

HEALTH CARE FOR THE HOMELESS/FARMWORKER HEALTH PROGRAM (HCH/FH)

Co-Applicant Board Meeting Agenda

620 Correas St, Half Moon Bay, CA 94019 (Half Moon Bay Library)

June 8th, 2023, 10:00am - 12:00pm

This meeting of The Health Care for The Homeless/Farmworker Health board will be held in-person at
620 Correas St, Half Moon Bay, CA 94019 (Half Moon Bay Library)

Remote participation in this meeting will not be available. To observe or participate in the meeting please attend in-person at above location.
*Written public comments may be emailed to masfaw@smcgov.org and such written comments should indicate the specific agenda item on which you are commenting.

***Please see instructions for written and spoken public comments at the end of this agenda.**

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| A. CALL TO ORDER & ROLL CALL | Robert Anderson | 10:00am |
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| B. PUBLIC COMMENT |
| Persons wishing to address on matters NOT on the posted agenda may do so. Each speaker is limited to three minutes and the total time allocated to Public Comment is fifteen minutes. If there are more than five individuals wishing to speak during Public Comment, the Chairperson may choose to draw only five speaker cards from those submitted and defer the rest of the speakers to a second Public Comment at the end of the Board meeting. In response to comments on a non-agenda item, the Board may briefly respond to statements made or questions posed as allowed by the Brown Act (Government Code Section 54954.2) However, the Boards general policy is to refer items to staff for comprehensive action or report. |

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| C. ACTION TO SET THE AGENDA & CONSENT AGENDA | Robert Anderson | 10:05am |
| 1. Approve meeting minutes from May 11, 2023, Board Meeting | | Tab 1 |
| 2. Contracts and MOUs update | | Tab 2 |
| 3. Budget and Finance Report | | Tab 3 |
| 4. Quality Improvement/Quality Assurance update | | Tab 4 |
| 5. HCH/FH Director's Report | | Tab 5 |

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| D. COMMUNITY ANNOUNCEMENTS / GUEST SPEAKER | | |
| Communications and Announcements are brief items from members of the Board regarding upcoming events in the community and correspondence that they have received. They are informational in nature and no action will be taken on these items at this meeting. A total of five minutes is allotted to this item. If there are additional communications and announcements, the Chairperson may choose to defer them to a second agenda item added at the end of the Board Meeting. | | |
| 1. Community updates | Board members | 10:10am |
| 2. County Supervisor | Ray Mueller | 10:15am |
| 3. Half Moon Bay Library Resources | Annie Malley & Araceli Efigenio | 11:00am |

Meetings are accessible to people with disabilities. Individuals who need special assistance or a disability-related modification or accommodation (including auxiliary aids or services) to participate in this meeting, or who have a disability and wish to request an alternate format for the agenda, meeting notice, or other documents that may be distributed at the meeting, should contact the HCH/FH Community Program Coordinator at least five working days before the meeting at masfaw@smcgov.org in order to make reasonable arrangements to ensure accessibility to this meeting and the materials related to it. The HCH/FH Co-Applicant Board meeting documents are posted at least 72 hours prior to the meeting and are accessible online at: <http://www.smchealth.org/smmc-hfhfh-board>

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| E. BUSINESS AGENDA | | | |
| 1. Review & Approve Forms 5A (Services), B (Sites) and C (Other Activities & Locations) | Jim Beaumont | 11:30am | Tab 6 |

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|---|---------------------------------------|---------|--|
| F. REPORTING & DISCUSSION AGENDA | | | |
| 1. National Conference for Agricultural Worker Health debrief | Silvia Campos & Amanda Hing Hernandez | 11:40am | |
| 2. Pescadero Clinic Update | Silvia Campos | 11:50am | |

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| G. ADJOURNMENT | 12:00pm |
| Future meeting: Department of Housing 264 Harbor Blvd., Bldg. A Belmont, CA 94002 | |

***Instructions for Public Comment During Meeting**

Members of the public may address the Members of the HCH/FH board as follows:

Written public comments may be emailed in advance of the meeting. Please read the following instructions carefully:

1. Your written comment should be emailed to masfaw@smcgov.org.
2. Your email should include the specific agenda item on which you are commenting or note that your comment concerns an item that is not on the agenda or is on the consent agenda.
3. Members of the public are limited to one comment per agenda item.
4. The length of the emailed comment should be commensurate with the two minutes customarily allowed for verbal comments, which is approximately 250-300 words.
5. If your emailed comment is received by 5:00 p.m. on the day before the meeting, it will be provided to the Members of the HCH/FH board and made publicly available on the agenda website under the specific item to which your comment pertains. If emailed comments are received after 5:00p.m. on the day before the meeting, HCH/FH board will make every effort to either (i) provide such emailed comments to the HCH/FH board and make such emails publicly available on the agenda website prior to the meeting, or (ii) read such emails during the meeting. Whether such emailed comments are forwarded and posted, or are read during the meeting, they will still be included in the administrative record.

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TAB 1
Meeting
Minutes



**HEALTH CARE FOR THE HOMELESS/FARMWORKER HEALTH PROGRAM (HCH/FH)
 Co-Applicant Board Meeting Minutes**

May 11th, 2023 10am-12pm

| Co-Applicant Board Members Present | County Staff Present | Members of the Public | Absent Board Members/Staff |
|---|--|-----------------------|--|
| Robert Anderson, Chair Victoria Sanchez De Alba, Vice Chair Brian Greenberg Judith Guerrero Steve Carey Steve Kraft Suzanne Moore Ty Deldridge (arrived post roll call) Francine Serafin Dickson (arrived post roll call) Jim Beaumont, HCH/FH Program Director (Ex-Officio) | Karen Pfister Frank Trinh Alejandra Alvarado Gozel Kulieva Meron Asfaw Irene Pasma Anessa Farber Lauren Carroll | | Janet Schmidt Gabe Garcia Tony Serrano |

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| A. Call to order & roll call | Robert Anderson called the meeting to order at 10:04am and did a roll call. | |
| B. Public comment | None | |
| C. Action to set the agenda and consent agenda | 1. Approve meeting minutes from April 13, 2023, Board Meeting 2. Contracts and MOUs update 3. Budget and Finance Report 4. Quality Improvement/Quality Assurance update 5. HCH/FH Director’s Report | Request to approve the Consent Agenda was <u>MOVED</u> by Steve K and <u>SECONDED</u> by Suzanne Moore APPROVED by all Board members present. |

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| <p>D. Community announcements / Guest speaker</p> <p>1. Community updates</p> | <p>Victoria Sanchez De Alba She reminded the board to attend the Farmworker Public Summit, scheduled for May 20th, 1-3pm at the Boys and Girls Club of the Coastside Event Center, attendees include elected officials, community members and nonprofits serving farmworkers. The summit was expanded on the 2022 Farmworker Roundtable to discuss clean water, housing, and health care.</p> <p>Robert Anderson As follow up to the shooting in Half Moon Bay, farms with housing are being inspected by the County.</p> | |
| <p>2. Best Practices for Engaging the Chronically Homeless</p> | <p>Susan Manheimer, Chief Police (Retired).</p> <p>Susan began her career in the Tenderloin and brought her expertise to San Mateo County, where she worked closely with many stakeholders including some current Board Members to establish a Homeless Outreach Team collaboration with the police department and get the Vendome – a permanent supportive housing program – created. Commissioned by the County, Susan put together a report titled: Best Practices Approaches for Engaging Chronically Homeless in Redwood City with Services and Transitioning Them to Interim Housing with Wrap Around Services (link)</p> <p>Discussion</p> <ol style="list-style-type: none"> 1. What is Susan’s perspective on having stricter penalties for drug use versus de-criminalization of drug use (i.e., full de-criminalization has reduced utilization of treatment programs and overdoses have sky-rocketed) <ol style="list-style-type: none"> a. Susan offers that CARES courts might be able to address the issue, which would give defendants an option to go to prison or seek treatment, using jail as an impetus to choose treatment instead. 2. How can conservatorship be used as a tool in solving some of the most complicate homeless/drug cases? <ol style="list-style-type: none"> a. View recommendation in the report | |

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| | <p>3. Reflecting on Michelle – the first Vendome client, chronically homeless for 20 years in San Mateo, and still living in the Vendome, continuing to slowly make progress.</p> | |
| <p>3. A Collaborative Approach to Assessing Homeless Mortality in San Mateo County</p> | <p>Karen Pfister, epidemiologist with Public Health Policy & Planning (PHPP)</p> <ul style="list-style-type: none"> - Karen came to give Board Members an update on the death mortality work she has been leading, as a result of the HCH/FH QI/QA committee requesting a better understanding of death data among People Experiencing Homelessness back in 2021. - The report will look at data from the past 10 years and will be able to look at toxicology reports via partnership with the coroner’s office. It should be available in the Fall. Karen has indicated she would be glad to come back to the Board once report is available. <p>Discussion:</p> <ul style="list-style-type: none"> - Would it be possible for shelter/outreach teams to learn what was an ultimate cause of death, as this would be important to do remedial work? <ul style="list-style-type: none"> o Karen said it might be possible – perhaps not on an individual basis but in aggregate. She said to reach out to her directly. - Will H.S.A. update their system if someone has passed? <ul style="list-style-type: none"> o Karen said she will ask H.S.A. - Is it possible in the consideration of the first report, include a link to portal where you’d insert a name, and the system would inform whether the individual has passed or not? <ul style="list-style-type: none"> o This is unlikely to be allowable - Would it be possible to have a link to continue community reporting? <ul style="list-style-type: none"> o Something to consider | |
| <p>E. Business Agenda 1. Request for the board to approve a letter supporting AB 920</p> | <p>Discussion:</p> <ul style="list-style-type: none"> • County Boards and Commissions are not allowed to lobby directly to Sacramento. However, Boards and Commissions can vote to request the Board of Supervisors to send a letter supporting or opposing legislature. | <p>MOVED by Suzanne Moore SECONDED by Victoria Sanchez De Alba</p> |

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| | <ul style="list-style-type: none"> The Co-Applicant Board can include the letter they would have sent to Sacramento so BOS can use the language if they'd like. Approving or opposing will likely go on BOS consent agenda. HCH/FH Board Members are welcome to attend the BOS meeting when/if AB-920 is being discussed to show support. <p>Suzanne recommended that the Co-Applicant Board support AB920 (which adds housing status to the list of unlawful discrimination categories). This bill has been put into the Suspense File (i.e., "on ice"). The Co-Applicant Board chose to take a vote to send their letter of support to BOS – in case AB-920 does leave the Suspense File - BOS can take action if they choose to at that time.</p> | <p>APPROVED by all members</p> <p>Steve Carey abstained.</p> |
| <p>2. Request for the board to approve a letter opposing SB 31</p> | <p>This was not voted on because it has been postponed to next year in Sacramento, and something for the Co-Applicant Board to keep an eye on.</p> | |
| <p>F. Reporting and Discussion Agenda</p> <p>1. UDS-2022 Annual Federal Report Review</p> | <p>Staff provided the Board with an overview of the 2022 Uniform Data System report, which outlines demographic and utilization data. Refer to the slides.</p> <p>Discussion:</p> <ol style="list-style-type: none"> Why was there was a 16% decrease? <ol style="list-style-type: none"> This is in large part due to HCH/FH not contracting with Ravenswood Family Health Center, leading to about a 500 unduplicated patient decrease. Staff is still looking into cause for additional. Board members were surprised to see that in the 18-24 age group, there were predominantly street homeless (in the category and across the categories), indicating this isn't commensurate with what providers are seeing on the ground <ol style="list-style-type: none"> Staff to look into it further, the numbers are in line with previous years. How is doubling up defined? <ol style="list-style-type: none"> Reminder that HRSA and HUD using different definitions. Per HRSA, doubling up is people living with friends or non-immediate family with no tenancy rights. What are enabling services, and can the term be changed to something else? <ol style="list-style-type: none"> Enabling services are things like transportation, translation, help scheduling appointments, and other care coordination items. "Enabling services" is HRSA's term so it cannot be changed. | |

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| | <ol style="list-style-type: none"> 5. On slide 7 of the presentation, did HRSA indicate timelines for when it’s anticipated health centers would reach the benchmark? <ol style="list-style-type: none"> a. No, HRSA did not provide a timeline. 6. What is a charity program (on insurance slides) <ol style="list-style-type: none"> a. When fees are waived or forgiven 7. What is a government/county program (on insurance slides) <ol style="list-style-type: none"> a. Government/county program: family PAC, some immunization clinics, etc. 8. How much is “self-pay” costing the individual (is this SFS)? <ol style="list-style-type: none"> a. If patients don’t have health insurance and meet certain income guidelines, they are able to take advantage of the Sliding Fee Scale b. In this self-pay category, these are people who didn’t meet poverty guidelines to get discounted rate. | |
| <p>2. Mid-West Farmworker Health Conference Debrief</p> | <p>Alejandra Alvarado, clinical services coordinator, shared key themes from the Mid-West Farmworker Health conference. Board members found the report to be extremely informative and requested Alejandra share slides from the presentations she found most informative.</p> <p>Main themes:</p> <ul style="list-style-type: none"> - Importance of mental health in the farmworker community <ul style="list-style-type: none"> o Community Resiliency Model <ul style="list-style-type: none"> ▪ Trains community members and farmworkers to support each other in their social network by resetting their stress levels/nervous system ▪ This revolves around a common understanding the community impact of trauma, community trauma, community common stress, and how collective trauma impacts an individual <ul style="list-style-type: none"> • Examples of shared trauma: 9/11, Holocaust o Cultural Competence <ul style="list-style-type: none"> ▪ Choosing your words correctly – very large stigma to mental health in the FW community ▪ Understanding the data – why appointments are missed or why people aren’t being screened as regularly has to do with fear/stigma in seeking care | |

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| | <ul style="list-style-type: none"> - Building rapport with the community, ask “how does the health center show up in community spaces?” <ul style="list-style-type: none"> o Radio stations as a popular form of advertising in the community o Attend cultural events - WhatsApp is the method of communication that works very well (vs. text message) - iChill app as an interesting technology tool to moderate stress | |
| 3. National Conference for Agricultural Worker Health Debrief | Amanda/Silvia not able to join today and will present at the next Board Meeting. | |
| G. Adjournment | <p>Meeting was adjourned by Robert Anderson at 11:59am</p> <p>Future meeting: 620 Correas St, Half Moon Bay, CA 94019 (Half Moon Bay Library) 10:00am-12:00pm</p> | |

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A Collaborative Approach to Assessing Homeless Mortality in San Mateo County

Minutes

Karen Pfister, M.S.
Health Services Manager I
Office of Epidemiology and Evaluation



SAN MATEO COUNTY HEALTH
**PUBLIC HEALTH,
POLICY & PLANNING**

Background

- After meeting with the San Mateo County Healthcare for the Homeless (HCH) program, the Office of Epidemiology and Evaluation (OEE) began assessing homeless deaths in San Mateo County starting with years 2018-2020
- Hindered by the lack of a discrete field on the death certificate/in the death data files; needed to search text fields
- National Healthcare for the Homeless Council, Homeless Mortality Toolkit; list of search terms on page 18
 - Likely an underestimate of homeless deaths, even when utilizing these terms



Data Collection

- Asked homeless services providers to report client deaths to OEE via a SurveyMonkey survey for calendar year 2022
- Reached out to SMC Human Services Agency (HSA) to inquire about access to the Homeless Management Information System (HMIS) they manage; after a series of meetings, it was agreed that OEE would provide a subset of data fields from the death files to HSA. HSA would then match the death data against HMIS data and share the matched data back with OEE (this is currently in process)



Data Collection

- List of variables HSA will be providing to OEE from HMIS:
 - Disability status (yes/no), & disability type
 - Veteran status
 - History of incarceration/juvenile justice
 - Former ward of child welfare/former foster youth
 - Chronic health condition (yes/no; if yes, long-term?)
 - Mental health disorder (yes/no; if yes, long-term?)
 - Employment status
 - Insurance status
 - Demographics (age/DOB, race/ethnicity, gender, sexual orientation)
 - Currently or ever homeless
 - Living situation (prior, current, destination)
 - Deceased status (as recorded by homeless services program)



Data Collection

- Contacted SMC Coroner's Office; likely will provide death investigation summary and toxicology test results; OEE will abstract information from these documents to incorporate into the data analysis
- Match against HCH client list, as well as Correctional Health clients, via a merged dataset maintained by County Health IT
- Goal: a master list of matched/compiled data from all of these sources that can then be analyzed by OEE
- Years of data: 2013-2022



Data Analysis

- Definition of homeless (HUD, etc).
- Homeless at time of death vs. ever homeless
- Unsheltered vs. sheltered
- Trends over time
- Residents/Non-residents & death in county vs. out of county



Data Distribution

- Create & distribute a report, possibly one that is comparable to Alameda County's first homeless mortality report released last year: https://www.achch.org/uploads/7/2/5/4/72547769/2018-2020_ac_homeless_mortality_report_final_4-13-2-22.pdf
 - Key topic areas:
 - Homeless deaths by homeless status and demographics
 - Major underlying causes of death
 - Comparison of homeless mortality rates to SMC general population rates
- May also create a one-page handout, infographic, and/or data dashboard



Additional details

- Timeline – goal is to have a report compiled by the end of the 2023 calendar year
- Frequency of updating the data/report; still to be discussed/determined
- Homeless mortality review committee – proposed CA legislation (AB 271)





SAN MATEO COUNTY HEALTH

PUBLIC HEALTH, POLICY & PLANNING

Contact information:
kpfister@smcgov.org
650-573-2144

2022 UDS Annual HCH/FH Performance

HCH/FH Board Meeting May 11th, 2023



SAN MATEO COUNTY HEALTH
**SAN MATEO
MEDICAL CENTER**

What is Uniform Data System (UDS)?

Annual performance report submitted to HRSA

| | | | | | |
|--------------------------|--------------|----------|------------------------|-------------------------------------|------------------|
| Number of clients served | Demographics | Staffing | Services & utilization | Clinical measures & health outcomes | Costs & revenues |
|--------------------------|--------------|----------|------------------------|-------------------------------------|------------------|

UDS captures clients seen across SMMC, PHPP, BHRS, and by HCH/FH contracted service providers



2022 UDS Performance

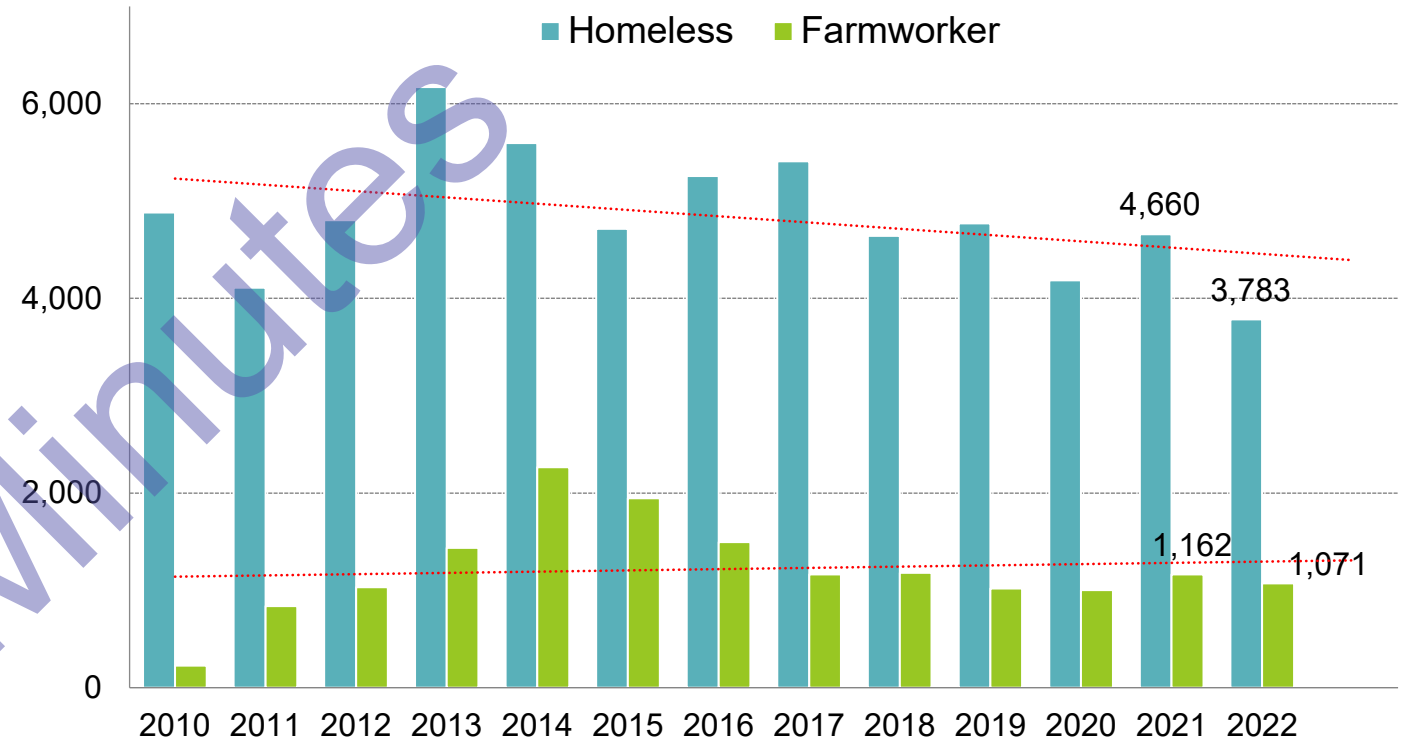
4,854 Unique Clients

- 16% decrease from 2021
- 1,071 (20%) FW
- 3,783 (80%) PEH

34,760 Visits

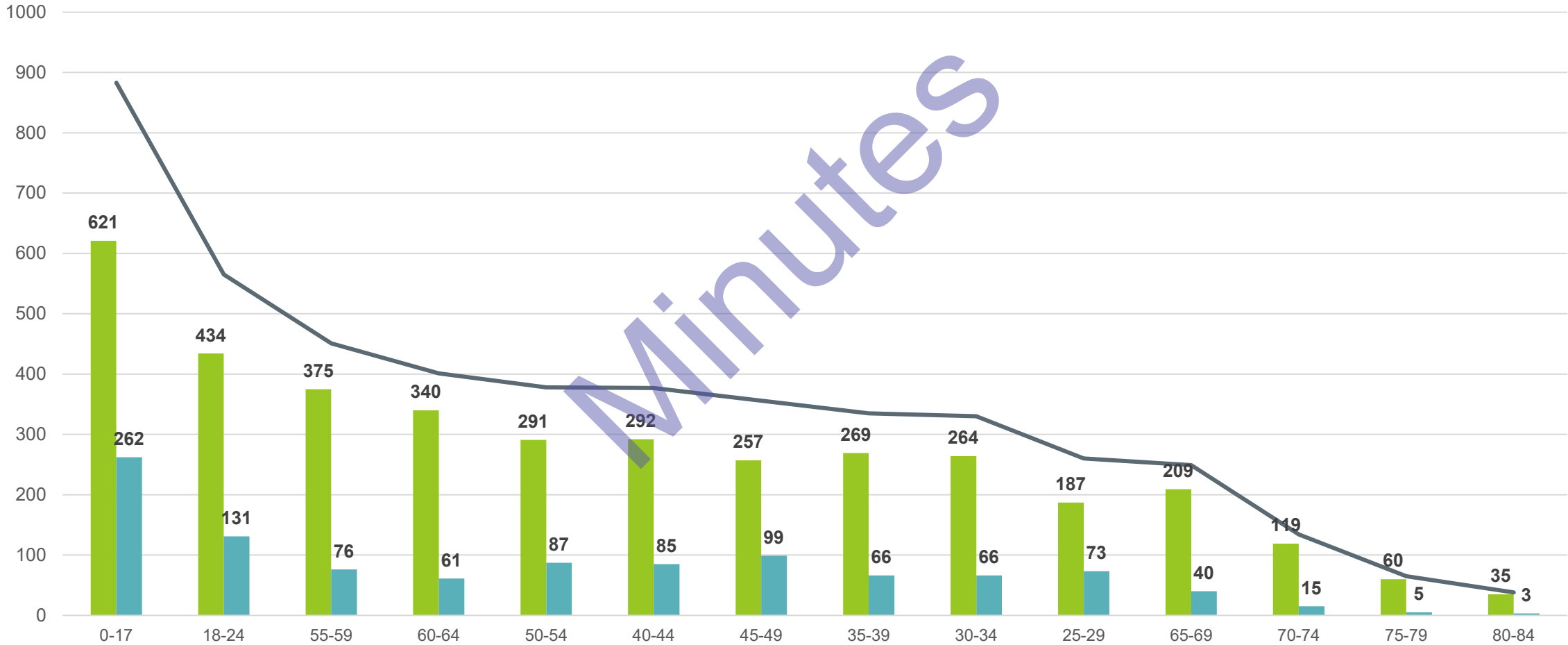
- <1% decrease from 2021
- 26,135 In-person visits
- 8,625 Virtual visits

HCH/FH Clients 2010-2022



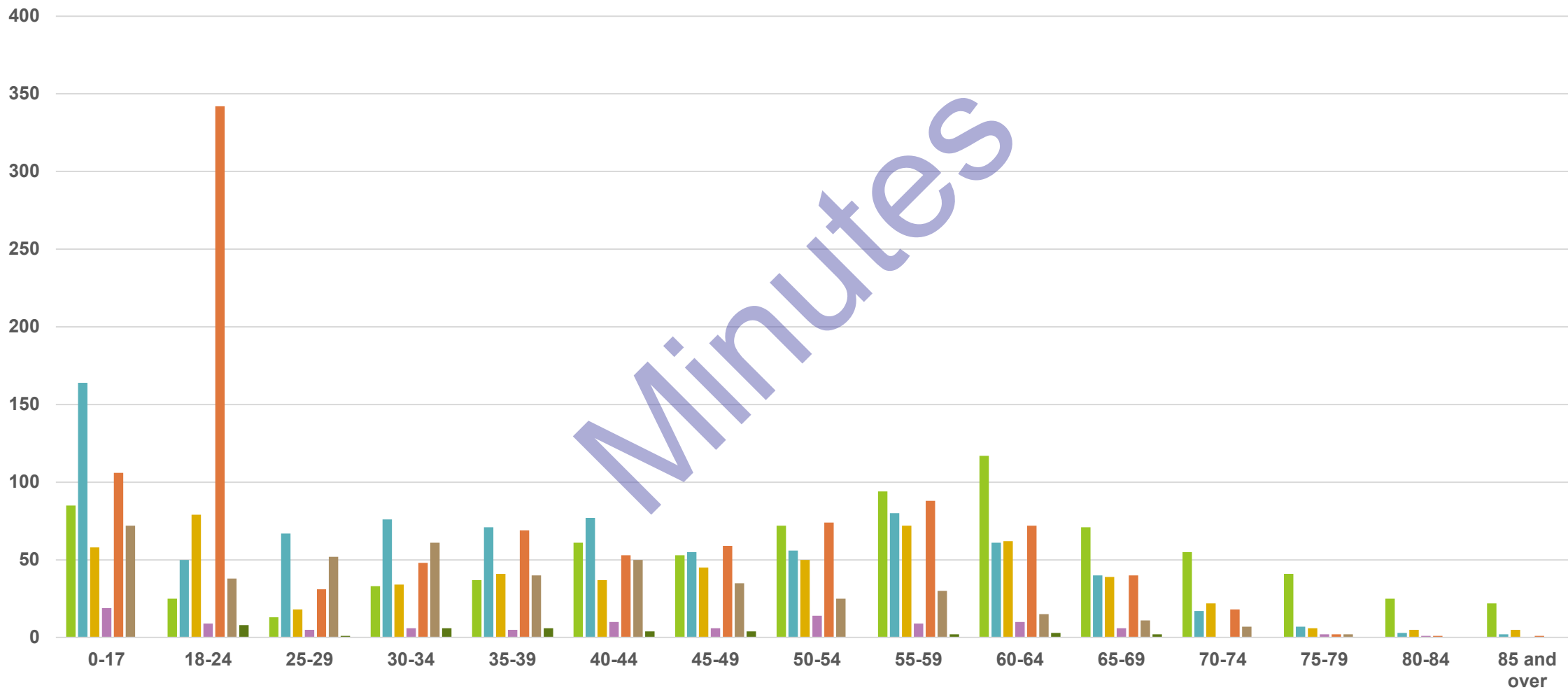
Age Distribution by Population

HCH FH Total



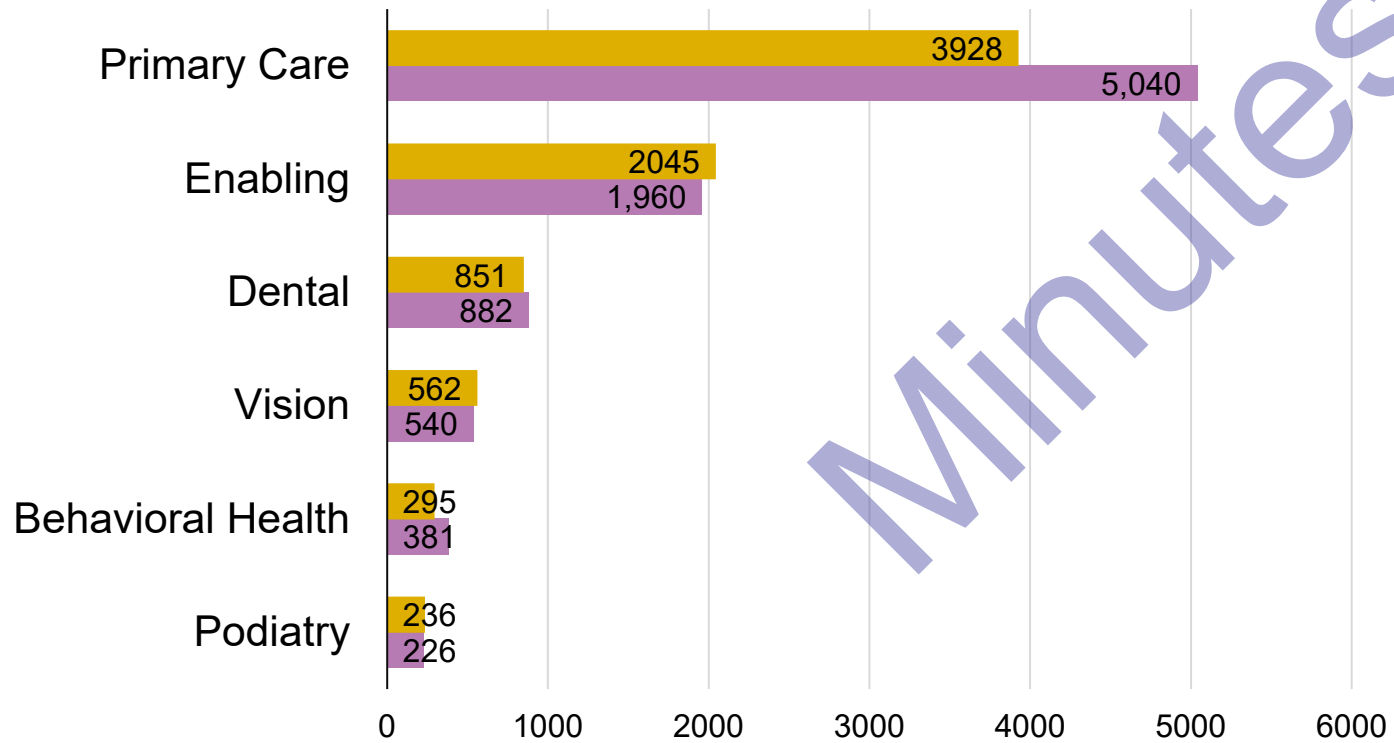
Homeless Status by Age

■ Doubling Up ■ Homeless Shelter ■ Other ■ Permanent Supportive Housing ■ Street ■ Transitional ■ Unknown



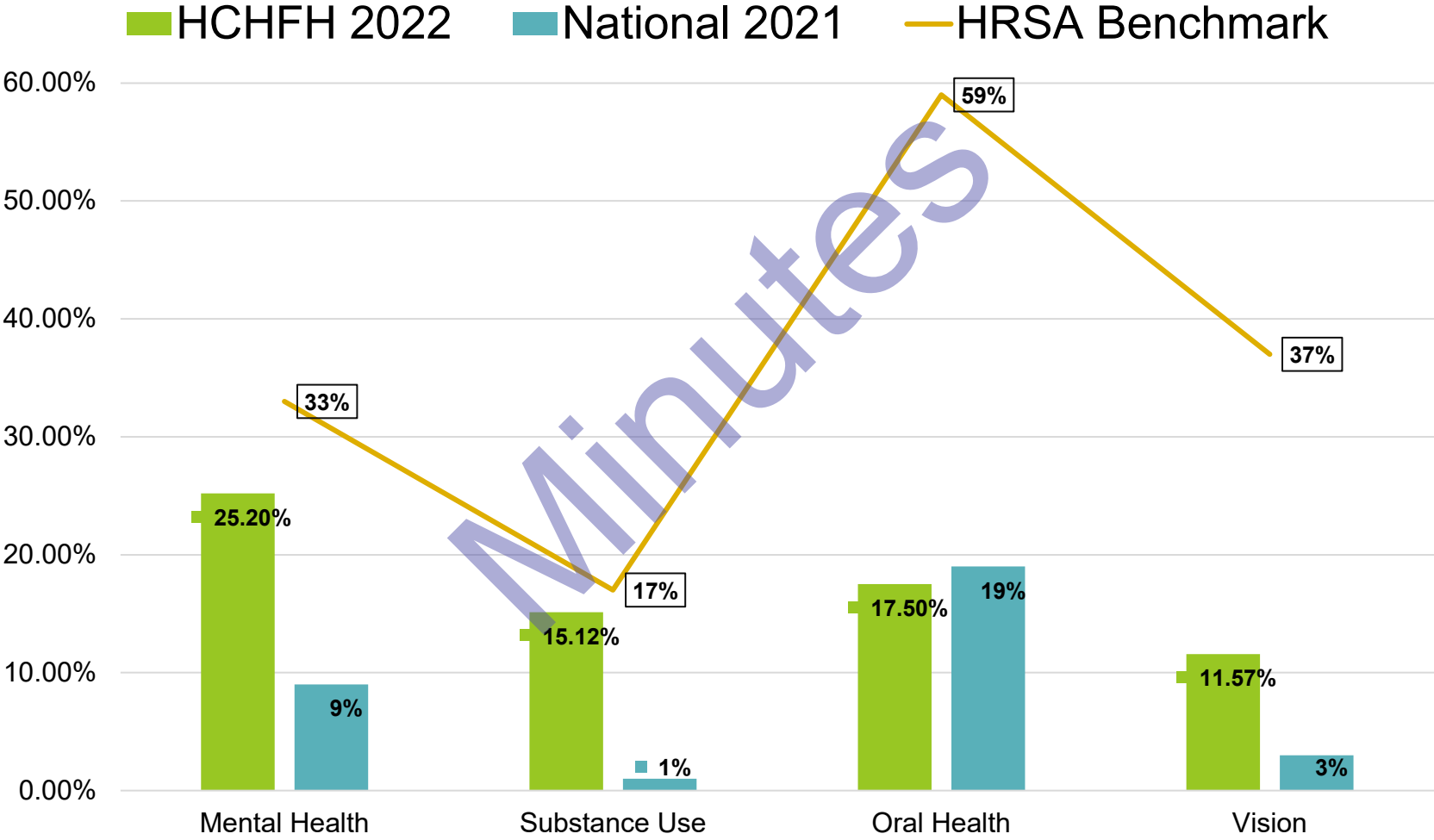
Number of patients by Service Utilization

2022 vs 2021



Total Patients
4,854

Service Utilization Comparison



Insurance Status

HRSA Categories

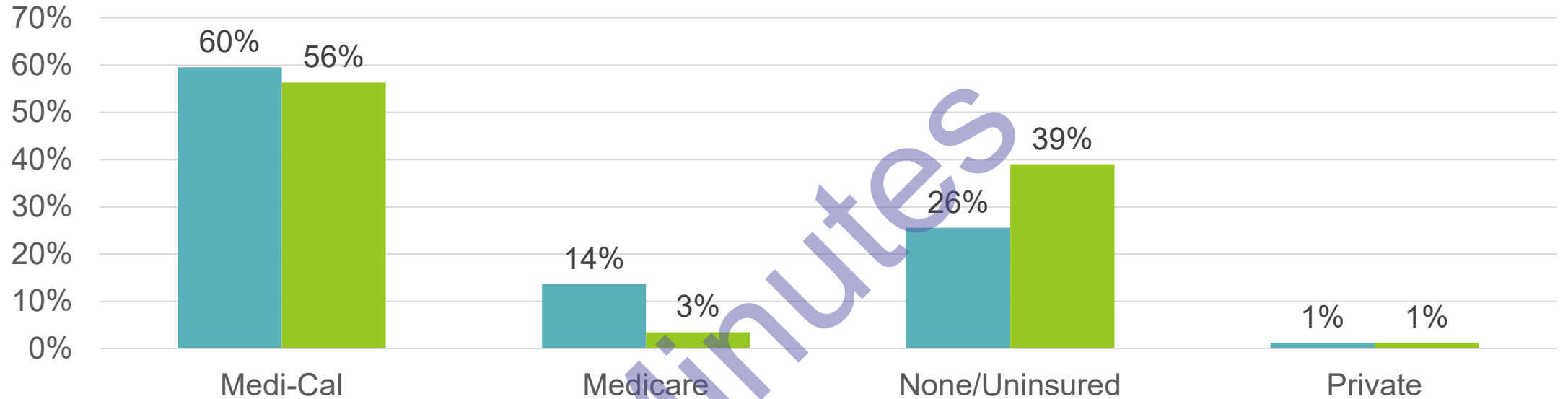
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|-----------------|-------------|
| Medi-Cal: | 2856 (59%) |
| None/Uninsured: | 1385 (29%) |
| Medicare: | 554 (11%) |
| Private: | 59 (1.21%) |
| Total: | 4854 |

Uninsured

| | |
|-------------------------------------|------------|
| ACE: | 439 (9%) |
| Charity: | 421 (8.7%) |
| Government/ County programs: | 230 (4.7%) |
| Uninsured: | 174 (3.6%) |
| <small>(5 Medi-Cal Pending)</small> | |
| Unknown: | 91 (1.9%) |
| Self-pay: | 30 (0.6%) |

Insurance Status by Population

■ HCH ■ FH



HCH

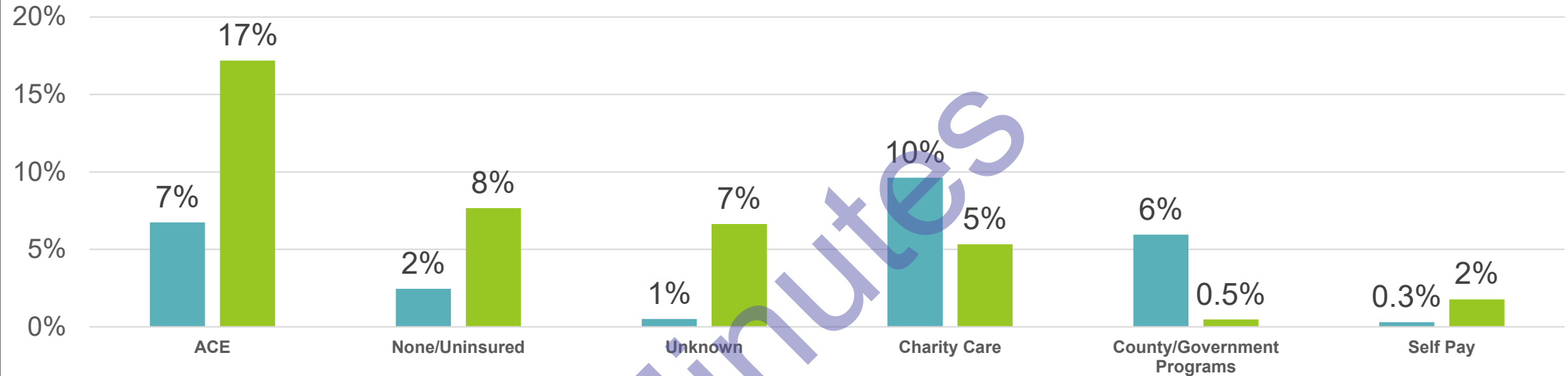
| | | |
|-----------------|-------------|---------------|
| Medi-Cal: | 2253 | (60%) |
| Medicare: | 517 | (14%) |
| None/Uninsured: | 967 | (26%) |
| Private: | 46 | (1.2%) |
| Total: | 3783 | (100%) |

FH

| | | |
|-----------------|-------------|---------------|
| Medi-Cal: | 603 | (56%) |
| Medicare: | 37 | (3%) |
| None/Uninsured: | 418 | (39%) |
| Private: | 13 | (1%) |
| Total: | 1071 | (100%) |

Uninsured Status by Population

■ HCH ■ FH



HCH

| | |
|----------------------------|------------------|
| ACE | 255 (7%) |
| None/Uninsured | 93 (2%) |
| Unknown | 19 (1%) |
| Charity Care | 364 (10%) |
| County/Government Programs | 255 (6%) |
| Self Pay | 11 (0.3%) |
| HCH % of Total | 967 (26%) |

FH

| | |
|----------------------------|------------------|
| ACE | 184 (17%) |
| None/Uninsured | 82 (8%) |
| Unknown | 71 (7%) |
| Charity Care | 57 (5%) |
| County/Government Programs | 5 (0.5%) |
| Self Pay | 19 (2%) |
| FH % of Total | 418 (39%) |

Tab 2

Contracts and
MOUs update



TO: Co-Applicant Board Finance Sub-Committee, San Mateo County Health
Care for the Homeless/ Farmworker Health (HCH/FH) Program

FROM: Meron Asfaw, Community Program Coordinator

DATE: June 8th, 2023

SUBJECT: Update on HCH/FH Contracts & MOUs

I am writing to provide you with a comprehensive update on the status of the contractors and MOUs associated with the HCH/FH program. As you are aware, the HCH/FH program has collaborated with several County departments and community-based organizations to offer primary care, behavioral health, enabling, and dental services to people experiencing homelessness, farmworkers, and their dependents. Please find below a detailed description of each contractor's status update for May 2023:

1. **Abode Services:** No update
2. **Ayudando Latinos a Soñar (ALAS):** HCH/FH staff met with ALAS's promotores this month to discuss the program and identify any areas of support. The team mentioned that there has been an increase in health coverage enrollment. There is a high waitlist to be enrolled for the health coverage. One staff from the Health Coverage Unit (HCU) visits ALAS once a week for half a day, but the waitlist is still high. HCH/FH staff is in conversation with HCU to address this issue. HCU team will join the next month's check-in meeting with ALAS to discuss and address this issue. ALAS mentioned that the Express Bus is visiting farms and is up and running. HCH/FH staff and any interested board members will visit the bus after the board meeting on June 8th.
3. **Behavioral Health & Recovery Services (BHRS): No update**
4. **LifeMoves:** HCH/FH staff met with LifeMoves this month. LifeMoves filled the Assistance Director position and is now fully staffed. The team discussed the referrals process with MHPC clinic, which has been working well. LifeMoves provides different types of training for the staff, which includes Motivational Interviewing, Trauma Informed care, etc., which helps the team to understand and know how to engage with the population in a better way. LifeMoves is interested in theory/model-based trainings.
2. **Public Health Policy & Planning (PHPP):** HCH/FH staff held an introductory meeting with PHPP and the Half Moon Bay Library. The Half Moon Bay library managers joined the monthly check-in meetings and shared the resources they offer, and the services needed for the unhoused individuals that attend the library on a daily basis. The Street medicine team will visit the HMB Library to see the library and assess the need. Eventually, Street medicine will schedule a visit the library to provide primary health care for the unhoused individuals that visit the library. Moreover, the HMB library will make



introductions and connections with other libraries so that the street and mobile clinic can partner with them.

3. **Puente: No update**

4. **Sonrisas:** Sonrisas is currently located at Puente, but due to space constraints, they need to move out by the end of May. The last clinic was held at Pescadero on May 31. Sonrisas team and Puente have identified a space in La Honda that has been approved by the Sonrisas dental provider. While the contract is for services in Pescadero, due to the lack of available space there, the HCH/FH team has approved the La Honda location as a temporary solution. However, the team is actively looking for a space in Pescadero. It has been communicated that no patients in this contract will be seen at the Half Moon Bay Sonrisas clinic, and clients will be referred to Coastside Dental Service if they are coming to Half Moon Bay. The first clinic in La Honda was on June 7th.

5. **Saturday Dental Clinic at Coastside Clinic:** ALAS team has been calling patients in the waiting list to make sure they are still interested in the program. Moreover, patients without insurance will be prioritized in the Saturday Dental Clinic.

Tab 3

Budget and Finance Report



San Mateo Medical Center
222 W 39th Avenue
San Mateo, CA 94403
650-573-2222 T
smchealth.org/smmc

DATE: June 08, 2023

TO: Co-Applicant Board, San Mateo County Health Care for the Homeless/Farmworker Health (HCH/FH) Program

FROM: Jim Beaumont
Director, HCH/FH Program

SUBJECT: HCH/FH PROGRAM BUDGET and FINANCIAL REPORT

As we continue to move farther into our Grant Year (GY), we can see that our expenditures are beginning to track much closer to expectations. For May, we are showing expenditures of \$210,910 against the grant, with very little of our contractor invoices getting posted in time to make the report.

Overall, for the year, our grant expenditures are at \$1,425,145, and we currently project a final expenditure of approximately \$3.6 million. This can be easily handled due to the increase in unexpended funds from GY 22 due to staff turnover, delayed invoicing, and some underperformance from contractors. Our carryover into this year is now expected to be around \$1.6 million. Spending \$3.6 million for this GY will put us back closer to our planned spend-down across the 2021-2024 timeframe.

Our preliminary expenditure projection for the 2023 Grant Year (GY) will leave us with around \$834,196 in unexpended funding when compared to our total funds for the year (base grant award plus carryover from GY 2022). While higher than planned, it is a significant reduction from GY 22.

Attachment:

- GY 2023 Summary Grant Expenditure Report Through 05/31/23



GRANT YEAR 2023

May \$\$

| Details for budget estimates | Budgeted [SF-424] | | To Date (05/31/23) | Projection for end of year | Projected for GY 2024 |
|--|----------------------|------------------|--------------------------------------|-------------------------------|---|
| EXPENDITURES | | | | | |
| <u>Salaries</u> | | | | | |
| Director, Program Coordinator Management Analyst ,Medical Director new position, misc. OT, other, etc. | 721,000 | 63,304 | 285,570 | 760,350 | 798,375 |
| <u>Benefits</u> | | | | | |
| Director, Program Coordinator Management Analyst ,Medical Director new position, misc. OT, other, etc. | 270,000 | 26,190 | 120,861 | 317,286 | 330,000 |
| <u>Travel</u> | | | | | |
| National Conferences (2500*8) | 15,000 | 1,979 | 1,979 | 29,000 | 35,000 |
| Regional Conferences (1000*5) | 5,000 | | | 8,000 | 10,000 |
| Local Travel | 1,500 | | | 500 | 1,000 |
| Taxis | 1,000 | | 108 | 500 | 500 |
| Van & vehicle usage | 1,500 | | 311 | 1,000 | 1,500 |
| | 24,000 | | 2,398 | 39,000 | 48,000 |
| <u>Supplies</u> | | | | | |
| Office Supplies, misc. Small Funding Requests | 10,000 | | | 10,000 | 10,000 |
| | 10,000 | | 0 | 10,000 | 10,000 |
| <u>Contractual</u> | | | | | |
| 2021 Contracts | | | 27,691 | 27,691 | |
| 2021 MOUs | | | 412,500 | 412,500 | |
| Current 2022 MOUs | 1,241,000 | | 315,790 | 1,175,000 | 1,200,000 |
| Current 2022 contracts | 865,979 | 109,450 | 222,297 | 825,000 | 825,000 |
| ---unallocated---/other contracts | | | | | |
| | 2,106,979 | | 978,278 | 2,440,191 | 2,025,000 |
| <u>Other</u> | | | | | |
| Consultants/grant writer | 40,000 | | 35,444 | 55,000 | 25,000 |
| IT/Telcom | 4,200 | 987 | 3,631 | 15,000 | 30,000 |
| New Automation | | | | 0 | - |
| Memberships | 2,000 | | 2,875 | 7,500 | 5,000 |
| Training | 5,000 | | | 5,000 | 20,000 |
| Misc | | | 88 | 1,500 | 1,500 |
| | 51,200 | | 42,038 | 84,000 | 81,500 |
| TOTAL | 3,183,179 | 201,910 | 1,429,145 | 3,650,827 | 3,292,875 |
| <u>GRANT REVENUE</u> | | | | | |
| Available Base Grant | 2,858,632 | | 2,858,632 | 2,858,632 | 2,858,632 |
| Carryover | 1,626,391 | | 1,626,391 | 1,626,391 estimate | |
| Available Expanded Services Awards ** | | | | | 834,196 carryover |
| HCH/FH PROGRAM TOTAL | 4,485,023 | | 4,485,023 | 4,485,023 | 3,692,828 |
| <u>BALANCE</u> | 1,301,844 | Available | 3,055,878 Current Estimate | 834,196 Projected | 399,953 based on est. grant of \$2,858,632 |
| <u>Non-Grant Expenditures</u> | | | | | |
| Salary Overage | 13,750 | 2,100 | 9,712 | 35,000 | 45,000 |
| Health Coverage | 57,000 | 7,236 | 34,732 | 80,000 | 90,000 |
| base grant prep | 60,000 | | | 50,000 | |
| food | 2,500 | | | 2,500 | 1,500 |
| incentives/gift cards | 1,000 | | | 1,000 | 1,500 |
| | 134,250 | | 44,444 | 168,500 | 138,000 |
| TOTAL EXPENDITURES | 3,317,429 | | 1,473,589 | 3,819,327 | NEXT YEAR 3,430,875 |

Tab 4

Quality Improvement/
Quality Assurance
Updates



DATE: June 8, 2023

TO: Co-Applicant Board, San Mateo County Health Care for the Homeless/Farmworker Health (HCH/FH) Program

FROM: Frank Trinh, Medical Director HCH/FH Program
Alejandra Alvarado, Clinical Services Coordinator HCH/FH Program

SUBJECT: QI/QA COMMITTEE REPORT

- **Homeless Mortality Data**

- HCH/FH Program working with San Mateo County Public Health Epidemiology and homeless service providers to accurately collect County homeless mortality data. Public Health Epidemiology will be accessing all County Health patient data to aid in identifying deaths in homeless persons over the past 10 years. Public Health Epidemiology will be working with HSA to intersect vital statistics records with HMIS database to identify deaths in people experiencing homelessness. Public Health Epidemiology is targeting the end of 2023 to release a report on their findings. HCH/FH Program will continue to work with Public Health Epidemiology as they work towards finalizing their report.

- **2023 Clinical Quality Metrics**

- 2023 Clinical Quality Metrics Q1 data should be available around mid-June, after working with the BI team to retrieve available reports. These reports will be analyzed, and the quality metrics data will be reported once analysis is finalized, likely in an upcoming HCH/FH QI/QA Committee meeting.

- **Cancer Screenings Project**

- HCH/FH program is collaborating with SMMC Population Health to evaluate detectable health disparities among farmworkers and people experiencing homelessness at SMMC. An analysis will be conducted between the HCH/FH patient population in comparison to the SMMC general patient population, to evaluate health disparities among cancer screenings and prevalence of cancer diagnosis between both patient populations.

- **Half Moon Bay Library- BP Cuffs**

- HCH/FH program is partnering with the Half Moon Bay library to provide blood pressure kits to library patrons, targeting library attendees who are farmworkers and people experiencing homelessness. A proposal between HCH/FH program and Half Moon Bay library is being drafted, with the goal to initiate the project in a couple of months.

Tab 5

HCH/FH's Director Report



SAN MATEO COUNTY HEALTH
**SAN MATEO
MEDICAL CENTER**

San Mateo Medical Center
222 W 39th Avenue
San Mateo, CA 94403
650-573-2222 T
smchealth.org/smmc

DATE: June 08, 2023

TO: Co-Applicant Board, San Mateo County Health Care for the Homeless/Farmworker Health (HCH/FH) Program

FROM: Jim Beaumont Director, HCH/FH Program

SUBJECT: DIRECTOR'S REPORT & PROGRAM CALENDAR

Program activity update since the May 11, 2023, Co-Applicant Board meeting:

Program is in the process of completing the agreement with the selected grant writing consultant and have begun the work on the Service Area Competition (SAC) grant submission. Deadline for the submission is July 26th. At today's meeting, the Board will take up the approval of the Program's scope in the approval request for Forms 5A, 5B and 5C, representing the Program's Services, Sites and Other Locations/Services, which also become part of the SAC submission. At next months meeting, the Board will be requested to provide preliminary approval for the grant application submission, and, as a part of that, will be approving the budget for Grant Year (GY) 2024. There may also be requested approvals for review and/or updates to some of the Program's Policies and Procedures as part of the SAC submission approval.

The HCH/FH Program continues to work with Health Administration, PHPP, LifeMoves and HiA (Healthcare in Action) in preparing for the opening of the County Homeless Navigation Center. We are also continued to work with Health Administration on assisting with the equipment needs for the Navigation Center medical and dental clinics. We continue to move forward with the contract with University of Pacific for dental services at the Navigation Center, and in accessing additional donation funding for other potential services such as Optometry, Audiology and Podiatry. We have been informed of a grant award from Kaiser for \$75,000, are in the process of preparing the documents to accept and process a \$450,000 award across 5 years from Sequoia Healthcare District and are working on a request to Stanford.

The HCH/FH Program supported a Board member along with a number of staff and program partners to attend a range of homeless and farmworker health conferences over the past two months. As with last month's report, today and next month's meetings will also feature report to the Board from attendees to bring new information and insights to the Board.

Seven Day Update

ATTACHED:

- Program Calendar





2023 Calendar - County of San Mateo Health Care for the Homeless & Farmworker Health (HCH/FH) Program

Board meetings are in-person on the 2nd Thursday of the Month 10am-12pm

| Month | Events |
|-----------|---|
| January | <ul style="list-style-type: none"> HCH/FH Board's first meeting of the year HCH/FH Board will vote on new time change for the board meeting |
| February | <ul style="list-style-type: none"> Initial UDS Submission: February 15, 2023 2023 Western Forum for Migrant and Community Health, February 14-16, Long Beach, CA. https://www.nwrpca.org/events/event_details.asp?legacy=1&id=1670924 |
| March | <ul style="list-style-type: none"> HCH/FH Board will return to an in-person meeting. Location: SMMC Education Room 2 Sliding Fee Discount Scale (SFDS)-Approve |
| April | <ul style="list-style-type: none"> East Coast Migrant Health Stream, Orlando FLA; sponsored by North Carolina Comm Health Center Assoc. April 5-7 Midwest Stream Forum on Agricultural Worker Health, Austin, TX; sponsored by National Center for Farmworker Health, April 24-26 SMMC Annual Audit – Approve In-person meeting location: County Building Room 101 455 County Center Redwood City, CA 94063 |
| May | <ul style="list-style-type: none"> 2023 National Conference for Agricultural Worker Health, Seattle WA; sponsored by National Association of Community Health Centers (NACHC), May 2-4. National Health Care for the Homeless Conference and Policy Symposium, May 15-18, Baltimore, Maryland https://nhchc.org/trainings/conferences/ |
| June | <ul style="list-style-type: none"> Services/Locations Form 5A/5B – Approve In-person meeting location: Half Moon Bay Library 620 Correas St, Half Moon Bay, CA 94019 (Half Moon Bay Library) |
| July | |
| August | |
| September | |
| October | |
| November | |
| December | |

| BOARD ANNUAL CALENDAR | |
|---|---|
| Project | Timeframe |
| UDS Submission – Review | Spring |
| SMMC Annual Audit – Approve | April/May |
| Services/Locations Form 5A/5B – Approve | June/July |
| Budget Renewal - Approve | July/Sept (program)– December/January (grant) |
| Annual Conflict of Interest Statement | October (and during new appointments) |
| Annual QI/QA Plan – Approve | Winter |
| Board Chair/Vice Chair Elections | November/December |
| Program Director Annual Review | Fall/Spring |
| Sliding Fee Discount Scale (SFDS) | Spring |
| Strategic Plan Target Overview | December |

Tab 6

Review & Approve Forms
5A (Services), B (Sites) and
C (Other Activities &
Locations)

DATE: June 08, 2022

TO: Co-Applicant Board, San Mateo County Health Care for the Homeless/Farmworker Health (HCH/FH) Program

FROM: Jim Beaumont, Director
HCH/FH Program

SUBJECT: REQUEST FOR THE BOARD TO TAKE ACTION TO APPROVE HRSA SCOPE OF PROJECT FORMS 5A – SERVICES, FORM 5B – SITES, & FORM 5C – OTHER ACTIVITIES & LOCATIONS

Under the Bylaws Article 3.E, the Board has the authority and responsibility to set the scope and availability of services to be delivered by and the location and hours of operation of the Program. This responsibility is also articulated in the HRSA Health Center Program Compliance Manual, Chapter 4 Required and Additional Health Services, Chapter 6 Accessible Hours and Locations and Chapter 19 Board Authority. The Co-Applicant Board reviews and approves the Program's Scope of Project as represented by Forms 5A, 5B & 5C on an annual basis.

Attached are the last Board approved Form 5A – Services, Form 5B – Sites, and Form 5C – Other Activities & Locations for Board approval. There are no current requested changes to these documents.

This request is for the Board to review and accept the Forms. Approval of this item requires a majority vote of the Board members present.

Attachments:

- HCH/FH Form 5A (current)
- HCH/FH Form 5B (current)
- HCH/FH Form 5C (current)

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Self Updates: Services details

▼ **H80CS00051: SAN MATEO COUNTY HEALTH SERVICES AGENCY, San Mateo, CA**

Grant Number: H80CS00051

BHCMIS ID: 091140

Project Period: 11/01/2001 - 12/3

Budget Period: 01/01/2022 - 12/31/2022

▼ **Resources**

View

[Form 5A](#) | [Form 5B](#) | [Form 5C](#)

Pending Approved Changes

| Required Services | Additional Services | Specialty Services |
|------------------------------|------------------------------|------------------------------|
| Pending Approved Changes (0) | Pending Approved Changes (0) | Pending Approved Changes (1) |

Approved Required Services

| Service Type | Service Delivery Methods | | |
|---|---------------------------------------|---|--|
| | Column I. Direct (Health Center Pays) | Column II. Formal Written Contract/Agreement (Health Center Pays) | Column III. Form Referral Arrang (Health Center D pay) |
| General Primary Medical Care | X | | |
| Diagnostic Laboratory | X | | |
| Diagnostic Radiology | X | | |
| Screenings | X | | |
| Coverage for Emergencies During and After Hours | X | | |
| Voluntary Family Planning | X | | |
| Immunizations | X | | |
| Well Child Services | X | | |
| Gynecological Care | X | | |
| Obstetrical Care | | | |
| Prenatal Care | X | | |
| Intrapartum Care (Labor & Delivery) | X | | |
| Postpartum Care | X | | |
| Preventive Dental | X | | |
| Pharmaceutical Services | X | | |
| HCH Required Substance Use Disorder Services | X | X | |
| Case Management | X | X | |
| Eligibility Assistance | X | X | |

| Service Type | Service Delivery Methods | | |
|------------------|---------------------------------------|---|--|
| | Column I. Direct (Health Center Pays) | Column II. Formal Written Contract/Agreement (Health Center Pays) | Column III. Form Referral Arrang (Health Center D pay) |
| Health Education | X | X | |
| Outreach | X | X | |
| Transportation | X | X | |
| Translation | X | X | |

| Approved Additional Services | | | |
|------------------------------|---------------------------------------|---|--|
| Service Type | Service Delivery Methods | | |
| | Column I. Direct (Health Center Pays) | Column II. Formal Written Contract/Agreement (Health Center Pays) | Column III. Form Referral Arrang (Health Center D pay) |
| Additional Dental Services | X | X | |

| Behavioral Health Services | | | |
|-------------------------------|---------------------------------------|---|--|
| Service Type | Service Delivery Methods | | |
| | Column I. Direct (Health Center Pays) | Column II. Formal Written Contract/Agreement (Health Center Pays) | Column III. Form Referral Arrang (Health Center D pay) |
| Mental Health Services | X | X | |
| Optometry | X | | |
| Environmental Health Services | X | | |
| Occupational Therapy | X | | |
| Physical Therapy | X | | |
| Nutrition | X | | |

| Approved Specialty Services | | | |
|-----------------------------|---------------------------------------|---|--|
| Service Type | Service Delivery Methods | | |
| | Column I. Direct (Health Center Pays) | Column II. Formal Written Contract/Agreement (Health Center Pays) | Column III. Form Referral Arrang (Health Center D pay) |
| Podiatry | X | | |
| Psychiatry | X | | |
| Ophthalmology | X | | |
| Cardiology | X | X | |
| Dermatology | X | X | |
| Gastroenterology | X | | |
| Other - Hepatology | X | | |
| Other - Neurology | X | | |
| Other - Orthopedics | X | | |
| Endocrinology | | X | |
| Rheumatology | | X | |
| Nephrology | | X | |

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Product: SCP | **Platform #:** 4.9.60.0 | **Build #:** 4.6.0.11 | **Environment:**

Last Login: 05/23/22 4:46:00 PM ET

 **Self Updates: Site details**
▼ H80CS00051: SAN MATEO COUNTY HEALTH SERVICES AGENCY, San Mateo, CA

Grant Number: H80CS00051

BHCNIS ID: 091140

Project Period: 11/01/2001 - 12/31/2023

Budget Period: 01/01/2022 - 12/31/2022

| Site Id: BPS-H80-000552 | | Site Status | |
|---|--|---|---|
| Site Information | | | |
| Site Name | COASTSIDE MENTAL HEALTH CENTER | Physical Site Address | 225 Cabrillo Hwy S FL 2, Half M Bay, CA 94019 |
| Site Type | Service Delivery Site | Site Phone Number | (650) 726-6369 |
| Web URL | | | |
| Location Type | Permanent | Site Setting | All Other Clinic Types |
| Date Site was Added to Scope | 05/01/1998 | Site Operational Date | 05/01/1998 |
| FQHC Site Medicare Billing Number Status | Application for this site has not yet been submitted to CMS | Medicare Billing Number (Required if "This site has a Medicare billing number" is selected in 'FQHC Site Medicare Billing Number Status' field.) | |
| FQHC Site National Provider Identification (NPI) Number (Optional field) | | Total Hours of Operation (when Patients will be Served per Week) | 40.00 |
| Saved Months of Operation | January, February, March, April, May, June, July, August, September, October, November, December | | |
| Number of Contract Service Delivery Locations (Required only for 'Migrant Voucher Screening' Site Type) | | Number of Intermittent Sites (Required only for 'Intermittent' Site Type) | |
| Site Operated by | Health Center/Applicant | | |
| Subrecipient or Contractor Information (Required only if 'Subrecipient or Contractor' is selected in 'Site Operated By' field) | | | |
| Subrecipient/Contractor Organization Name | Subrecipient/Contractor Organization | Physical Site Address | Subrecipient/Contract |
| No Subrecipient or Contractor information to be displayed | | | |
| Service Area Zip Code (Include only those from which the majority of the patient population will come) | | | |
| Saved Service Area Zip Code(s) | 94019 | | |

| Site Id: BPS-H80-000595 | | Site Status | |
|-------------------------|---|-----------------------|-------------------------------|
| Site Information | | | |
| Site Name | 39th Avenue Campus - Outpatient Clinics | Physical Site Address | 222 W 39th Ave, San Mateo, CA |
| Site Type | Service Delivery Site | Site Phone Number | (650) 573-2222 |
| Web URL | www.co.sanmateo.ca.us | | |
| Location Type | Permanent | Site Setting | All Other Clinic Types |

| | | | |
|---|--|--|------------|
| Date Site was Added to Scope | 01/01/1994 | Site Operational Date | 01/01/1970 |
| FQHC Site Medicare Billing Number Status | This site has a Medicare billing number | Medicare Billing Number (Required if "This site has a Medicare billing number" is selected in 'FQHC Site Medicare Billing Number Status' field.) | 751904 |
| FQHC Site National Provider Identification (NPI) Number (Optional field) | 1932288859 | Total Hours of Operation (when Patients will be Served per Week) | 40.00 |
| Saved Months of Operation | January, February, March, April, May, June, July, August, September, October, November, December | | |
| Number of Contract Service Delivery Locations (Required only for 'Migrant Voucher Screening' Site Type) | | Number of Intermittent Sites (Required only for 'Intermittent' Site Type) | |
| Site Operated by | Health Center/Applicant | | |

Subrecipient or Contractor Information (Required only if 'Subrecipient or Contractor' is selected in 'Site Operated By' field)

| Subrecipient/Contractor Organization Name | Subrecipient/Contractor Organization Physical Site Address | Subrecipient/Contract |
|---|--|-----------------------|
| No Subrecipient or Contractor information to be displayed | | |

Service Area Zip Code (Include only those from which the majority of the patient population will come)

Saved Service Area Zip Code(s) 94403

Site Id: BPS-H80-000785

Site Statu

| Site Information | | | |
|---|--|--|--|
| Site Name | CENTRAL COUNTY MENTAL HEALTH CTR | Physical Site Address | 1950 Alameda de las Pulgas, Sa Mateo, CA 94403 |
| Site Type | Service Delivery Site | Site Phone Number | (650) 573-3571 |
| Web URL | | | |
| Location Type | Permanent | Site Setting | All Other Clinic Types |
| Date Site was Added to Scope | 07/31/2004 | Site Operational Date | 07/31/2004 |
| FQHC Site Medicare Billing Number Status | Application for this site has not yet been submitted to CMS | Medicare Billing Number (Required if "This site has a Medicare billing number" is selected in 'FQHC Site Medicare Billing Number Status' field.) | |
| FQHC Site National Provider Identification (NPI) Number (Optional field) | | Total Hours of Operation (when Patients will be Served per Week) | 40.00 |
| Saved Months of Operation | January, February, March, April, May, June, July, August, September, October, November, December | | |
| Number of Contract Service Delivery Locations (Required only for 'Migrant Voucher Screening' Site Type) | | Number of Intermittent Sites (Required only for 'Intermittent' Site Type) | |
| Site Operated by | Health Center/Applicant | | |

| Subrecipient or Contractor Information (Required only if 'Subrecipient or Contractor' is selected in 'Site Operated By' field) | |
|--|--|
| Subrecipient/Contractor Organization Name | Subrecipient/Contractor Organization Physical Site Address |
| No Subrecipient or Contractor information to be displayed | |
| Service Area Zip Code (Include only those from which the majority of the patient population will come) | |
| Saved Service Area Zip Code(s) | 94403, 94402, 94401 |

| Site Id: BPS-H80-001005 | | Site Status | |
|--|--|---|---|
| Site Information | | | |
| Site Name | HEALTH SERVICES AGENCY MENTAL HEALTH DIVISION | Physical Site Address | 225 37th Ave Mental Health Sen 3rd Floor, San Mateo, CA 94403 |
| Site Type | Administrative | Site Phone Number | (650) 573-2541 |
| Web URL | www.co.sanmateo.ca.us | | |
| Location Type | Permanent | Site Setting | All Other Clinic Types |
| Date Site was Added to Scope | 01/03/2001 | Site Operational Date | 01/03/2001 |
| FQHC Site Medicare Billing Number Status | Health center does not/will not bill under the FQHC Medicare system at this site | Medicare Billing Number (Required if "This site has a Medicare billing number" is selected in 'FQHC Site Medicare Billing Number Status' field.) | |
| FQHC Site National Provider Identification (NPI) Number (Optional field) | | Total Hours of Operation (when Patients will be Served per Week) | 40.00 |
| Saved Months of Operation | January, February, March, April, May, June, July, August, September, October, November, December | | |
| Number of Contract Service Delivery Locations (Required only for 'Migrant Voucher Screening' Site Type) | | Number of Intermittent Sites (Required only for 'Intermittent' Site Type) | |
| Site Operated by | Health Center/Applicant | | |

| Subrecipient or Contractor Information (Required only if 'Subrecipient or Contractor' is selected in 'Site Operated By' field) | |
|--|--|
| Subrecipient/Contractor Organization Name | Subrecipient/Contractor Organization Physical Site Address |
| No Subrecipient or Contractor information to be displayed | |
| Service Area Zip Code (Include only those from which the majority of the patient population will come) | |
| Saved Service Area Zip Code(s) | 94403 |

| Site Id: BPS-H80-001373 | | Site Status | |
|-------------------------|----------------------------|-----------------------|--|
| Site Information | | | |
| Site Name | SOUTH SAN FRANCISCO CLINIC | Physical Site Address | 306 SPRUCE STREET, SOUTH FRANCISCO, CA 94080 |
| Site Type | Service Delivery Site | Site Phone Number | (650) 877-7070 |
| Web URL | www.co.sanmateo.ca.us | | |
| Location Type | | Site Setting | |

| | | | |
|---|--|--|------------------------|
| | Permanent | | All Other Clinic Types |
| Date Site was Added to Scope | 11/01/1999 | Site Operational Date | 01/10/1999 |
| FQHC Site Medicare Billing Number Status | This site has a Medicare billing number | Medicare Billing Number (Required if "This site has a Medicare billing number" is selected in 'FQHC Site Medicare Billing Number Status' field.) | 751905 |
| FQHC Site National Provider Identification (NPI) Number (Optional field) | 1750460671 | Total Hours of Operation (when Patients will be Served per Week) | 40.00 |
| Saved Months of Operation | January, February, March, April, May, June, July, August, September, October, November, December | | |
| Number of Contract Service Delivery Locations (Required only for 'Migrant Voucher Screening' Site Type) | | Number of Intermittent Sites (Required only for 'Intermittent' Site Type) | |
| Site Operated by | Health Center/Applicant | | |
| Subrecipient or Contractor Information (Required only if 'Subrecipient or Contractor' is selected in 'Site Operated By' field) | | | |
| Subrecipient/Contractor Organization Name | Subrecipient/Contractor Organization Physical Site Address | Subrecipient/Contract | |
| No Subrecipient or Contractor information to be displayed | | | |
| Service Area Zip Code (Include only those from which the majority of the patient population will come) | | | |
| Saved Service Area Zip Code(s) | 94080 | | |

| | | | |
|---|--|--|--|
| Site Id: BPS-H80-002922 | | | Site Statu |
| Site Information | | | |
| Site Name | MAPLE STREET SHELTER | Physical Site Address | 1580 A MAPLE STREET, REDW CITY, CA 94603 |
| Site Type | Service Delivery Site | Site Phone Number | (650) 364-4664 |
| Web URL | www.shelternetwork.com | | |
| Location Type | Permanent | Site Setting | All Other Clinic Types |
| Date Site was Added to Scope | 01/07/2006 | Site Operational Date | 01/07/2006 |
| FQHC Site Medicare Billing Number Status | Application for this site has not yet been submitted to CMS | Medicare Billing Number (Required if "This site has a Medicare billing number" is selected in 'FQHC Site Medicare Billing Number Status' field.) | |
| FQHC Site National Provider Identification (NPI) Number (Optional field) | | Total Hours of Operation (when Patients will be Served per Week) | 40.00 |
| Saved Months of Operation | January, February, March, April, May, June, July, August, September, October, November, December | | |
| Number of Contract Service Delivery Locations (Required only for 'Migrant Voucher Screening' Site Type) | | Number of Intermittent Sites (Required only for 'Intermittent' Site Type) | |
| Site Operated by | Contractor | | |

| Subrecipient or Contractor Information (Required only if 'Subrecipient or Contractor' is selected in 'Site Operated By' field) | | |
|--|--|-----------------------|
| Subrecipient/Contractor Organization Name | Subrecipient/Contractor Organization Physical Site Address | Subrecipient/Contract |
| Shelter Network of San Mateo County | 1450 Chapin Ave, Burlingame, CA 94010 | 77-0160469 |

| Service Area Zip Code (Include only those from which the majority of the patient population will come) | |
|--|-------|
| Saved Service Area Zip Code(s) | 94063 |

Site Id: BPS-H80-006870 Site Status

| Site Information | | | |
|--|--|---|---|
| Site Name | Coastside Health Center | Physical Site Address | 225 Cabrillo Hwy S Ste 100A, He Moon Bay, CA 94019 |
| Site Type | Service Delivery Site | Site Phone Number | (650) 573-3941 |
| Web URL | www.sanmateo.ca.us | | |
| Location Type | Permanent | Site Setting | All Other Clinic Types |
| Date Site was Added to Scope | 01/05/1998 | Site Operational Date | 01/05/1998 |
| FQHC Site Medicare Billing Number Status | This site has a Medicare billing number | Medicare Billing Number (Required if "This site has a Medicare billing number" is selected in 'FQHC Site Medicare Billing Number Status' field.) | 751898 |
| FQHC Site National Provider Identification (NPI) Number (Optional field) | 1841379765 | Total Hours of Operation (when Patients will be Served per Week) | 40.00 |
| Saved Months of Operation | January, February, March, April, May, June, July, August, September, October, November, December | | |
| Number of Contract Service Delivery Locations (Required only for 'Migrant Voucher Screening' Site Type) | | Number of Intermittent Sites (Required only for 'Intermittent' Site Type) | |
| Site Operated by | Health Center/Applicant | | |

| Subrecipient or Contractor Information (Required only if 'Subrecipient or Contractor' is selected in 'Site Operated By' field) | | |
|--|--|-----------------------|
| Subrecipient/Contractor Organization Name | Subrecipient/Contractor Organization Physical Site Address | Subrecipient/Contract |
| No Subrecipient or Contractor information to be displayed | | |

| Service Area Zip Code (Include only those from which the majority of the patient population will come) | |
|--|-------|
| Saved Service Area Zip Code(s) | 94019 |

Site Id: BPS-H80-009159 Site Status

| Site Information | | | |
|------------------|------------------------------|-----------------------|-----------------------------------|
| Site Name | sequoia teen wellness center | Physical Site Address | 200 JAMES AVE, REDWOOD C 94062 |
| Site Type | Service Delivery Site | Site Phone Number | (650) 261-3710 |

| | | | |
|---|--|--|------------|
| Web URL | www.sanmateo.ca.us | | |
| Location Type | Permanent | Site Setting | School |
| Date Site was Added to Scope | 11/05/2009 | Site Operational Date | 04/01/2009 |
| FQHC Site Medicare Billing Number Status | This site has a Medicare billing number | Medicare Billing Number (Required if "This site has a Medicare billing number" is selected in 'FQHC Site Medicare Billing Number Status' field.) | 751907 |
| FQHC Site National Provider Identification (NPI) Number (Optional field) | 1568540557 | Total Hours of Operation (when Patients will be Served per Week) | 40.00 |
| Saved Months of Operation | January, February, March, April, May, June, July, August, September, October, November, December | | |
| Number of Contract Service Delivery Locations (Required only for 'Migrant Voucher Screening' Site Type) | | Number of Intermittent Sites (Required only for 'Intermittent' Site Type) | |
| Site Operated by | Health Center/Applicant | | |

Subrecipient or Contractor Information (Required only if 'Subrecipient or Contractor' is selected in 'Site Operated By' field)

| Subrecipient/Contractor Organization Name | Subrecipient/Contractor Organization Physical Site Address | Subrecipient/Contract |
|---|--|-----------------------|
| No Subrecipient or Contractor information to be displayed | | |

Service Area Zip Code (Include only those from which the majority of the patient population will come)

Saved Service Area Zip Code(s) 94062

Site Id: BPS-H80-011967

Site Status

| Site Information | | | |
|---|--|--|-------------------------------|
| Site Name | HCH Mobile Dental Van | Physical Site Address | 222 W 39th Ave, San Mateo, CA |
| Site Type | Service Delivery Site | Site Phone Number | (650) 573-2561 |
| Web URL | | | |
| Location Type | Mobile Van | Site Setting | All Other Clinic Types |
| Date Site was Added to Scope | 08/15/2012 | Site Operational Date | 08/15/2012 |
| FQHC Site Medicare Billing Number Status | Application for this site has not yet been submitted to CMS | Medicare Billing Number (Required if "This site has a Medicare billing number" is selected in 'FQHC Site Medicare Billing Number Status' field.) | |
| FQHC Site National Provider Identification (NPI) Number (Optional field) | | Total Hours of Operation (when Patients will be Served per Week) | 20.00 |
| Saved Months of Operation | January, February, March, April, May, June, July, August, September, October, November, December | | |
| Number of Contract Service Delivery Locations (Required only for 'Migrant Voucher Screening' Site Type) | | Number of Intermittent Sites (Required only for 'Intermittent' Site Type) | |

| | | | |
|---|---|------------------------------|--|
| Site Operated by | Health Center/Applicant | | |
| Subrecipient or Contractor Information (Required only if 'Subrecipient or Contractor' is selected in 'Site Operated By' field) | | | |
| Subrecipient/Contractor Organization Name | Subrecipient/Contractor Organization Physical Site Address | Subrecipient/Contract | |
| No Subrecipient or Contractor information to be displayed | | | |
| Service Area Zip Code (Include only those from which the majority of the patient population will come) | | | |
| Saved Service Area Zip Code(s) | 94061, 94080, 94063, 94401, 94019, 94403 | | |

| | | | |
|---|--|--|----------------------------------|
| Site Id: BPS-H80-005206 | Site Statu | | |
| Site Information | | | |
| Site Name | NORTH COUNTY MENTAL HEALTH | Physical Site Address | 375 89th St, Daly City, CA 94015 |
| Site Type | Service Delivery Site | Site Phone Number | (650) 301-8650 |
| Web URL | | | |
| Location Type | Permanent | Site Setting | All Other Clinic Types |
| Date Site was Added to Scope | 07/31/2004 | Site Operational Date | 07/31/2004 |
| FQHC Site Medicare Billing Number Status | Application for this site has not yet been submitted to CMS | Medicare Billing Number (Required if "This site has a Medicare billing number" is selected in 'FQHC Site Medicare Billing Number Status' field.) | |
| FQHC Site National Provider Identification (NPI) Number (Optional field) | | Total Hours of Operation (when Patients will be Served per Week) | 40.00 |
| Saved Months of Operation | January, February, March, April, May, June, July, August, September, October, November, December | | |
| Number of Contract Service Delivery Locations (Required only for 'Migrant Voucher Screening' Site Type) | | Number of Intermittent Sites (Required only for 'Intermittent' Site Type) | |
| Site Operated by | Health Center/Applicant | | |
| Subrecipient or Contractor Information (Required only if 'Subrecipient or Contractor' is selected in 'Site Operated By' field) | | | |
| Subrecipient/Contractor Organization Name | Subrecipient/Contractor Organization Physical Site Address | Subrecipient/Contract | |
| No Subrecipient or Contractor information to be displayed | | | |
| Service Area Zip Code (Include only those from which the majority of the patient population will come) | | | |
| Saved Service Area Zip Code(s) | 94015 | | |

| | | | |
|--------------------------------|----------------------------|------------------------------|---|
| Site Id: BPS-H80-005388 | Site Statu | | |
| Site Information | | | |
| Site Name | SOUTH COUNTY MENTAL HEALTH | Physical Site Address | 802 BREWSTER AVE, REDWOC CITY, CA 94063 |
| Site Type | Service Delivery Site | Site Phone Number | (650) 363-4111 |
| Web URL | | | |

| | | | |
|---|--|--|------------------------|
| Location Type | Permanent | Site Setting | All Other Clinic Types |
| Date Site was Added to Scope | 01/01/1992 | Site Operational Date | 01/01/1992 |
| FQHC Site Medicare Billing Number Status | Application for this site has not yet been submitted to CMS | Medicare Billing Number (Required if "This site has a Medicare billing number" is selected in 'FQHC Site Medicare Billing Number Status' field.) | |
| FQHC Site National Provider Identification (NPI) Number (Optional field) | | Total Hours of Operation (when Patients will be Served per Week) | 40.00 |
| Saved Months of Operation | January, February, March, April, May, June, July, August, September, October, November, December | | |
| Number of Contract Service Delivery Locations (Required only for 'Migrant Voucher Screening' Site Type) | | Number of Intermittent Sites (Required only for 'Intermittent' Site Type) | |
| Site Operated by | Health Center/Applicant | | |
| Subrecipient or Contractor Information (Required only if 'Subrecipient or Contractor' is selected in 'Site Operated By' field) | | | |
| Subrecipient/Contractor Organization Name | Subrecipient/Contractor Organization Physical Site Address | Subrecipient/Contract | |
| No Subrecipient or Contractor information to be displayed | | | |
| Service Area Zip Code (Include only those from which the majority of the patient population will come) | | | |
| Saved Service Area Zip Code(s) | 94063, 94061 | | |

| | | | |
|---|--|--|---|
| Site Id: BPS-H80-005448 | | | Site State |
| Site Information | | | |
| Site Name | Fair Oaks Health Center | Physical Site Address | 2710 Middlefield Rd, Redwood C 94063 |
| Site Type | Service Delivery Site | Site Phone Number | (650) 363-4602 |
| Web URL | www.sanmateo.ca.us | | |
| Location Type | Permanent | Site Setting | All Other Clinic Types |
| Date Site was Added to Scope | 01/01/1988 | Site Operational Date | 01/01/1998 |
| FQHC Site Medicare Billing Number Status | This site has a Medicare billing number | Medicare Billing Number (Required if "This site has a Medicare billing number" is selected in 'FQHC Site Medicare Billing Number Status' field.) | 751887 |
| FQHC Site National Provider Identification (NPI) Number (Optional field) | 1386728533 | Total Hours of Operation (when Patients will be Served per Week) | 40.00 |
| Saved Months of Operation | January, February, March, April, May, June, July, August, September, October, November, December | | |
| Number of Contract Service Delivery Locations (Required only for 'Migrant Voucher Screening' Site Type) | | Number of Intermittent Sites (Required only for 'Intermittent' Site Type) | |
| Site Operated by | | | |

Health Center/Applicant

Subrecipient or Contractor Information (Required only if 'Subrecipient or Contractor' is selected in 'Site Operated By' field)

| Subrecipient/Contractor Organization Name | Subrecipient/Contractor Organization Physical Site Address | Subrecipient/Contract |
|---|--|-----------------------|
| No Subrecipient or Contractor information to be displayed | | |

Service Area Zip Code (Include only those from which the majority of the patient population will come)

Saved Service Area Zip Code(s) 94063

Site Id: BPS-H80-004798

Site Statu

Site Information

| | | | |
|---|--|--|--|
| Site Name | EDISON CLINIC | Physical Site Address | 222 W 39th Ave # S-130, San Mateo CA 94403 |
| Site Type | Service Delivery Site | Site Phone Number | (650) 573-2358 |
| Web URL | www.co.sanmateo.ca.us | | |
| Location Type | Permanent | Site Setting | All Other Clinic Types |
| Date Site was Added to Scope | 01/01/1987 | Site Operational Date | 01/01/1987 |
| FQHC Site Medicare Billing Number Status | Application for this site has not yet been submitted to CMS | Medicare Billing Number (Required if "This site has a Medicare billing number" is selected in 'FQHC Site Medicare Billing Number Status' field.) | |
| FQHC Site National Provider Identification (NPI) Number (Optional field) | | Total Hours of Operation (when Patients will be Served per Week) | 40.00 |
| Saved Months of Operation | January, February, March, April, May, June, July, August, September, October, November, December | | |
| Number of Contract Service Delivery Locations (Required only for 'Migrant Voucher Screening' Site Type) | | Number of Intermittent Sites (Required only for 'Intermittent' Site Type) | |
| Site Operated by | Health Center/Applicant | | |

Subrecipient or Contractor Information (Required only if 'Subrecipient or Contractor' is selected in 'Site Operated By' field)

| Subrecipient/Contractor Organization Name | Subrecipient/Contractor Organization Physical Site Address | Subrecipient/Contract |
|---|--|-----------------------|
| No Subrecipient or Contractor information to be displayed | | |

Service Area Zip Code (Include only those from which the majority of the patient population will come)

Saved Service Area Zip Code(s) 94403

Site Id: BPS-H80-003064

Site Statu

Site Information

| | | | |
|------------------|---------------------------------|------------------------------|--|
| Site Name | RON ROBINSON SENIOR CARE CENTER | Physical Site Address | 222 W 39th Ave # S-131, San Mateo CA 94403 |
| Site Type | Service Delivery Site | Site Phone Number | (650) 573-2426 |

| | | | |
|---|--|--|------------------------|
| Web URL | www.co.sanmateo.ca.us | | |
| Location Type | Permanent | Site Setting | All Other Clinic Types |
| Date Site was Added to Scope | 01/03/2004 | Site Operational Date | 01/03/2004 |
| FQHC Site Medicare Billing Number Status | Application for this site has not yet been submitted to CMS | Medicare Billing Number (Required if "This site has a Medicare billing number" is selected in 'FQHC Site Medicare Billing Number Status' field.) | |
| FQHC Site National Provider Identification (NPI) Number (Optional field) | | Total Hours of Operation (when Patients will be Served per Week) | 40.00 |
| Saved Months of Operation | January, February, March, April, May, June, July, August, September, October, November, December | | |
| Number of Contract Service Delivery Locations (Required only for 'Migrant Voucher Screening' Site Type) | | Number of Intermittent Sites (Required only for 'Intermittent' Site Type) | |
| Site Operated by | Health Center/Applicant | | |

Subrecipient or Contractor Information (Required only if 'Subrecipient or Contractor' is selected in 'Site Operated By' field)

| Subrecipient/Contractor Organization Name | Subrecipient/Contractor Organization Physical Site Address | Subrecipient/Contract |
|---|--|-----------------------|
| No Subrecipient or Contractor information to be displayed | | |

Service Area Zip Code (Include only those from which the majority of the patient population will come)

| | |
|---------------------------------------|-------|
| Saved Service Area Zip Code(s) | 94403 |
|---------------------------------------|-------|

Site Id: BPS-H80-022195

Site Statu

| Site Information | | | |
|---|--|--|---|
| Site Name | Daly City Youth Health Center | Physical Site Address | 350 90th St., 3rd Floor, Daly City, 94015 |
| Site Type | Service Delivery Site | Site Phone Number | (650) 991-2240 |
| Web URL | | | |
| Location Type | Permanent | Site Setting | All Other Clinic Types |
| Date Site was Added to Scope | 05/22/2018 | Site Operational Date | 09/27/2018 |
| FQHC Site Medicare Billing Number Status | | Medicare Billing Number (Required if "This site has a Medicare billing number" is selected in 'FQHC Site Medicare Billing Number Status' field.) | |
| FQHC Site National Provider Identification (NPI) Number (Optional field) | | Total Hours of Operation (when Patients will be Served per Week) | 40.00 |
| Saved Months of Operation | January, February, March, April, May, June, July, August, September, October, November, December | | |
| Number of Contract Service Delivery Locations (Required only for 'Migrant Voucher Screening' Site Type) | | Number of Intermittent Sites (Required only for 'Intermittent' Site Type) | |

| | | | |
|---|---|------------------------------|--|
| Site Operated by | Health Center/Applicant | | |
| Subrecipient or Contractor Information (Required only if 'Subrecipient or Contractor' is selected in 'Site Operated By' field) | | | |
| Subrecipient/Contractor Organization Name | Subrecipient/Contractor Organization Physical Site Address | Subrecipient/Contract | |
| No Subrecipient or Contractor information to be displayed | | | |
| Service Area Zip Code (Include only those from which the majority of the patient population will come) | | | |
| Saved Service Area Zip Code(s) | 94015 | | |

| | | | |
|---|--|--|--------------------------------|
| Site Id: BPS-H80-003782 | | | Site Statu |
| Site Information | | | |
| Site Name | MOBILE HEALTH CLINIC | Physical Site Address | 225 37th Ave, San Mateo, CA 94 |
| Site Type | Service Delivery Site | Site Phone Number | (650) 573-2786 |
| Web URL | www.co.sanmateo.ca.us | | |
| Location Type | Permanent | Site Setting | All Other Clinic Types |
| Date Site was Added to Scope | 01/05/1996 | Site Operational Date | 07/01/1994 |
| FQHC Site Medicare Billing Number Status | Health center does not/will not bill under the FQHC Medicare system at this site | Medicare Billing Number (Required if "This site has a Medicare billing number" is selected in 'FQHC Site Medicare Billing Number Status' field.) | |
| FQHC Site National Provider Identification (NPI) Number (Optional field) | 1194804013 | Total Hours of Operation (when Patients will be Served per Week) | 40.00 |
| Saved Months of Operation | January, February, March, April, May, June, July, August, September, October, November, December | | |
| Number of Contract Service Delivery Locations (Required only for 'Migrant Voucher Screening' Site Type) | | Number of Intermittent Sites (Required only for 'Intermittent' Site Type) | |
| Site Operated by | Health Center/Applicant | | |
| Subrecipient or Contractor Information (Required only if 'Subrecipient or Contractor' is selected in 'Site Operated By' field) | | | |
| Subrecipient/Contractor Organization Name | Subrecipient/Contractor Organization Physical Site Address | Subrecipient/Contract | |
| No Subrecipient or Contractor information to be displayed | | | |
| Service Area Zip Code (Include only those from which the majority of the patient population will come) | | | |
| Saved Service Area Zip Code(s) | 94061, 94098, 94065, 94019, 94401, 94063, 94066, 94060, 94096, 94064, 94067, 94402, 94403, 94083 | | |

| | | | |
|--------------------------------|-------------------------------|------------------------------|---|
| Site Id: BPS-H80-004460 | | | Site Statu |
| Site Information | | | |
| Site Name | DALY CITY YOUTH HEALTH CENTER | Physical Site Address | 2780 Junipero Serra Blvd, Daly C 94015 |
| Site Type | Service Delivery Site | Site Phone Number | (650) 991-2240 |
| Web URL | | | |

www.co.sanmateo.ca.us

| | | | |
|---|--|--|------------------------|
| Location Type | Permanent | Site Setting | All Other Clinic Types |
| Date Site was Added to Scope | 01/01/1992 | Site Operational Date | 01/01/1990 |
| FQHC Site Medicare Billing Number Status | This site has a Medicare billing number | Medicare Billing Number (Required if "This site has a Medicare billing number" is selected in 'FQHC Site Medicare Billing Number Status' field.) | 751888 |
| FQHC Site National Provider Identification (NPI) Number (Optional field) | 1023196011 | Total Hours of Operation (when Patients will be Served per Week) | 40.00 |
| Saved Months of Operation | January, February, March, April, May, June, July, August, September, October, November, December | | |
| Number of Contract Service Delivery Locations (Required only for 'Migrant Voucher Screening' Site Type) | | Number of Intermittent Sites (Required only for 'Intermittent' Site Type) | |
| Site Operated by | Health Center/Applicant | | |

Subrecipient or Contractor Information (Required only if 'Subrecipient or Contractor' is selected in 'Site Operated By' field)

| Subrecipient/Contractor Organization Name | Subrecipient/Contractor Organization Physical Site Address | Subrecipient/Contract |
|---|--|-----------------------|
| No Subrecipient or Contractor information to be displayed | | |

Service Area Zip Code (Include only those from which the majority of the patient population will come)

| | |
|---------------------------------------|-------|
| Saved Service Area Zip Code(s) | 94015 |
|---------------------------------------|-------|

Site Id: BPS-H80-005524

Site Status

| Site Information | | | |
|---|--|--|----------------------------------|
| Site Name | DALY CITY CLINIC | Physical Site Address | 380 90th St, Daly City, CA 94015 |
| Site Type | Service Delivery Site | Site Phone Number | (650) 301-8600 |
| Web URL | www.co.sanmateo.ca.us | | |
| Location Type | Permanent | Site Setting | All Other Clinic Types |
| Date Site was Added to Scope | 01/05/1996 | Site Operational Date | 01/05/1996 |
| FQHC Site Medicare Billing Number Status | This site has a Medicare billing number | Medicare Billing Number (Required if "This site has a Medicare billing number" is selected in 'FQHC Site Medicare Billing Number Status' field.) | 751906 |
| FQHC Site National Provider Identification (NPI) Number (Optional field) | 1265522619 | Total Hours of Operation (when Patients will be Served per Week) | 40.00 |
| Saved Months of Operation | January, February, March, April, May, June, July, August, September, October, November, December | | |
| Number of Contract Service Delivery Locations (Required only for 'Migrant Voucher Screening' Site Type) | | Number of Intermittent Sites (Required only for 'Intermittent' Site Type) | |

| | | | |
|---|---|------------------------------|--|
| Site Operated by | Health Center/Applicant | | |
| Subrecipient or Contractor Information (Required only if 'Subrecipient or Contractor' is selected in 'Site Operated By' field) | | | |
| Subrecipient/Contractor Organization Name | Subrecipient/Contractor Organization Physical Site Address | Subrecipient/Contract | |
| No Subrecipient or Contractor information to be displayed | | | |
| Service Area Zip Code (Include only those from which the majority of the patient population will come) | | | |
| Saved Service Area Zip Code(s) | 94015 | | |

Close Window

Electronic Handbooks

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- Organization
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- Dashboards
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 - [Users](#)
 - Approved Scope
 - [Services](#)
 - [Sites](#)
 - Other Activities and Locations**

Self Updates: Activity details

▼ **H80CS00051: SAN MATEO COUNTY HEALTH SERVICES AGENCY, San Mateo, CA**

Grant Number: H80CS00051 BHCNIS ID: 091140 Project Period: 11/01/2001 - 12/31/2022
 Budget Period: 01/01/2022 - 12/31/2022

▼ **Resources**

View

[Form 5A](#) | [Form 5B](#) | [Form 5C](#)

Existing Activities/Locations

| Type of Activity | Frequency of Activity | Description of Activity | Type of Location(s) where Activity is Conducted |
|------------------------|---|--|---|
| Non-Clinical Outreach | Monday-Friday through outreach conducted by Community Health Workers assigned to the HCH Mobile Clinic. | Community health workers visit shelters and sites frequented by homeless where they provide information on the Mobile Clinic schedule, as well as, health and other enabling services. | Shelters, service sites (e.g., food kitchen; other sites (e.g., parks) frequented by the homeless. |
| Immunizations | Adult and/or children's immunizations can be accessed by HCH patients on an on-going basis. | Recommended adult (e.g., Hepatitis C, flu shots)and childhood (by age two) immunizations. | SMMC clinics listed on Form 5 - Part B or health immunization clinics at various locations. |
| Health Education | Daily at SMMC/HCH service sites. | Health education focused on the awareness, prevention and management of chronic conditions such as diabetes is provided at various service sites. | Sites listed on Form 5 - Part B and attached to SMMC service sites. |
| Portable Clinical Care | Monday through Thursday | "Backpack Medicine" - Street & Field Primary Care Delivery | Streets, alleys, encampments, farms, and sites frequented by street homeless and farmworker patients. |