

CITY OF DAVIS
2008 - 2009 COMMUNITY DEVELOPMENT BLOCK GRANT APPLICATION

Organization Name: CommuniCare Health Centers

Street Address: 2051 John Jones Road, Davis, CA 95616
Mailing Address: P.O. Box 1260, Davis, CA 95617
E-mail Address: robina@communicarehc.org
Phone Number: (530) 753-3498
Fax Number: (530) 758-2109

Contact: Robin Affrime Address: P.O. Box 1260, Davis, CA 95617 Phone: (530) 753-3498, ext 1205
(Be sure to list the **best contact** to get information to the organization as quickly as possible.)

Total Proposal Request: \$ 21,000

(Check one) On-going Support New Project

CDBG Eligible Category: Public Service
(See List A)

National Objective Compliance/Low and Mod Benefit: Limited Clientele
(See List B)

City Council Identified Critical Needs: (See List C)

- 1) Basic Human Needs: Health Care
- 2) _____
- 3) _____

PUBLIC SERVICE

NON-PUBLIC SERVICE

Beneficiary Information:

3559 Total number of beneficiaries in program
550 Number of beneficiaries in program to be served with **CDBG** funds
100% Percentage of the **CDBG** beneficiaries with low/moderate income
\$38.18 Cost (\$) per **CDBG** beneficiary (CDBG Request/CDBG Beneficiaries)

PROJECT NARRATIVE

a. Need

This proposal supports the identified Basic Human Need of “Basic healthcare for uninsured Davis residents.” CommuniCare Health Centers is requesting CDBG funding support to continue provision of primary medical and dental care for Davis resident youth and families that are low income and without any healthcare coverage. The Davis Community Clinic has been providing affordable, high-quality health care services to the culturally diverse, low income, uninsured and underinsured residents of Davis with for over 35 years. Founded in 1972 as the Davis Free Clinic, Davis Community Clinic today is one of CommuniCare Health Centers’ seven community clinics located throughout Yolo County. Davis Community Clinic is the clinic of last resort for families and individuals without health coverage and without the resources to pay for care. No one is turned away from care based on their inability to pay for services. Since much of the care we provide for our clients is uncompensated, we continually seek funding from a variety of public and private sources in order to continue providing the quantity and quality of services upon which our clients depend.

At Davis Community Clinic, we continue to see a large population of low and low-to-moderate income working families who do not do not receive health benefits through their employers and do not qualify for Medi-Cal or Healthy Families Program (HFP) coverage. Over 49% of all patients seen at Davis Community Clinic for medical and dental care are uninsured, and 95% of all patients seen at Davis Community Clinic come from low and very low-income families living at or below 200% of the poverty level. Last year, 1,157 Davis residents ages 6 and older from families with incomes below 200% of the federal poverty level came to the Davis Community Clinic for primary medical care. Of the 2,051 visits provided for these patients, nearly 55% were provided without the patient having any form of health coverage. Last year, 541 Davis residents ages 6 and older from families with incomes below 200% of the federal poverty level came to the Davis Community Clinic for dental care. Of the 1,508 dental visits provided for these patients, nearly 29% were not covered by any form of health coverage. The total of these uncompensated visits provided for Davis residents ages 6 and older accounted for over 21% of all visits provided for primary medical and dental care at Davis Community Clinic last year – a slight increase over the previous year.

The annual income of nearly all of these families falls well short of being able to pay out of pocket for the full cost of care, or afford the cost of private medical and dental insurance for themselves and family members. The Healthy Kids Program in Yolo County now ensures that all children in the county ages 0 to 5 have health care coverage for primary medical and dental care by providing insurance for children ineligible for any other existing program, but Healthy Kids does not have funding to extend this coverage to older children. There remains nearly three times the number of children and adolescents in Yolo County ages 6 to 18 who are still without coverage, and an ever-growing number of adults – most of them the parents and family members of these same children – who are without any form of health coverage.

Although CommuniCare works hard to qualify all clients for a funding source, some are simply not eligible for any available programs. CommuniCare is certified to assist clients in their application to Healthy Families Program (HFP), which provides coverage for children up to age 18. However, many of our client families do not qualify for this program due to eligibility restrictions. The monthly premium is also a barrier to many families and when a family falls behind in their payments, they are dropped by the program for six months and are again without health insurance. Furthermore, budget reductions and proposed cuts to health care funding at the federal and state level continue to threaten programs that provide medical and dental coverage for low income residents. Governor Schwarzenegger’s proposed 2008-09 Budget slashes millions of dollars out of critical health programs such as EAPC (Expanded Access to Primary Care) and the Seasonal/Agricultural/Migratory Workers program that community clinics and health centers such as Davis Community Clinic rely upon in serving our underserved and uninsured populations. Proposed cuts and changes in the Medi-Cal program will result in more people losing Medi-Cal benefits and increasing numbers of uninsured. These proposed reductions and cuts in coverage will impact Davis Community Clinic with a continuing and increasing percentage of visits provided for uninsured patients.

Support for dental services for the uninsured, low-income youth and families in our community remains a growing need, and there continues to be inadequate access to dental care for those without coverage and

without the ability to pay for services. Many of the children and adults seeking dental care at Davis Community Clinic have infrequently, if ever, been seen by any dentist and often seek dental care only when already in pain and presenting with multiple dental problems. Many dentists limit the overall number of children served in their private practices, and the spaces that are available usually fill with those covered by private insurance. Furthermore, the governor's current budget proposal threatens access to care by recommending cuts that will eliminate adult dental care coverage for Medi-Cal patients.

It is CommuniCare's policy that no one is ever denied service based on their inability to pay, however the cost of continuing to provide care that is uncompensated is a serious threat to the financial stability of our clinics as the numbers of uninsured continue to increase and the cost of providing culturally appropriate, high quality care continues to mount. Therefore, we depend on funding from the City of Davis Community Development Block Grant Program as our last resort for maintaining access to care for these families and for providing services that are otherwise uncompensated. CDBG funding has been invaluable over the years in promoting the health of our community by helping to maintain access to care for those Davis residents who have nowhere else to turn and would otherwise have gone without the care they need.

Over the years, CDBG funding has supported thousands of medical and dental visits for low income, uninsured Davis residents at the Davis Community Clinic. The Davis Community Clinic has consistently met all service level objectives for the number of beneficiaries served with CDBG funds. In our most recent report up through 6 months of the current program funding, we show provision of services covering over 55% of our proposed 2007-2008 scope of services, and project well above 100% by the end of twelve months. For many years now, CommuniCare has held the line at costs and services provided through CDBG funding. However, as the cost of care continues to rise, we have been forced to scale back the amount of service we can provide for the requested funds, from 600 patient visits to 550.

b. Benefit

This program will improve the health of low income, uninsured Davis families by providing at least 250 visits for primary medical care and at least 300 visits for dental care for residents of Davis ages 6 and older. All families accessing healthcare at Davis Community Clinic are within the low and moderate-income guidelines. 95% of families accessing services funded by CDBG have incomes below 50% of median. The remaining 5% have incomes under 80% of median. All patients receiving primary medical and dental services through CDBG funding are low income, uninsured Davis residents. This program serves to meet the critical need of Basic Human Need: Basic healthcare for uninsured Davis residents.

c. Other Resources and Collaboration

The Davis Community Clinic has an Eligibility Worker screening all uninsured patients for eligibility and enrollment into coverage programs for which they may qualify (including Medi-Cal, YCHIP, HFP, and Healthy Kids). Child Health and Disability Program (CHDP) is a state program that reimburses only for well child exams and immunizations and does not cover the cost of pediatric sick care for uninsured, low-income families.

The state's Expanded Access to Primary Care (EAPC) program is another source of funding for primary medical and dental care services for patients without any health care coverage and whose family income is below 200% of the federal poverty level. The amount of the state's EAPC funding is determined at the start of the fiscal year and is usually exhausted sometime in the third quarter of the year, leaving 25% to 30% of the visits for very low income, uninsured youths and adult family members completely uncompensated. Under the governor's proposed budget, EAPC is under threat of a 15% reduction in funding.

Patients without any health coverage and unable to qualify for programs are asked to self-pay according to a sliding fee scale, but none are really able to pay more than a fraction of the cost of their care, if any at all. The contributions made by those clients able to pay a share of their cost of care, however, remain an important source of funding and is critical to balancing CommuniCare's operating budget.

Community fundraising is also critical for maintaining the level of services offered at our clinics. CommuniCare is fortunate to have strong support from the community. More than \$140,000 is raised on average each year from the community through a combination of mail appeals, service club donations, individual gifts in support of our programs and services, and non-monetary gifts such as infant clothing and

baby blankets.

Volunteers are essential to maintaining the quality of care and the cost effectiveness of clinic operations. Last year, more than 260 volunteers donated time to provide services to CommuniCare clients. This includes 32 physicians, 11 dentists, 3 optometrists, 1 psychologist, 1 pharmacist, 1 dental hygienist, 22 medical students, 17 mid-level practitioner students, 11 counselor interns, 40 dental interns and over 120 community members who fill such positions as patient assistants, translators, lab assistants, teen reproductive health educators, social worker assistants, and child development assistants. The value of these volunteers' time is estimated at approximately \$412,000.

The Yolo Health Alliance (YHA) is an integrated public/private collaboration between CommuniCare Health Centers, Yolo County Health Department, Sutter Davis Hospital and Sutter West Medical Group chartered with providing health care services for Yolo County residents without any health care coverage and without any resources to pay for services — individuals and families who do not qualify for government-subsidized coverage and who would otherwise fall through the cracks the health care system. Since it's founding, the Yolo Health Alliance has provided health care services to over 30,000 residents throughout Yolo County qualifying as medically indigent, although restructuring of funding for the YHA in the past three years has greatly decreased CommuniCare's share of funds for providing indigent health care. Davis Community Clinic is the safety net provider for the low-income and uninsured residents of the Davis area and is the only provider of primary medical and dental care in our community to treat patients regardless of their ability to pay.

d. Organizational Capacity

The Davis Community Clinic originated in 1972 with the founding of the Davis Free Clinic. Ever since, our organization has been a part of the fabric of the Davis community, expanding and evolving to continually meet the needs of the community we serve. CommuniCare has been able to grow and respond effectively to the needs of our clients for 35 years due to stable and responsible fiscal leadership and long-term objectives for programs meeting the needs of the community. This has been of particular importance and value in navigating the current highly-charged environment where healthcare coverage for the underserved is politically volatile. By diversifying revenue sources to include public moneys from federal, state, county, and local governments, as well as foundation grants, donations from local and regional businesses, and support from individual community members, we have ensured CommuniCare's fiscal viability over time. CommuniCare remains faithful to its founding mission of providing high-quality health care to those in need, and continues to stress preventive care and health education in all its programs.

Davis Community Clinic helps meet the unique needs of the working families that we serve by providing evening clinic hours for their convenience. Although many clients access our daytime clinics, evening hours are important to parents who are not given time off from work to take their children or other family members to see the physician or dentist. CommuniCare emphasizes provision of respectful care that is both linguistically and culturally competent and our clinic staff is as ethnically diverse as the patients they serve, speaking the languages necessary to provide culturally appropriate health care services.

CommuniCare is governed by a volunteer Board of Directors (attached), of which the majority of members are consumers of CommuniCare's services. Members also include health care professionals, local business professionals, service providers and community members. The Board holds monthly meetings, an annual retreat, and maintains subcommittees. Administrative policies and financial records are audited annually by an independent CPA. No audit exceptions were reported for the fiscal year ending June 30, 2007. Objectives for all of the previous CDBG funding awards have been met. CommuniCare has an experienced administrative staff working under the direction of Executive Director Robin Affrime, and Chief Financial Officer Sherry Cauchois. Robin and Sherry have each been with the agency for over 20 years.

SCOPE OF SERVICES

a. **Project Description** (Activity Summary: Describe the activities of the proposed budget)

Primary medical care: CommuniCare requests CDBG funds to provide 250 patient visits for primary medical care to low income, uninsured youths and families that are residents of Davis. Services will include treatment for illnesses; management of chronic diseases including diabetes, hypertension and asthma; medications; diagnostic laboratory tests; preventive health education; referrals for necessary specialty care; and assistance with psychosocial needs. CDBG funds will be used to maintain the staffing of mid-level practitioner hours at Davis Community Clinic.

Dental care: CommuniCare requests CDBG funds to provide 300 dental visits to low income, uninsured youths and families that are residents of Davis. Services will include diagnostic exams, x-rays, treatment of dental caries (tooth decay), root canals, sealants, emergency care, referrals, preventive care, and other treatment as required. CDBG funds will be used to maintain the staffing of dentist hours at Davis Community Clinic.

CDBG funds are needed for ongoing support because there are no other sources of funding for these services. Without CDBG support, the availability of services would have to be reduced and access to care limited to unacceptable levels. CDBG funding will support \$38.18 of the cost per visit. This includes all related expenses for provider and support staff, medical records, lab work, pharmacy, dental x-rays, and supplies required for provision of service. Comparable costs through a private physician or dental office are 3 to 6 times higher.

CDBG funding is expended on a per visit basis, and 100% of the funding is used for its specified purpose. CDBG funds are used only for patients who fit the following guidelines: the patient lives in Davis; the family meets the income eligibility; the family has no other health coverage; and the patient is receiving either primary medical care or dental care at the Davis Community Clinic.

b. **Target Group**

CDBG funding is reserved for families that are residents of Davis, meet the income guidelines of the program, and are receiving primary medical care and/or dental care at the Davis Community Clinic.

Quarterly reports will document the progress made toward meeting the program objectives of 250 primary care visits and 300 dental visits. All 550 visits provided will be to low and low/moderate income families. Approximately 420 Davis households will benefit from the program.

c. **Outreach**

CommuniCare staff regularly attends community meetings that are pertinent to our services and patient population. Members of CommuniCare staff serve actively on many area health, dental, and youth-related advisory boards such as: Maternal, Child, and Adolescent Health Advisory Board; Yolo County Immunization Coalition; Yolo County Health Council; Youth Services Task Force; and Children's Dental Disease Prevention Program Advisory Board. CommuniCare is a partner in the Yolo Health Alliance and works with Sutter Davis Hospital and Sutter West Medical Group to provide health care for the county's indigent population. CommuniCare's outreach program works with families in the community to provide education about available services and link them to care. CommuniCare's Smile Saver Program provides dental outreach and education to preschool and elementary school students throughout Yolo County. Among other services, the Smile Saver program provides referrals for children requiring dental treatment at our dental clinics. CommuniCare staff also coordinates with Yolo County public health nurses and the school nurses in all of the schools throughout the county.

PERFORMANCE SCHEDULE

Work Plan (Identify activities and completion dates)

<u>List Activity</u>	<u>Completion Date</u>
• Continue staff availability for primary care visits; including provider staff, medical assistant staff, and supporting staff.	July 1, 2008- June 30, 2009
• Continue dental program staff availability for dental care visits.	July 1, 2008- June 30, 2009
• Provide outreach through meetings, school personnel, and other community outreach.	June 30, 2009
• Provide 250 primary medical care visits to low/moderate income Davis residents who are without other health coverage.	June 30, 2009
• Provide 300 dental visits to low/moderate income Davis residents who are without other dental coverage.	June 30, 2009

PERFORMANCE MEASUREMENTS

ACTIVITY (What the program does to fulfill its mission)	INDICATOR (The direct products of program activities) Service #s	OUTCOME (Benefits that result from the program)
1. Continue staffing to support access for primary medical care visits; including provider staff, medical assistant staff, clinic support and other staff.	Continued staffing at DCC of at least two Physician Assistant positions and one Family Practice physician. Continue staffing of bilingual medical assistants, case manager, volunteer providers, health educators, clinic support staff and administrative staff.	Primary medical care services continue to be available at DCC Monday through Friday, with both daytime and evening hours available to accommodate working parents.
2. Continue staffing dental program to support access for dental care visits; including dentists, dental assistants, dental hygienists, program assistants and other supporting staff.	Continued staffing of Dental Program team at DCC of at least two dentists, volunteer dentists, two dental hygienists, three registered dental assistants, student dental interns, dental program assistants and administrative support staff.	Dental services continue to be available at DCC two days per week and an average of one evening per week, plus one additional day every other week. Emergency cases will continue to be seen on a walk-in basis with same day availability.

<p>3. Provide outreach through meetings, school personnel, and other community outreach.</p>	<p>Attendance by CommuniCare staff at community advisory group meetings that relate to family health care and youth issues; continuing communications with local school nurses and county public health nurses; continuing Smile Saver dental outreach program in local schools.</p>	<p>Local community advisory groups, school nurses and public health nurses will be kept advised of CommuniCare services and will refer children needing services to the Davis Community Clinic.</p>
<p>4. Provide 250 primary medical care visits to low/moderate income Davis residents who are without other health coverage.</p>	<p>Billing records will record number and type of all patient visits. Patient information will detail residency, income and coverage.</p>	<p>Health of families of at least 250 patients will be improved by having access to primary medical services.</p>
<p>5. Provide 300 dental visits to low/moderate income Davis residents who are without other dental coverage.</p>	<p>Billing records will record number and type of all patient visits. Patient information will detail residency, income and coverage.</p>	<p>At least 300 patients will have improved oral health and family members will receive oral health education.</p>

**CITY OF DAVIS
COMMUNITY DEVELOPMENT BLOCK GRANT PROGRAM**

BUDGET SUMMARY FOR PROPOSED PROJECT*

Budget Category	Proposed Project "CDBG Portion"	Other Sources	Total
A. Salaries and Wages	\$16,800.	\$189,717.	\$206,517.
B. Fringe Benefits (@ 25%)	4,200	47,429.	51,629.
C. Consultant/Contract Services	-0-	-0-	-0-
<i>TOTAL PERSONNEL BUDGET</i>	\$21,000	\$237,146.	\$258,146.
D. Facility Costs	-0-	\$17,480.	\$17,480.
E. Insurance	-0-	7,090.	7,090.
F. Information Technology Services	-0-	5,460.	5,460.
G. Office Supplies	-0-	4,900.	4,900.
H. Medical and Dental Supplies	-0-	10,824.	10,824.
I. Pharmacy	-0-	13,240.	13,240.
J. Lab Expenses	-0-	8,460.	8,460.
K. Licenses, Fees	-0-	2,100	2,100
K. Other (Staff Training, Annual Audit)	-0-	5,100.	5,100.
<i>TOTAL NON-PERSONNEL BUDGET</i>	\$0	\$74,654	\$74,654
TOTAL PROJECT BUDGET	\$21,000	\$311,800	\$332,800

* Please revise this form and annotate budget items as needed

NEW REQUIREMENTS: All applicants are requested to submit a copy of their organization's Operating Budget.

**CommuniCare Health Centers
Davis Community Clinic
Medical & Dental Services
Annual Budget
Beginning July 1, 2007 Ending June 30, 2008**

Revenue

Federal 330 Grant	\$203,834
Medi-Cal.....	332,353
Medicare.....	37,000
Client Fees	234,840
State of California Oral Health.....	40,638
State of California Ag. Workers	118,432
State of California EAPC	297,375
State of California Family Pact.....	117,000
Partnership Health Plan	129,626
Healthy Families Program	32,945
Yolo Health Alliance Dental.....	33,334
Yolo County YCHIP.....	238,334
Yolo County Pediatric IZ	25,000
Yolo Children's Alliance	13,400
Migrant Ed.....	2,000
Head Start	1,000
Blue Shield Foundation	40,000
Kaiser Foundation	75,000
Susan G. Komen Foundation	25,000
Redwood Community Health Foundation.....	1,250
March of Dimes	2,000
Yolo Dental Health Foundation	2,000
City of Davis CDBG.....	19,301
Catholic Healthcare West.....	25,000
River City Bank Foundation.....	5,000

Total Revenue.....\$2,051,662

Expenditures

Salaries, Professional Fees & Benefits	\$1,722,120
Insurance	13,500
IT Services	26,662
Facility Costs.....	90,762
Office Supplies	33,053
Medical and Dental Supplies.....	50,156
Pharmacy	83,496

Lab Expenses58,754
Staff Training.....5,000
Annual Audit.....7,000
Licenses, Fees6,000

Total Expenses\$2,096,503

Deficit(\$44,841)

**CommuniCare Health Centers
 Davis Community Clinic
 Medical & Dental Services
 Projected Annual Budget
 Beginning July 1, 2008 Ending June 30, 2009**

Revenue

Federal 330 Grant	\$203,834
Medi-Cal.....	332,353
Medicare	40,000
Client Fees	246,582
State of California Oral Health.....	36,575
State of California Ag. Workers	106,589
State of California EAPC	267,638
State of California Family Pact.....	117,000
Partnership Health Plan	129,626
Healthy Families.....	29,651
Yolo Health Alliance Dental.....	33,334
Yolo County YCHIP.....	238,334
Yolo County Peds IZ	22,500
Migrant Ed.....	1,000
Head Start	1,000
Kaiser Foundation	50,000
Blue Shield Foundation	40,000
Susan G. Komen Foundation.....	15,500
Yolo Dental Health Foundation	2,000
<u>City of Davis CDBG.....</u>	<u>21,000</u>

Total Revenue\$1,934,516

Expenditures

Salaries, Professional Fees & Benefits	\$1,722,120
Insurance	14,000
IT Services	35,000
Facility Costs.....	99,900
Office Supplies	35,000
Medical and Dental Supplies.....	50,156
Pharmacy	85,000
Lab Expenses	59,000
Staff Training.....	4,000
Annual Audit.....	7,000
<u>Licenses, Fees</u>	<u>6,000</u>

Total Expenses\$2,117,176

Deficit(\$182,660)



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