUPERVISORS  
GROUP 4: BOARD OF SUPERVISORS  
DISCRETIONARY ALLOCATIONS

**BOARD OF SUPERVISORS DISCRETIONARY ALLOCATIONS**

**FY 07/08 allocation:** \$1,015,000  
**Amount carried over from prior year allocations:** \$474,205  
**Expended/encumbered in FY 07/08:** \$803,761  
**Amount carried over to FY 08/09:** \$685,444  
**FY 07/08 savings transferred to reserve:** 0

On December 14, 2004, the Board of Supervisors (BOS) adopted a motion to receive a discretionary allocation of \$100,000 per district for each fiscal year beginning in FY 04/05, for “other” services. This allocation authorized each member of the BOS to recommend appropriations totaling up to \$100,000 in each fiscal year. The recommended appropriations require BOS approval.

On October 9, 2007, the BOS approved a 3% cost of living adjustment (COLA) for all programs receiving Measure A allocations and adopted to increase the BOS discretionary allocation from \$100,000 to \$200,000. Therefore, effective FY 07/08, each member of the BOS could recommend appropriations totaling up to \$215,000 in each fiscal year.

The discretionary BOS appropriations must meet all of the administrative and policy requirements of Measure A. Supervisors can submit allocation requests at any time during the fiscal year and can carry over any unspent or unallocated funds designated for their districts from one fiscal year to the next. The full BOS approves all contracts recommended by the individual Supervisors.

**BOARD OF SUPERVISORS’ MEASURE A  
DISTRICT ALLOCATIONS FUNDING  
OBJECTIVES FOR FY 07/08.**

**Supervisor Scott Haggerty/District 1:** Allocations are directed specifically to District 1 and generally to seniors and agencies that can leverage funds.

**Supervisor Gail Steele/District 2:** Allocations are focused on children’s services and on supporting direct service programs, rather than prevention. Attention is given to the numbers of clients served and unmet needs being addressed.

**Supervisor Alice Lai-Bitker/District 3:** Allocations attempt to fill small gaps in addressing health disparities, with attention given to language issues.

**Supervisor Nate Miley/District 4:** Emphasis is placed on public health and prevention, especially in Ashland and Cherryland, and on senior issues.

**Supervisor Keith Carson/District 5:** Has generally not allocated funds in the hope of funding a larger and more significant project, but may forgo this plan and fund smaller agencies in the future.

Sample allocations in FY 07/08 include the following:

**Horizon Services:** Alameda County Behavioral Health Care Services (BHCS) contracted in FY 07/08 with Horizon Services to conduct client focus groups in order to prioritize best practice methods in Senior Alcohol and Other Drug (AOD) prevention. The \$10,000 contract with Horizon Services represents 0.16% of the total annual BHCS budget.

The programs recruited 50 senior participants for six focus groups, which provided the input necessary to develop of an assessment of the Senior AOD Prevention plan, identify and prioritize best practices in Senior AOD prevention strategies, and produce and disseminate of the plan to senior-related events and organizations.

**Asian Community Mental Health Services:** BHCS contracted in FY 07/08 with Asian Community Mental Health Services to ensure that 15 to 20 uninsured children and youth in Alameda County received mental health services. The \$20,000 contract with Asian Community Mental Health Services represents 0.3% of the agency’s total annual budget.

Without Measure A funds, the 20 uninsured youth or children would not have received 150 mental health sessions, including 114 individual psychotherapy sessions, 14 group counseling sessions, and 22 family therapy sessions.

**Public Health:** In the area of Public Health, the BOS made allocations both to organizations that received other Measure A funds, and those that did not. Of this latter group, five organizations provide services to seniors, one provides osteoporosis services, and four are community-building organizations.

**School-Based Health Centers:** See the section “School-Based/Linked Health Centers” for information on BOS allocations and other Measure A funds received. For example, a three-year Measure A grant of \$50,000 per year helped fund the planning and development of the new Shop55 Wellness at Oakland High School, including a student survey on health care needs.

For FY 07/08 the BOS District Allocations were as follows:

**LEGEND:**

- Dist** = District
- District 1** = Supervisor Scott Haggerty
- District 2** = Supervisor Gail Steele
- District 3** = Supervisor Alice Lai-Bitker
- District 4** = Supervisor Nate Miley
- District 5** = Supervisor Keith Carson

<b>Dist</b>	<b>Agency/Contractor</b>	<b>Expended/ Encumbered</b>	<b>Description</b>
<b>1</b>	Valley Care	\$50,000.00	Emergency room capital improvement
	Tri-City Homeless Coalition	\$31,200.00	Driver for mobile health van
	LIFE ElderCare, Inc.	\$20,000.00	Senior fall prevention
	Senior Support Program of Tri-Valley	\$35,000.00	Services promoting senior health
	CAPS - City of Fremont	\$40,000.00	Services promoting senior health
	<b>TOTAL</b>	<b>\$176,200.00</b>	

Continued on next page.

<b>Dist</b>	<b>Agency/Contractor</b>	<b>Expended/ Encumbered</b>	<b>Description</b>
<b>2</b>	St. Rose Hospital	\$50,000.00	Silva Clinic
	Spectrum Community Services	\$20,000.00	Senior fall risk reduction
	Tiburcio Vasquez Health Center	\$60,000.00	Health education at Tennyson and Logan High
	<b>TOTAL</b>	<b>\$130,000.00</b>	
<b>3</b>	HEPPAC	\$20,000.00	IDU harm reduction and prevention
	Spectrum Community Services	\$30,000.00	Senior fall risk reduction
	Davis St. Community Center	\$15,000.00	Sustainability evaluation for delivery of health services
	Asian Community Mental Health Services	\$20,000.00	Youth counseling services for uninsured
	Center for Early Intervention on Deafness	\$10,000.00	Interpretation services for low income, uninsured, and limited-English-speaking families
	Foundation for Osteoporosis Research and Education (FORE)	\$10,500.00	Osteoporosis screening program
	Lisa Ann Nichols	\$1,500.00	Sustainability evaluation for delivery of health services for Davis Street Community Center
	s2i consulting	\$50,000.00	Project management and consulting services to develop an initiative to reduce health disparities in San Lorenzo
	<b>TOTAL</b>	<b>\$156,999.70</b>	
	<b>4</b>	Legal Assistance for Seniors	\$7,500.00
Livable Communities Interns		\$7,697.94	Livability Initiative
Livable Communities Policy Consultant		\$16,502.80	Livability Initiative
Horizon Services - CommPre Program		\$10,000.00	Senior AOD Prevention Project
Prevention Institute		\$20,000.00	Healthy and Livable Communities Project
Spectrum		\$25,000.00	Senior fall risk reduction
U First Health Partners		\$44,638.00	Capital improvement
Livable Communities Policy Consultant		\$26,312.51	Livability Initiative
Livable Communities Intern		\$2,000.00	Livability Initiative
Livable Communities Intern		\$910.00	Livability Initiative
Life Elder Care		\$5,000.00	Senior fall prevention
<b>TOTAL</b>		<b>\$165,561.25</b>	

<b>Dist</b>	<b>Agency/Contractor</b>	<b>Expended/ Encumbered</b>	<b>Description</b>
<b>5</b>	Center for Early Intervention on Deafness	\$150,000.00	Health services for children and adults with hearing impairments or severe speech and/or language delays
	Preventive Care Pathways	\$25,000.00	Mobile health van services
	<b>TOTAL</b>	<b>\$175,000.00</b>	

### CONCERNS

The Committee acknowledges that the Supervisors responded to some of the concerns raised in last year's report, but notes the following ongoing and new concerns:

- No specified process exists to announce the availability of funding or to request a District allocation.
- As income from the sales tax decreases, the BOS fixed dollar amount of the allocation becomes a larger percentage of the whole.



**APPENDIX A:** Measure A Revenue Received in Each Fiscal Year

**APPENDIX B:** FY 07/08 Measure A Fund Distribution by Provider or Program

**APPENDIX C:** Maps: Geographic Distribution of Providers Receiving Measure A Funds in FY 07/08

Map 1: County, Private, and Nonprofit Hospitals and Alameda County Public Health Programs That Received Measure A Funds in FY 07/08

Map 2: Alameda County Health Care Services Agency  
FY 07/08 Measure A Capital Investment in the County's Health Care Safety Net

Map 3: Emergency Rooms Where ER and On-Call Physicians Provided Service and Were Compensated With Measure A Funds in FY 07/08

Map 4: Alameda County Behavioral Health Care Services Alcohol and Drug Providers That Received Measure A Funds in FY 07/08

Map 5: Alameda County Behavioral Health Care Services Mental Health CBO Providers That Received Measure A Funds in FY 07/08

Map 6: Adolescent School-Based Health Centers That Received Measure A Funding in FY 07/08

Map 7: Primary Care Community Based Organization (CBO) Clinics Receiving Measure A Funding in FY 07/08



**APPENDIX A:  
MEASURE A REVENUE RECEIVED IN EACH FISCAL YEAR**

**FISCAL YEAR 04/05**

<b>Date Received</b>	<b>Month Earned</b>	<b>ACMC</b>	<b>County</b>	<b>Total</b>	<b>ACMC Total</b>	<b>County Cumulative Total</b>	<b>Total Cumulative</b>
9/22/04	07/04	5,211,585	1,737,195	6,948,780	5,211,585	1,737,195	6,948,780
10/21/04	08/04	5,142,150	1,714,050	6,856,200	10,353,735	3,451,245	13,804,980
11/19/04	09/04	6,856,200	2,285,400	9,141,600	17,209,935	5,736,645	22,946,580
12/28/04	10/04	5,494,355	1,831,452	7,325,807	22,704,290	7,568,097	30,272,387
01/19/05	11/04	5,437,350	1,812,450	7,249,800	28,141,640	9,380,547	37,522,187
02/17/05	12/04	7,249,800	2,416,600	9,666,400	35,391,440	11,797,147	47,188,587
03/31/05	01/05	6,299,953	2,099,984	8,399,937	41,691,393	13,897,131	55,588,524
04/21/05	02/05	4,291,500	1,430,500	5,722,000	45,982,893	15,327,631	61,310,524
05/18/05	03/05	5,722,050	1,907,350	7,629,400	51,704,943	17,234,981	68,939,924
06/24/05	04/05	8,412,419	2,804,139	11,216,559	60,117,362	20,039,120	80,156,483
07/20/05	05/05	4,988,025	1,662,676	6,650,700	65,105,387	21,701,796	86,807,183
08/19/05	06/05	6,650,700	2,216,900	8,867,600	71,756,087	23,918,696	95,674,783
Interest earned			116,927	116,927			
<b>TOTAL</b>		<b>71,756,087</b>	<b>24,035,623</b>	<b>95,791,710</b>			

**FISCAL YEAR 05/06**

<b>Date Received</b>	<b>Month Earned</b>	<b>ACMC</b>	<b>County</b>	<b>Total</b>	<b>ACMC Total</b>	<b>County Cumulative Total</b>	<b>Total Cumulative</b>
9/23/05	07/05	7,593,094	2,531,031	10,124,125	7,593,094	2,531,031	10,124,125
10/20/05	08/05	4,791,900	1,597,300	6,389,200	12,384,994	4,128,331	16,513,325
11/18/05	09/05	6,389,250	2,129,750	8,519,000	18,774,244	6,258,081	25,032,325
12/23/05	10/05	10,712,696	3,570,899	14,283,595	29,486,940	9,828,980	39,315,920
01/19/06	11/05	5,642,475	1,880,825	7,523,300	35,129,415	11,709,805	46,839,220
02/16/06	12/05	7,523,250	2,507,750	10,031,000	42,652,665	14,217,555	56,870,220
03/31/06	01/06	7,854,305	2,618,102	10,472,407	50,506,970	16,835,657	67,342,627
04/21/06	02/06	5,059,800	1,686,600	6,746,400	55,566,770	18,522,257	74,089,027
05/18/06	03/06	6,746,400	2,248,800	8,995,200	62,313,170	20,771,057	83,084,227
06/23/06	04/06	7,371,527	2,457,176	9,828,703	69,684,697	23,228,233	92,912,930
07/20/06	05/06	5,450,100	1,816,700	7,266,800	75,134,797	25,044,933	100,179,730
08/17/06	06/06	7,266,825	2,422,275	9,689,100	82,401,622	27,467,208	109,868,830
Interest earned			380,741	380,741			
<b>TOTAL</b>		<b>82,401,622</b>	<b>27,847,949</b>	<b>110,249,571</b>			

**FISCAL YEAR 06/07**

<b>Date Received</b>	<b>Month Earned</b>	<b>ACMC</b>	<b>County</b>	<b>Total</b>	<b>ACMC Total</b>	<b>County Cumulative Total</b>	<b>Total Cumulative</b>
09/22/06	07/06	8,322,635	2,774,212	11,096,847	8,322,635	2,774,212	11,096,847
10/18/06	08/06	5,513,100	1,837,700	7,350,800	13,835,735	4,611,912	18,447,647
11/16/06	09/06	9,242,400	3,080,800	12,323,200	23,078,135	7,692,712	30,770,847
12/22/06	10/06	7,953,029	2,651,009	10,604,038	31,031,164	10,343,721	41,374,885
01/18/07	11/06	6,025,875	2,008,625	8,034,500	37,057,039	12,352,346	49,409,385
02/22/07	12/06	8,004,300	2,668,100	10,672,400	45,061,339	15,020,446	60,081,785
03/29/07	01/07	6,588,768	2,196,256	8,785,024	51,650,107	17,216,702	68,866,809
04/18/07	02/07	5,224,050	1,741,350	6,965,400	56,874,157	18,958,052	75,832,209
05/17/07	03/07	6,965,400	2,321,800	9,287,200	63,839,557	21,279,852	85,119,409
06/22/07	04/07	8,152,952	2,717,651	10,870,603	71,992,509	23,997,503	95,990,012
07/19/07	05/07	5,736,525	1,912,175	7,648,700	77,729,034	25,909,678	103,638,712
08/16/07	06/07	7,648,725	2,549,575	10,198,300	85,377,759	28,459,253	113,837,012
Interest earned			655,872	655,872			
<b>TOTAL</b>		<b>85,377,759</b>	<b>29,115,125</b>	<b>114,492,884</b>			

**FISCAL YEAR 07/08**

<b>Date Received</b>	<b>Month Earned</b>	<b>ACMC</b>	<b>County</b>	<b>Total</b>	<b>ACMC Total</b>	<b>County Cumulative Total</b>	<b>Total Cumulative</b>
09/26/07	07/07	8,530,372	2,843,457	11,373,829	8,530,372	2,843,457	11,373,829
10/18/07	08/07	6,117,375	2,039,125	8,156,500	14,647,747	4,882,582	19,530,329
11/21/07	09/07	8,156,475	2,718,825	10,875,300	22,804,222	7,601,407	30,405,629
12/28/07	10/07	7,883,441	2,627,814	10,511,255	30,687,663	10,229,221	40,916,884
01/16/08	11/07	6,205,800	2,068,600	8,274,400	36,893,463	12,297,821	49,191,284
02/21/08	12/07	8,274,375	2,758,125	11,032,500	45,167,838	15,055,946	60,223,784
03/27/08	01/08	7,183,405	2,394,468	9,577,873	52,351,243	17,450,414	69,801,657
04/17/08	02/08	5,386,200	1,795,400	7,181,600	57,737,443	19,245,814	76,983,257
05/22/08	03/08	7,181,625	2,393,875	9,575,500	64,919,068	21,639,689	86,558,757
06/24/08	04/08	8,049,440	2,683,146	10,732,586	72,968,508	24,322,835	97,291,343
07/18/08	05/08	5,966,175	1,988,725	7,954,900	78,934,683	26,311,560	105,246,243
08/21/08	06/08	7,954,875	2,651,625	10,606,500	86,889,558	28,963,185	115,852,743
Interest earned			766,401	766,401			
<b>TOTAL</b>		<b>86,889,558</b>	<b>29,729,586</b>	<b>116,619,144</b>			

**FISCAL YEAR 08/09**

<b>Date Received</b>	<b>Month Earned</b>	<b>ACMC</b>	<b>County</b>	<b>Total</b>	<b>ACMC Total</b>	<b>County Cumulative Total</b>	<b>Total Cumulative</b>
9/25/08	07/08	8,032,186	2,677,396	10,709,582	8,032,186	2,677,396	10,709,582
10/15/08	08/08	6,121,050	2,040,350	8,161,400	14,153,236	4,717,746	18,870,982
11/20/08	09/08	8,161,425	2,720,475	10,881,900	22,314,661	7,438,221	29,752,882
12/26/08	10/08	6,854,632	2,284,877	9,139,509	29,169,293	9,723,098	38,892,391
01/22/09	11/08	6,073,950	2,024,650	8,098,600	35,243,243	11,747,748	46,990,991
02/19/09	12/08	6,661,050	2,220,350	8,881,400	41,904,293	13,968,098	55,872,391
03/27/09	01/09	6,506,559	2,168,853	8,675,412	48,410,852	16,136,951	64,547,803
04/16/09	02/09	5,227,725	1,742,575	6,970,300	53,638,577	17,879,526	71,518,103
05/21/09	03/09	5,471,475	1,823,825	7,295,300	59,110,052	19,703,351	78,813,403
06/23/09	04/09	5,786,013	1,921,503	7,707,516	64,896,065	21,624,854	86,520,919
07/16/09	05/09	5,148,450	1,716,150	6,864,600	70,044,515	23,341,004	93,385,519
08/20/09	06/09	5,906,775	1,968,925	7,875,700	75,951,290	25,309,929	101,261,219
Interest earned			363,681	363,681			
<b>TOTAL</b>		<b>75,951,290</b>	<b>25,673,610</b>	<b>101,624,900</b>			
<b>GRAND TOTAL</b>		<b>402,376,317</b>	<b>136,401,892</b>	<b>538,778,209</b>			



**APPENDIX B:  
FY 07/08 MEASURE A FUND DISTRIBUTION BY PROVIDER OR PROGRAM**

	Measure A Allocation	Expended/ Encumbered
<b>GROUP 1: PUBLIC HEALTH</b>		
<b>Public Health Prevention Initiative</b>		
Chronic Disease and Injury Prevention		
Project New Start	\$16,917	\$16,541
Community-Designed Initiative	\$125,000	\$125,000
Asthma	\$211,542	\$211,818
Diabetes	\$262,028	\$249,100
Healthy Kids, Healthy Teeth	\$147,212	\$145,851
Emergency Medical Services (EMS)	\$100,000	\$100,000
Health Inequities and Capacity Building		
Community-Designed Initiative	\$50,000	\$50,000
Office of Director/Community Assessment, Planning, & Education (CAPE)	\$720,569	\$719,210
Community Nursing	\$98,508	\$89,133
Immunization Registry	\$197,263	\$196,351
HIV Prevention	\$92,800	\$92,574
Family Health Services (FHS)-Healthy Passage System of Care	\$98,465	\$93,038
Obesity Prevention and School Health		
Nutrition Services	\$397,306	\$423,909
Public Health Nursing	\$177,390	\$179,393
Community-Designed Initiative	\$395,000	\$392,934
<b>TOTAL</b>	<b>\$3,090,000</b>	<b>\$3,084,852</b>
	<b>Measure A Allocation</b>	<b>Number of Claims Paid</b>
<b>ER and On-Call Physician Reimbursement</b>		
California Emergency Medical Group	\$444,403	5,060
Berkeley Emergency Medical Group	\$363,090	4,705
Oakcare Medical Group	\$334,979	5,714
Phoenix Emergency Physicians	\$101,323	1,402
Emergency Medical Association of Children	\$72,718	1,347
Pleasanton Emergency Medical Group	\$43,860	610
Bay Imaging Consultant Medical Group	\$34,515	1,403
Northern California Trauma Medical Group	\$26,622	106
R Scott Snyder MD Inc.	\$20,812	50
<b>TOTAL FOR ABOVE 9 PROVIDERS</b>	<b>\$1,442,322</b>	<b>20,397</b>
<b>TOTAL FOR 32 PROVIDERS RECEIVING UNDER \$20,000</b>		
	<b>\$102,678</b>	<b>338</b>
<b>GRAND TOTAL FOR ALL PROVIDERS</b>	<b>\$1,545,000</b>	<b>20,735</b>

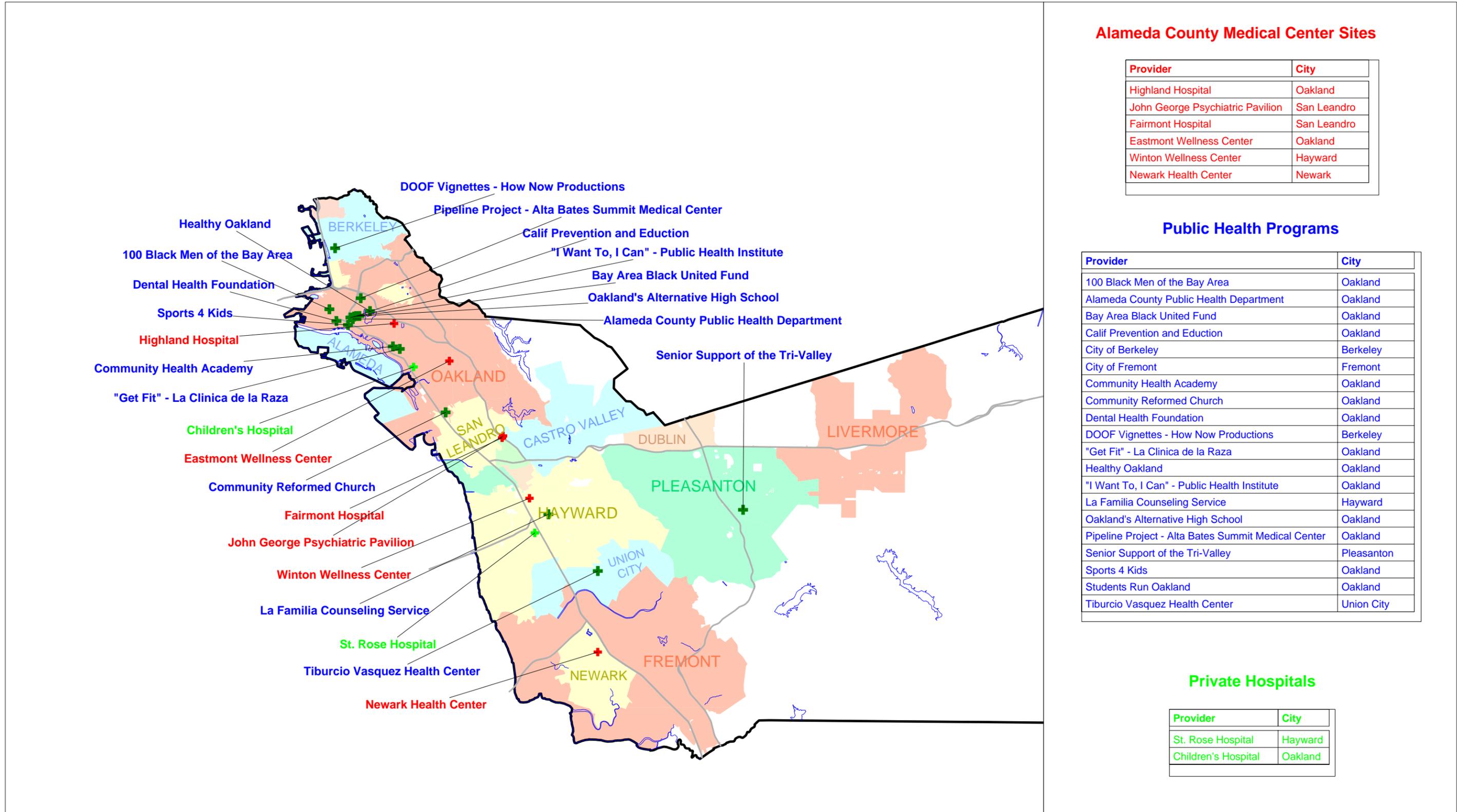
	Measure A Allocation	Expended/ Encumbered
<b>GROUP 2: BEHAVIORAL HEALTH</b>		
<b>Alameda County Behavioral Health Care Services Community-Based Organization Providers</b>		
Mental Health Providers		
Alameda County Network of Mental Health Clients (ACNMHC)	\$33,470	\$33,470
Alameda Family Services	\$11,177	\$11,177
Ann Martin	\$20,848	\$20,848
Asian Community	\$64,516	\$64,516
Bay Area Community Services (BACS)	\$108,070	\$108,070
Berkeley Place	\$29,641	\$29,641
Bonita House	\$72,200	\$74,023
Building Opportunities for Self-Sufficiency (BOSS)	\$66,413	\$66,413
Center for Independent Living	\$2,293	\$2,293
Crisis Support Center	\$30,957	\$30,957
East Bay AIDS Center (EBAC)	\$66,003	\$66,003
East Bay Community Recovery Project (EBCRP)	\$16,618	\$16,618
Family Paths	\$26,271	\$26,271
La Cheim	\$31,566	\$31,566
La Clinica	\$79,977	\$79,977
La Familia	\$62,440	\$62,440
Lincoln	\$24,601	\$24,601
Mental Health Assoc	\$46,936	\$46,936
Native American Master	\$3,020	\$3,020
Regents of U.C. Center on Deafness	\$7,770	\$7,770
Seneca Residential & Day Treatment	\$62,653	\$62,653
Supplemental Rate Program (SRP)	\$44,904	\$51,937
Subacute Treatment for Adolescent Rehabilitation Services, Inc. (STARS)	\$15,160	\$15,160
Telecare	\$1,069,515	\$955,894
Traveler's Aid	\$10,477	\$10,477
West Oakland Health Council (WOHC)	\$73,315	\$73,315
Alcohol & Drug Providers		
Alameda Family Services	\$13,833	\$13,833
Asian Community	\$4,040	\$4,040
Asian Pacific	\$5,070	\$5,070
Axis Community Health	\$24,820	\$24,820
Berkeley Addiction Treatment Services	\$5,613	\$5,613
Bay Area Addiction Research Treatment (BAART) Behavioral Health Services	\$966	\$966
BOSS	\$2,133	\$2,133
Bi-Bett	\$38,787	\$38,787
Community Drug Council	\$25,564	\$24,791
Carnales Unidos Reformando Adictos (CURA)	\$21,832	\$21,832
Davis Street	\$10,753	\$10,428
East Bay Asian Youth Center	\$2,995	\$2,995
EBCRP	\$35,401	\$35,401

	Measure A Allocation	Expended/ Encumbered
<b>GROUP 2: BEHAVIORAL HEALTH (CONTINUED)</b>		
<b>Alameda County Behavioral Health Care Services Community-Based Organization Providers (Continued)</b>		
Alcohol & Drug Providers (Continued)		
Filipinos for Affirmative Action	\$2,245	\$2,245
Humanistic Alternatives To Addiction, Research, and Treatment, Inc. (HAART)	\$3,085	\$2,992
Health and Human Resource Education Center (HHREC)	\$5,010	\$5,010
Horizon	\$109,329	\$109,329
Latino Commission	\$60,132	\$60,132
Magnolia	\$5,036	\$5,036
Native American Health Center	\$3,848	\$3,848
New Bridge	\$44,993	\$44,993
Options	\$19,624	-
St. Mary's	\$3,893	\$3,893
Second Chance	\$72,090	\$72,090
Senior Support	\$2,156	\$2,156
Solid	\$56,067	\$56,067
Sexual Minority Alliance of Alameda County (SMAAC)	\$2,536	\$2,536
Thunder Road	\$12,278	\$12,278
WOHC	\$44,848	\$44,848
YMCA	\$9,436	\$9,436
ZDK	\$276	\$264
<b>TOTAL</b>	<b>\$2,729,500</b>	<b>\$2,603,908</b>
<b>Alameda County Behavioral Health Care Services Detox/Sobering Station*</b>	<b>\$2,060,000</b>	<b>\$2,249,035</b>
<b>Mental Health Costs for Juvenile Justice Center</b>	<b>\$515,000</b>	<b>\$515,000</b>
<b>Mental Health Costs for Glen Dyer Jail in Oakland</b>	<b>\$772,000</b>	<b>\$772,000</b>
<b>Criminal Justice Screening/In-Custody Services at Santa Rita Jail</b>	<b>\$3,705,499</b>	<b>\$3,705,499</b>
<b>GROUP 3: MEDICAL CARE, CAPITAL, AND ADMINISTRATIVE SERVICES</b>		
<b>Primary Care Community-Based Organizations</b>		
Asian Health Services	\$934,198	\$934,198
Bay Area Consortium for Quality Health Care	\$324,002	\$108,000
Axis Community Health Center	\$535,773	\$535,773
La Clinica de la Raza	\$1,317,989	\$1,317,798
Life Long Medical Care	\$907,595	\$907,595
Native American Health Center	\$411,834	\$411,834
Tri-Cities Health Center	\$787,960	\$787,960
Tiburcio Vasquez Health Center	\$665,814	\$665,814
West Oakland Health Center	\$631,605	\$631,605
Day Workers	\$154,500	\$66,192
<b>TOTAL</b>	<b>\$6,671,270</b>	<b>\$6,366,769</b>

	Measure A Allocation	Expended/ Encumbered
<b>GROUP 3: MEDICAL CARE, CAPITAL, AND ADMINISTRATIVE SERVICES (CONTINUED)</b>		
<b>Non-County Hospitals</b>		
Children's Hospital Oakland *	\$3,567,500	\$3,500,000
St. Rose Hospital *	\$2,317,500	\$2,250,000
<b>TOTAL</b>	<b>\$5,885,000</b>	<b>\$5,750,000</b>
<b>School-Based Health Centers</b>		
Maintaining Existing Services		
Base Funding for Existing SBHCs	\$669,500	\$736,450
Core Evaluation	\$206,000	\$206,000
Service Expansion		
Capital Reserve	\$0	\$42,262
Service System Coordination		
Program Coordination	\$77,250	\$77,250
Administrative Infrastructure and Support	\$77,250	\$77,250
<b>TOTAL</b>	<b>\$1,030,000</b>	<b>\$1,139,212</b>
<b>Medical Costs for Juvenile Justice Center *</b>	<b>\$257,500</b>	<b>\$126,881</b>
<b>Capital Investment in the County's Health Care Safety Net *</b>	<b>\$3,019,980</b>	<b>\$1,679,695</b>
<b>Other Capital *</b>	<b>\$0</b>	<b>\$1,000,000</b>
<b>Administration/Infrastructure Support</b>	<b>\$206,000</b>	<b>\$117,473</b>
<b>Healthy Communities Inc. (dba Healthy Oakland)</b>	<b>\$125,000</b>	<b>\$125,000</b>
<b>Direct Medical and Support Services (Oakland)</b>	<b>\$257,500</b>	<b>\$257,500</b>
<b>GROUP 4: BOARD OF SUPERVISORS (BOS)</b>		
<b>BOS Discretionary Allocations *</b>	<b>\$1,015,000</b>	<b>\$803,761</b>

\*Unspent funds in these allocations are allowed to roll forward into subsequent years.

# County, Private, and Nonprofit Hospitals and Alameda County Public Health Programs That Received Measure A Funds in FY 07/08



### Alameda County Medical Center Sites

Provider	City
Highland Hospital	Oakland
John George Psychiatric Pavilion	San Leandro
Fairmont Hospital	San Leandro
Eastmont Wellness Center	Oakland
Winton Wellness Center	Hayward
Newark Health Center	Newark

### Public Health Programs

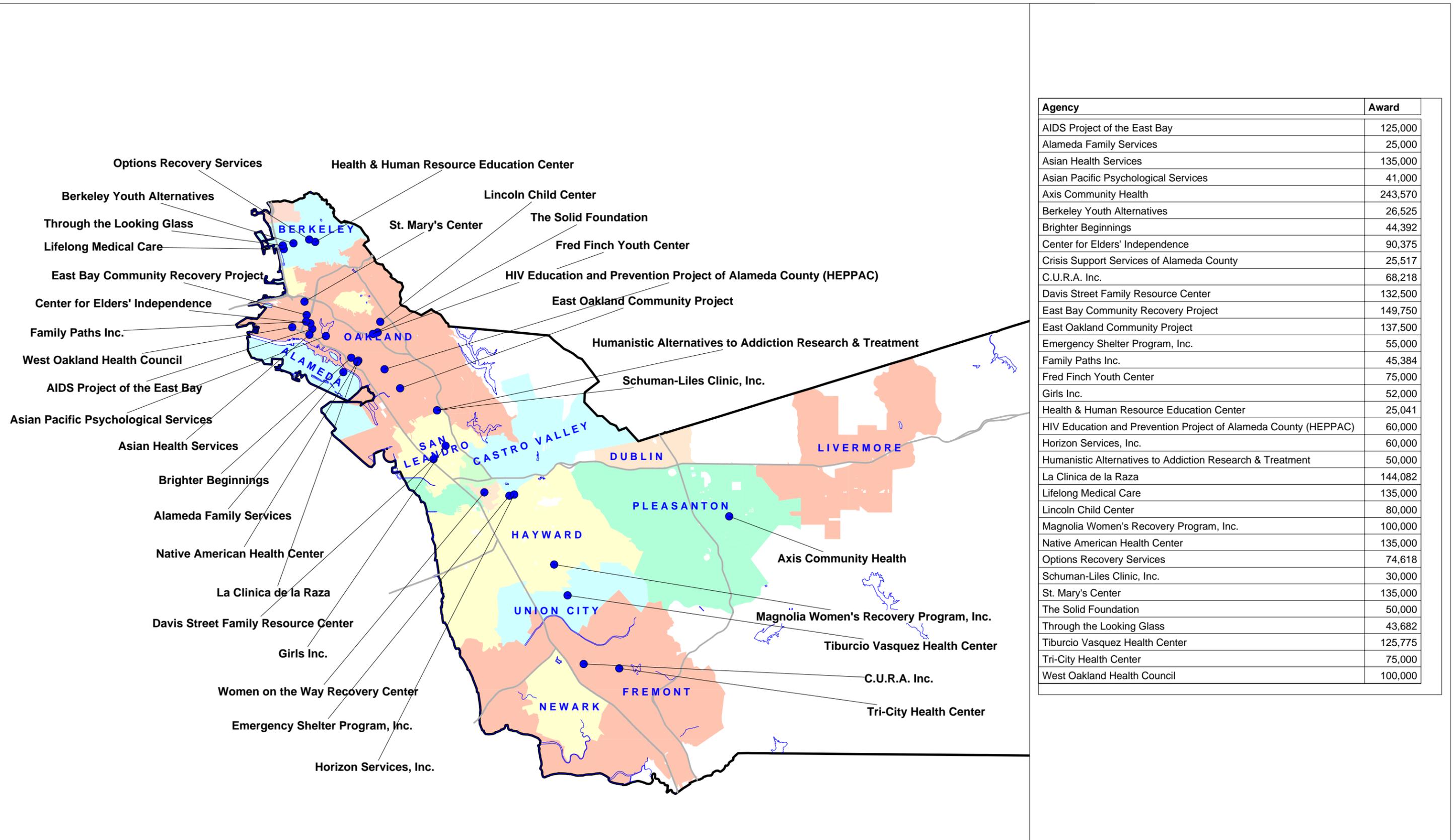
Provider	City
100 Black Men of the Bay Area	Oakland
Alameda County Public Health Department	Oakland
Bay Area Black United Fund	Oakland
Calif Prevention and Education	Oakland
City of Berkeley	Berkeley
City of Fremont	Fremont
Community Health Academy	Oakland
Community Reformed Church	Oakland
Dental Health Foundation	Oakland
DOOF Vignettes - How Now Productions	Berkeley
"Get Fit" - La Clinica de la Raza	Oakland
Healthy Oakland	Oakland
"I Want To, I Can" - Public Health Institute	Oakland
La Familia Counseling Service	Hayward
Oakland's Alternative High School	Oakland
Pipeline Project - Alta Bates Summit Medical Center	Oakland
Senior Support of the Tri-Valley	Pleasanton
Sports 4 Kids	Oakland
Students Run Oakland	Oakland
Tiburcio Vasquez Health Center	Union City

### Private Hospitals

Provider	City
St. Rose Hospital	Hayward
Children's Hospital	Oakland

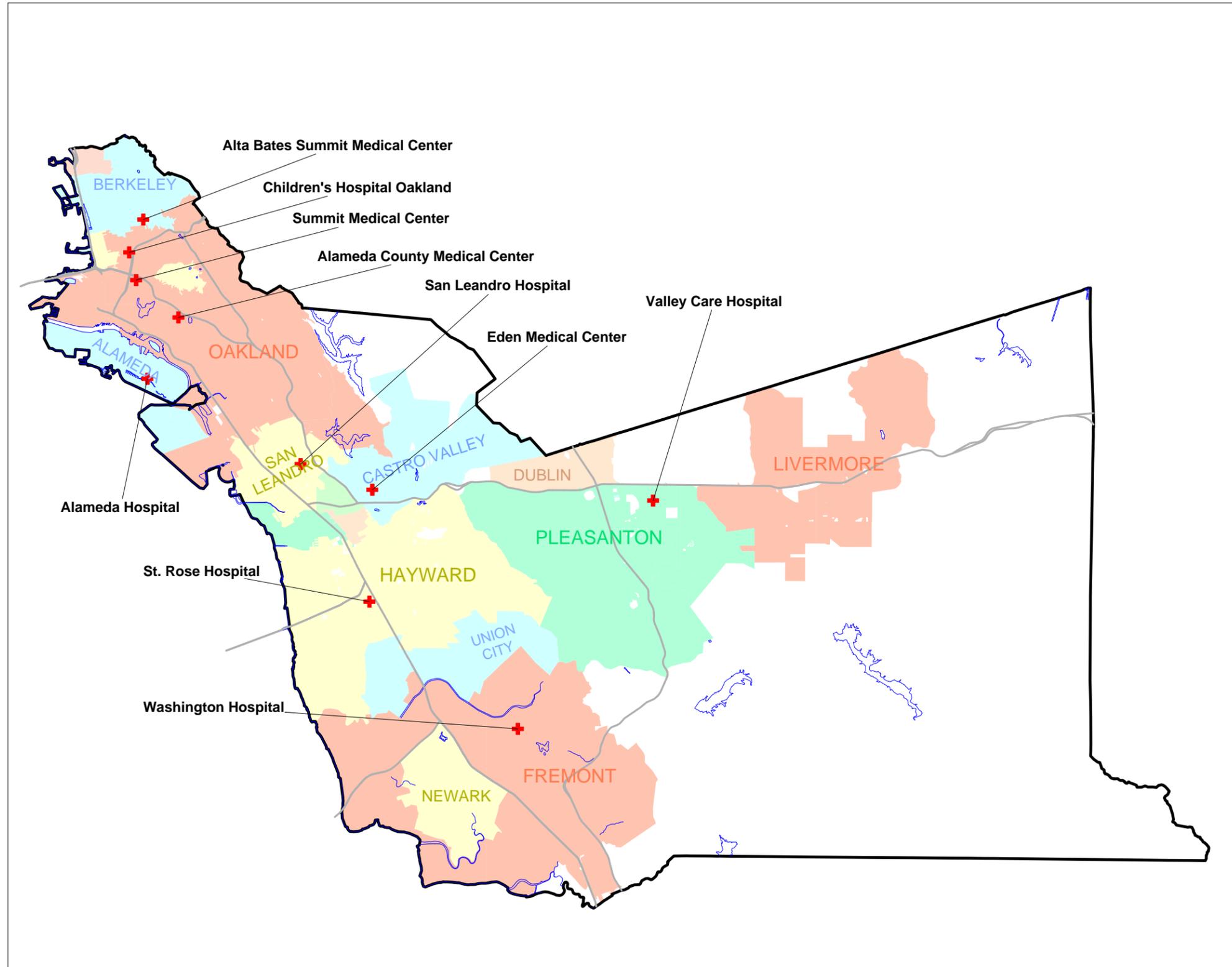
# Alameda County Health Care Services Agency 2007-2008 Measure A Capital Investment In the County's Health Care Safety Net

## Appendix C: Maps

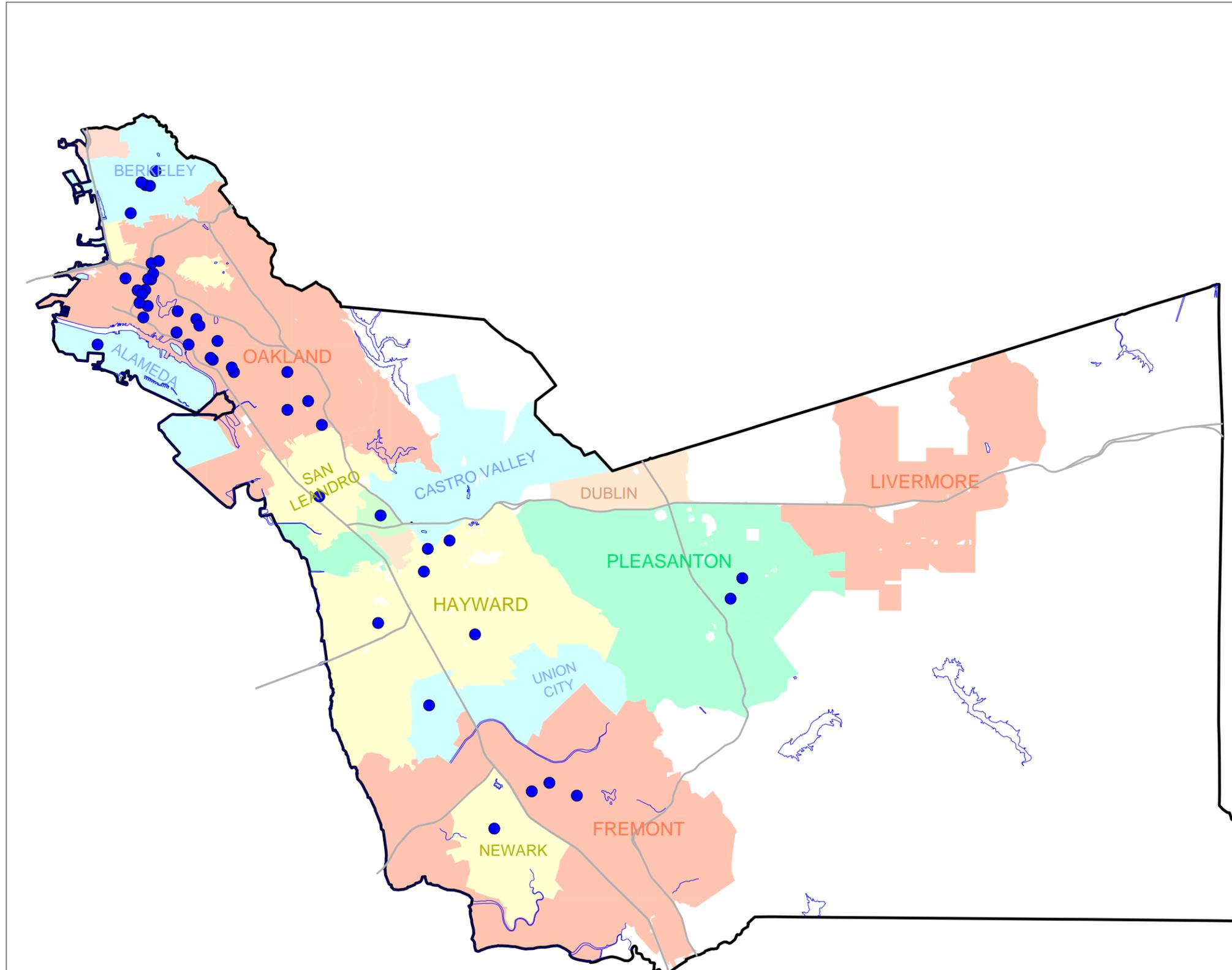


Agency	Award
AIDS Project of the East Bay	125,000
Alameda Family Services	25,000
Asian Health Services	135,000
Asian Pacific Psychological Services	41,000
Axis Community Health	243,570
Berkeley Youth Alternatives	26,525
Brighter Beginnings	44,392
Center for Elders' Independence	90,375
Crisis Support Services of Alameda County	25,517
C.U.R.A. Inc.	68,218
Davis Street Family Resource Center	132,500
East Bay Community Recovery Project	149,750
East Oakland Community Project	137,500
Emergency Shelter Program, Inc.	55,000
Family Paths Inc.	45,384
Fred Finch Youth Center	75,000
Girls Inc.	52,000
Health & Human Resource Education Center	25,041
HIV Education and Prevention Project of Alameda County (HEPPAC)	60,000
Horizon Services, Inc.	60,000
Humanistic Alternatives to Addiction Research & Treatment	50,000
La Clinica de la Raza	144,082
Lifelong Medical Care	135,000
Lincoln Child Center	80,000
Magnolia Women's Recovery Program, Inc.	100,000
Native American Health Center	135,000
Options Recovery Services	74,618
Schuman-Liles Clinic, Inc.	30,000
St. Mary's Center	135,000
The Solid Foundation	50,000
Through the Looking Glass	43,682
Tiburcio Vasquez Health Center	125,775
Tri-City Health Center	75,000
West Oakland Health Council	100,000

# EMERGENCY ROOMS WHERE ER AND ON-CALL PHYSICIANS PROVIDED SERVICE AND WERE COMPENSATED WITH MEASURE A FUNDS IN FY 07/08

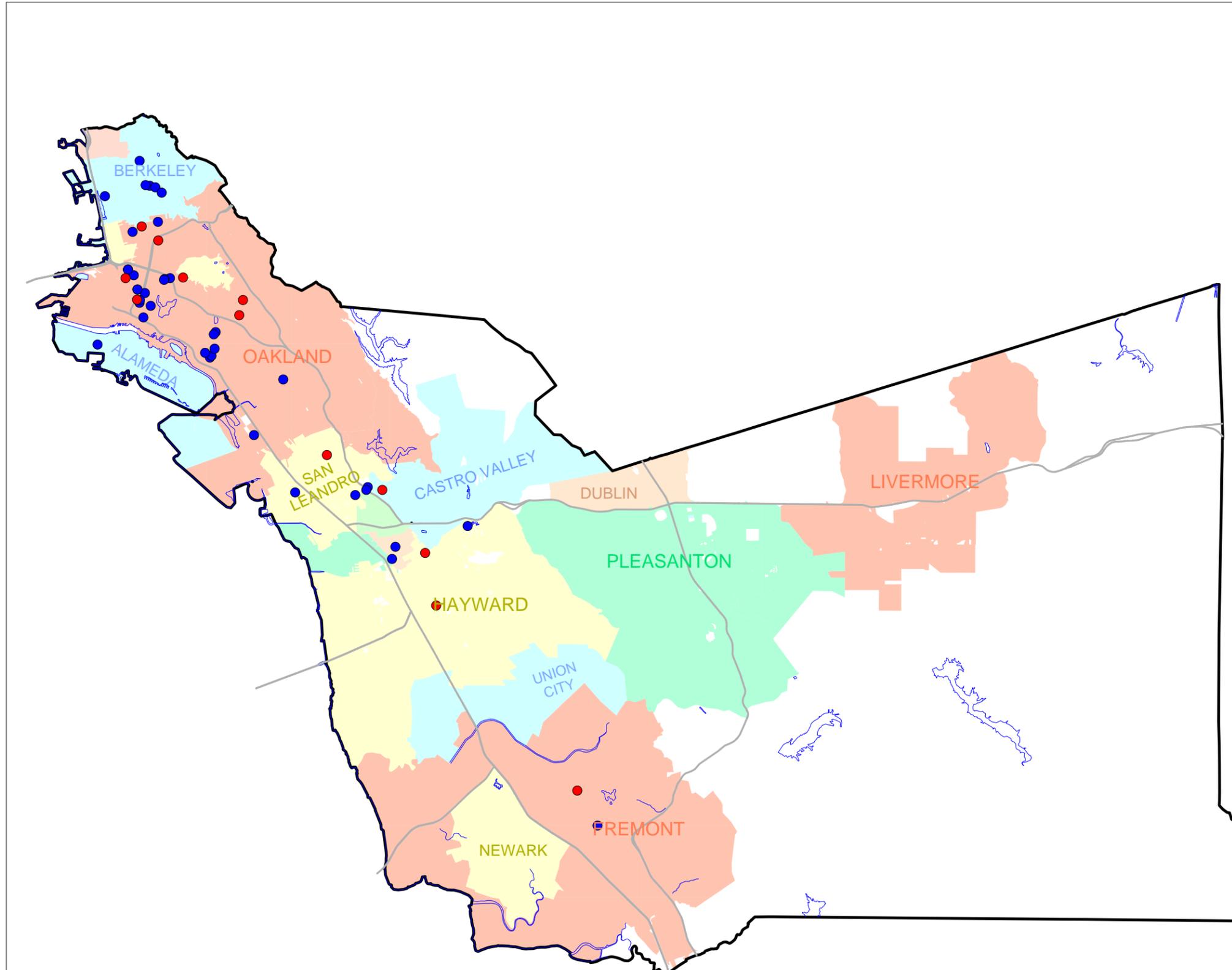


# Alameda County Behavioral Health Care Services Alcohol and Drug Providers That Received Measure A Funds in FY 07/08



Organization	City
Alameda Family Services	Alameda
Asian Community Mental Health Services	Oakland
Asian Pacific Psychological Services	Oakland
Axis Community Health, Inc.	Pleasanton
B.A.A.R.T.	Oakland
Berkeley Addiction Treatment Services, Inc. (B.A.T.S.)	Berkeley
Bi-Bett Corporation	Oakland
Building Opportunities for Self Sufficiency (B.O.S.S.)	Berkeley
Carnales Unidos Reformando Adictos, Inc. (C.U.R.A.)	Fremont
Community Drug Council	Oakland
Davis Street Community Center	San Leandro
East Bay Asian Youth Center	Oakland
East Bay Community Recovery Project	Oakland
Filipinos for Affirmative Action	Union City
H.A.A.R.T. - Hayward	Hayward
Health and Human Resource Education Center	Berkeley
Horizon Services	Oakland
Latino Commission	Oakland
Magnolia Recovery Program, Inc.	Newark
Native American Health Center	Oakland
New Bridge Foundation Inc.	Berkeley
Options Recovery Services	Berkeley
S.M.A.C.C. of Alameda County	Oakland
Second Chance	Hayward
St. Mary's Recovery Center-Recovery 55	Oakland
The Solid Foundation	Oakland
Thunder Road - Adolescent Treatment Centers, Inc.	Oakland
Tri-Valley Community Foundation-Senior Support Program	Pleasanton
West Oakland Health Council, Inc.	Oakland
YMCA Of The East Bay-East Lake	Oakland
ZDK, Inc.-The 14th St. Clinic	Oakland

# Alameda County Behavioral Health Care Services Mental Health CBO Providers That Received Measure A Funds in FY 07/08



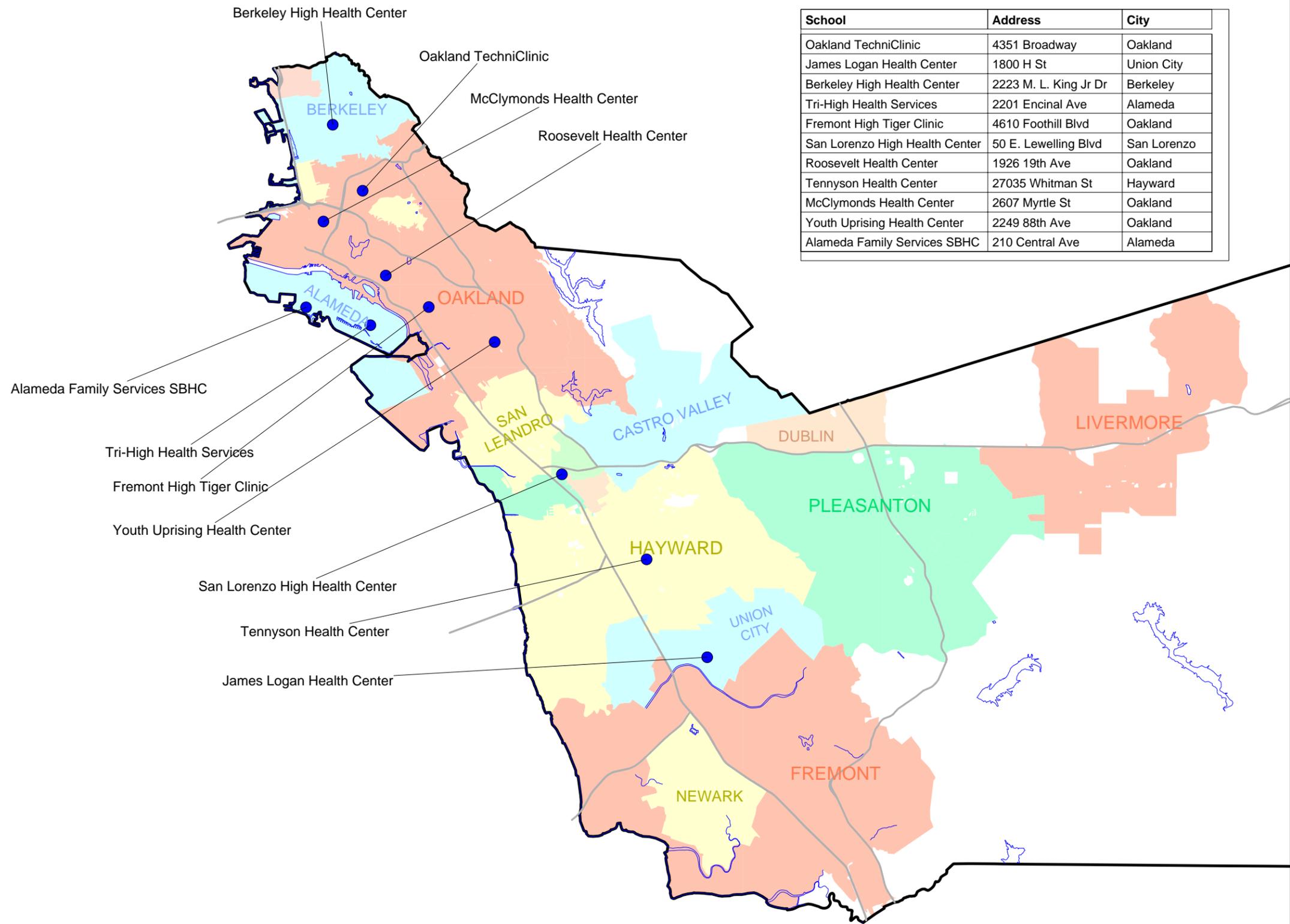
## Adult Providers

Organization	City
Alameda County Network of Mental Health Clients	Oakland
Alameda Family Services	Oakland
Asian Community Mental Health Services	Oakland
BACS	Oakland
BACS-Irvington	Fremont
Berkeley Place-Casa DeLa Vida	Oakland
Bonita House	Berkeley
BOSS	Oakland
Center for Independent Living	Berkeley
Crisis Support Services	Oakland
East Bay Community Recovery Project	Oakland
La Clinica	Oakland
Mental Health Association	Oakland
Native American Health Center	Oakland
Regents of the UC - Center on Deafness	San Leandro
Supplement Rate Program	San Leandro
Telecare	Oakland
Travelers Aid Society	Oakland

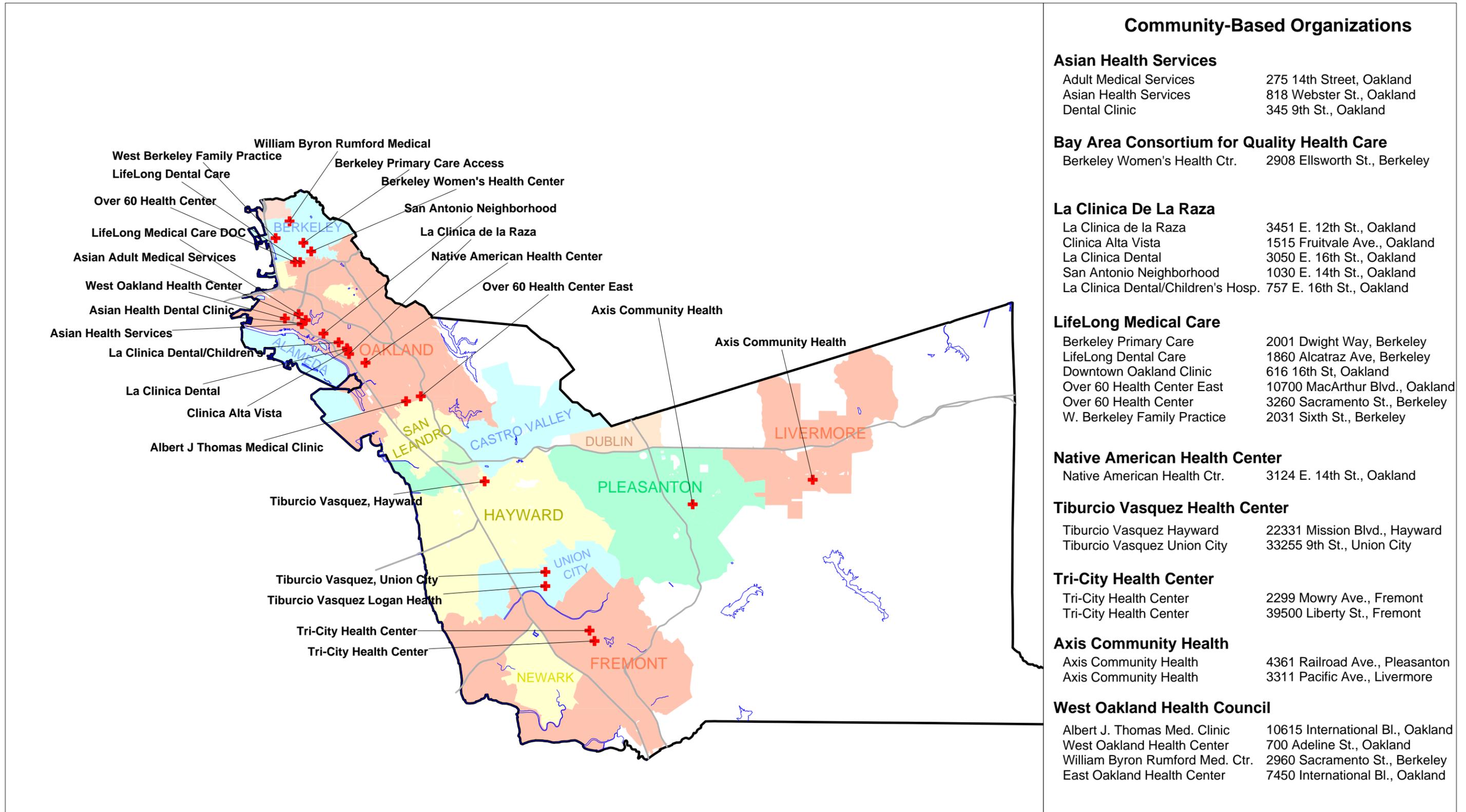
## Child Providers

Organization	City
Ann Martin Children's Center, Inc.	Piedmont
East Bay Agency for Children	Oakland
La Cheim	Oakland
La Familia	Hayward
Lincoln Child Center	Oakland
Family Paths	Oakland
Seneca Center	San Leandro
STARS	San Leandro
West Oakland Health Center	Oakland

## ADOLESCENT SCHOOL-BASED HEALTH CENTERS THAT RECEIVED MEASURE A FUNDING IN FISCAL YEAR 07/08



# PRIMARY CARE COMMUNITY-BASED ORGANIZATION (CBO) CLINICS RECEIVING MEASURE A FUNDING IN FISCAL YEAR 07/08



### Community-Based Organizations

#### Asian Health Services

Adult Medical Services	275 14th Street, Oakland
Asian Health Services	818 Webster St., Oakland
Dental Clinic	345 9th St., Oakland

#### Bay Area Consortium for Quality Health Care

Berkeley Women's Health Ctr.	2908 Ellsworth St., Berkeley
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#### La Clinica De La Raza

La Clinica de la Raza	3451 E. 12th St., Oakland
Clinica Alta Vista	1515 Fruitvale Ave., Oakland
La Clinica Dental	3050 E. 16th St., Oakland
San Antonio Neighborhood	1030 E. 14th St., Oakland
La Clinica Dental/Children's Hosp.	757 E. 16th St., Oakland

#### LifeLong Medical Care

Berkeley Primary Care	2001 Dwight Way, Berkeley
LifeLong Dental Care	1860 Alcatraz Ave, Berkeley
Downtown Oakland Clinic	616 16th St, Oakland
Over 60 Health Center East	10700 MacArthur Blvd., Oakland
Over 60 Health Center	3260 Sacramento St., Berkeley
W. Berkeley Family Practice	2031 Sixth St., Berkeley

#### Native American Health Center

Native American Health Ctr.	3124 E. 14th St., Oakland
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#### Tiburcio Vasquez Health Center

Tiburcio Vasquez Hayward	22331 Mission Blvd., Hayward
Tiburcio Vasquez Union City	33255 9th St., Union City

#### Tri-City Health Center

Tri-City Health Center	2299 Mowry Ave., Fremont
Tri-City Health Center	39500 Liberty St., Fremont

#### Axis Community Health

Axis Community Health	4361 Railroad Ave., Pleasanton
Axis Community Health	3311 Pacific Ave., Livermore

#### West Oakland Health Council

Albert J. Thomas Med. Clinic	10615 International Bl., Oakland
West Oakland Health Center	700 Adeline St., Oakland
William Byron Rumford Med. Ctr.	2960 Sacramento St., Berkeley
East Oakland Health Center	7450 International Bl., Oakland