

DOCUMENT RESUME

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Funding of Mission Community Health Center, San Francisco, California. B-164031(5); HRD-77-25. December 7, 1976. 3 pp.

Report to Secretary, Department of Health, Education, and Welfare; by Gregory J. Ahart, Director, Human Resources Div.

Issue Area: Health Programs: Health Facilities (1203).

Contact: Human Resources Div.

Budget Function: Health: Health Care Services (551).

Congressional Relevance: House Committee on Interstate and Foreign Commerce; Senate Committee on Appropriations: Labor, Health, Education and Welfare Subcommittee; Senate Committee on Labor and Public Welfare.

Authority: Public Health Service Act, as amended, sec. 330, 1302(7) (42 U.S.C. 254c; 42 U.S.C. 300e-1(7)).

A study of health care services at the Mission Neighborhood Health Center in San Francisco was part of a review of the Department of Health, Education, and Welfare (HEW) Community Health Center program. Legislation provides for grants to develop these centers for medically underserved populations. Findings/Conclusions: The area served by the Mission Neighborhood Health Center does not qualify as underserved because the Center duplicates services available at other health facilities. The number of private physicians in the area has increased from 20 to 200. The area is served by the San Francisco General Hospital and St. Luke's Hospital, both with outpatient clinics, and the Southeast Ambulatory Health Center. Dental services have also increased. Some of these facilities are funded by HEW. Program utilization was found to be lower than stipulated in guidelines. Recommendations: Health care services should be consolidated in the Mission Neighborhood Health Center area. (HTW)

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UNITED STATES GENERAL ACCOUNTING OFFICE
WASHINGTON, D.C. 20548

HUMAN RESOURCES
DIVISION

IN REPLY
REFER TO:

B-164031(5)

DEC 7 1976

The Honorable
The Secretary of Health,
Education, and Welfare

Dear Mr. Secretary:

We are currently reviewing your Department's Community Health Center program funded under section 330 of the Public Health Service Act, as amended (42 U.S.C. 254c).

Our work at the Mission Neighborhood Health Center in San Francisco, California, shows that the health care services the Center offers are available at other health facilities in the same area and some of these other facilities also receive Department grants. Department funds could be saved by eliminating these duplicative services and administrative expenses.

Section 330(c) of the act specifies that grants should only be given to public and nonprofit private organizations to plan and develop community health centers serving medically underserved populations. Section 330's definition of a medically underserved population is the same as that of section 1302(7) of the act (42 U.S.C. 300e-1(7)) for establishing health maintenance organizations. In September 1975 your Department issued regulations identifying 8,000 medically underserved areas, but the Center's catchment area no longer qualifies as medically underserved because:

- The number of private physicians practicing in the Center's area has increased from about 20 when the Center opened in 1968 to about 200 this year. The number of private, practicing dentists has also greatly increased.
- The San Francisco General Hospital operates an outpatient improvement program near the Center's area that offers comprehensive family health care services and is partially funded by your Department under section 330 of the act. About one-third of this outpatient clinic's users live in the Center's catchment area and the hospital operates another satellite clinic there. The program director said the program's staff from the University of California Medical School is also available to operate the Center. A University of California

physician, for example, presently works part-time in obstetrics and gynecology there. Administrators of the Center and the hospital clinic are exploring the possibility of having more University of California physicians work part-time in four other medical specialties at the Center.

--Within the year, the hospital plans to open a 24-chair mini-dental college staffed by University of California dentists and dental students. Many of the patients are expected to come from the Center's catchment area.

--Also in the Center's area is St. Lukes Hospital, which operates an outpatient clinic used primarily by impoverished residents there.

--San Francisco Department of Public Health operates the Southeast Ambulatory Health Center district clinic a short distance from the Center.

During this review we found that program utilization was low, because the Center's primary care physicians treated an average of 2.3 patients an hour during May 1976, when Department guidelines stipulate that a minimum of 2.7 patients should be treated an hour.

Under section 330 your Department funds three ambulatory health care facilities--the Center, the San Francisco General Hospital clinic, and the Southeast Ambulatory Health Center--all within 3 miles of each other. Funds for the three facilities total about \$3.5 million a year.

We recommend that you consider consolidating the health care services currently funded in the Center's area to reduce duplicate and competitive services and administrative expenses.

The Director of the San Francisco Department of Public Health and the Director of the now defunct San Francisco Comprehensive Health Planning Council favored consolidating resources to help eliminate duplicative health services in the area.

We appreciate the cooperation given to our representatives during our continuing study, and we welcome the opportunity to discuss the above matters with you or your staff.

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As you know, section 236 of the Legislative Reorganization Act of 1970 requires the head of a Federal agency to submit a written statement on actions taken on our recommendations to the House and Senate Committees on Government Operations not later than 60 days

After the date of the report and to the House and Senate Committees on Appropriations with the agency's first request for appropriations made more than 60 days after the date of the report.

We are sending copies of this report to the Chairmen of the House and Senate Committees on Appropriations and Government Operations, House Committee on Interstate and Foreign Commerce, and the Senate Committee on Labor and Public Welfare. A copy is also being sent to the Director, Office of Management and Budget.

Sincerely yours,



Gregory J. Hart
Director