

File No. 111283

Committee Item No. _____

Board Item No. 48

COMMITTEE/BOARD OF SUPERVISORS

AGENDA PACKET CONTENTS LIST

Board of Supervisors Meeting

Date December 6, 2011

Cmte Board

- | | | |
|--------------------------|-------------------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | Motion |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | Resolution |
| <input type="checkbox"/> | <input type="checkbox"/> | Ordinance |
| <input type="checkbox"/> | <input type="checkbox"/> | Legislative Digest |
| <input type="checkbox"/> | <input type="checkbox"/> | Budget Analyst Report |
| <input type="checkbox"/> | <input type="checkbox"/> | Legislative Analyst Report |
| <input type="checkbox"/> | <input type="checkbox"/> | Youth Commission Report |
| <input type="checkbox"/> | <input type="checkbox"/> | Introduction Form (for hearings) |
| <input type="checkbox"/> | <input type="checkbox"/> | Department/Agency Cover Letter and/or Report |
| <input type="checkbox"/> | <input type="checkbox"/> | MOU |
| <input type="checkbox"/> | <input type="checkbox"/> | Grant Information Form |
| <input type="checkbox"/> | <input type="checkbox"/> | Grant Budget |
| <input type="checkbox"/> | <input type="checkbox"/> | Ethics Form 126 |
| <input type="checkbox"/> | <input type="checkbox"/> | Subcontract Budget |
| <input type="checkbox"/> | <input type="checkbox"/> | Contract/Agreement |
| <input type="checkbox"/> | <input type="checkbox"/> | Award Letter |
| <input type="checkbox"/> | <input type="checkbox"/> | Application |
| <input type="checkbox"/> | <input type="checkbox"/> | Correspondence |

OTHER

(Use back side if additional space is needed)

<input type="checkbox"/>	<input type="checkbox"/>	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____

Completed by: Andrea Ausberry Date November 29, 2011

Completed by: _____ Date _____

An asterisked item represents the cover sheet to a document that exceeds 25 pages.
The complete document is in the file.

1 [Expressing Concern Over Federal Cuts to Medicaid and Medicare Programs]

2
3 **Resolution expressing concern over proposed Federal cuts to Medicaid and Medicare**
4 **programs that will result in impacts to healthcare access for residents of the City and**
5 **County of San Francisco.**

6
7 WHEREAS, Many residents in San Francisco have been impacted by the economic
8 recession and are experiencing unemployment and lack of access to quality healthcare; and

9 WHEREAS, Millions of children, seniors and people with disabilities rely on healthcare
10 provided through the Federally funded Medicare and Medicaid programs established in 1965;
11 and

12 WHEREAS, The State of California and the City and County of San Francisco have
13 already made cuts to healthcare providers and services for these vulnerable populations; and

14 WHEREAS, The health of all of the City's residents is vitally important; and

15 WHEREAS, More than one of every ten jobs in California is in the healthcare sector
16 and for every one million dollars in cuts to Medicaid seventeen jobs are lost; now therefore, be
17 it

18 RESOLVED, That Board of Supervisors of the City and County of San Francisco is
19 concerned about the loss or decrease in access to healthcare through the Medicare and
20 Medicaid Programs; and be it

21 FURTHUR RESOLVED, That the Board of Supervisors urges the United States
22 Congress to protect funding for and consider impacts of cuts to Medicare and Medicaid
23 Programs on San Francisco's most vulnerable citizens.

INTRODUCTION FORM

By a member of the Board of Supervisors or the Mayor

Time Stamp or
Meeting Date

I hereby submit the following item for introduction:

- 1. For reference to Committee: _____
An ordinance, resolution, motion, or charter amendment
- 2. Request for next printed agenda without reference to Committee
- 3. Request for hearing on a subject matter at Committee: _____
- 4. Request for letter beginning "Supervisor _____ inquires..."
- 5. City Attorney request
- 6. Call file from Committee
- 7. Budget Analyst request (attach written motion).
- 8. Substitute Legislation File Nos.
- 9. Request for Closed Session
- 10. Board to Sit as A Committee of the Whole
- 11. Question(s) submitted for Mayoral Appearance before the BOS on _____

Please check the appropriate boxes. The proposed legislation should be forwarded to the following:

- | | |
|---|--|
| <input type="checkbox"/> Small Business Commission | <input type="checkbox"/> Youth Commission |
| <input type="checkbox"/> Ethics Commission | <input type="checkbox"/> Planning Commission |
| <input type="checkbox"/> Building Inspection Commission | |

Note: For the Imperative Agenda (a resolution not on the printed agenda), use a different form.]

Sponsor(s): Cohen

Subject: Resolution expressing concern over proposed cuts to Medicaid and Medicare Programs

The text is listed below or attached:

Attached

Signature of Sponsoring Supervisor: _____

Melvin Cohen

For Clerk's Use Only:

Common/Supervisors Form

Revised 05/19/11

111 283
111 203

