

Dat	e of Application	05/13/2025		
Aŗ	pplicant and Organization Infor	mation		
1.	Organization Name	San Francisco Department of Public Health		
2.	Mailing Address	1001 Potrero Ave, Bldg 5, 25, 80, 90 & Bldg 5 Ward 1B, SF, CA 94110		
3.	Website	https://www.sf.gov/departmentsdepartment-public-health		
4.	Name of Executive Director/CEO Phone Number, and Email			
5.	Contact Person (if not Executive Director) Name, Title, Phone Number, and Email	Bernadette Gates, CalAIM Director - see supplemental documentation		
6.	Organization Type			
	501(c)(3) Non-Profit Government Entity For-Profit Corporation Other			
7.	TIN	94-6000417		
8.	Organization Mission Statement:			
	To protect and promote the health of all San Franciscans.			
9.	Briefly describe your organization's current programs and services.			
	Refer to supplemental documentation.			
10.	Total organizational budget (for the currer	nt year) \$3,000,000,000		
11.	Network Status – Is your organization cur	rently contracted with SFHP to provide services?		
	ECM Yes No			
	CS Yes No			
	Other Yes No			
	If yes, please describe what services your Refer to supplemental documentation .	organization is currently contracted to provide:		

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- 12. Has your organization applied for or received funding through other CalAIM programs or related initiatives such as PATH, HCBS spending plan, etc.?
 - Yes No

If yes, briefly describe the funding request and how it is not duplicative of this request:

Refer to supplemental documentation.

13. Has your organization applied for or received HHIP or IPP funding from other health plans or participating entities?

Anthem 🛛 Yes No

Other Yes ■ No

If yes, briefly describe the funding request and how it is not duplicative of this request:

Refer to supplemental documentation.

Proposal Details

- Project Title
 Expanding SFDPH Recuperative Care Community Supports
 Amount Requested
 Estimated Total Project Costs
 Estimated Total Project Costs
 S/15/2025 6/30/2026
- 18. Project Overview: Please describe your funding request and need for funding, including how the request will help your organization address gaps or expand capacity to connect Medi-Cal members to housing services and/or reduce and prevent homelessness in San Francisco. (200 words)

SFDPH aims to tackle San Francisco's mental health, addiction, and homelessness crisis by moving people quickly from the streets into effective treatment and sustained recovery. Additionally, caring for clients in the right setting and avoiding unnecessary emergency department utilization and hospital days are also primary SFDPH goals. Key strategies to these goals are to expand Recuperative Care Community Supports and streamline program delivery. The RESTORE, Eleanora Fagan / Kean, and Hummingbird programs provide recuperative care for Medi-Cal members experiencing homelessness. Included in the models of care are referrals to Coordinated Entry, Housing Community Supports, ECM and other services to promote physical and behavioral health linkages, recovery, and stabilization. This funding request is for RESTORE operating expenses and staffing, and for Epic implementation for RESTORE /Eleanora Fagan Kean / Hummingbird programs to enable staff to implement CS closed loop referrals, documentation, invoicing, reporting, and care coordination.

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19. What are the overall goals for the project? (200 words)

The overall goals for this project are to expand housing-related Community Supports capacity by operationalizing critical DPH programs as Recuperative Care Community Supports, and improve coordination and referrals by enabling these DPH CS Programs to use Epic for closed loop referrals and care coordination. RESTORE aims to rapidly connect people experiencing homelessness to substance use treatment, provide a safe place to stabilize while clients begin a recovery journey, reduce distressing street behaviors by facilitating exit from the program to a safe location, and reduce fatal overdoses through starting lifesaving medication and linking to ongoing care. Eleanora Fagan / Kean seeks to provide stability, recovery, and a path out of homelessness by addressing urgent health isues, providing behavioral health support, and providing treatment for substance use for individuals experiencing homelessness, mental health crises and substance use disorders recuperative care as an alternative to hospitalization.

20. Describe how your project aligns with SFHP's HHIP goals and funding strategies. Please select the specific goal your project supports.

Advancing housing equity

Enhancing street medicine

- Optimizing data sharing and coordination
 Enhancing home-based care
- Expand housing-related Community Supports capacity
- Improving coordination and referrals

Other (please describe):

Refer to supplemental documentation.

21. If you are currently contracted or planning to contract with SFHP to be an Enhanced Care Management (ECM) or Community Supports (CS) provider:

• Please describe how this request will help your organization expand its capacity to provide Community Supports, and please indicate for which service(s).

Housing Transition Navigation Services

Housing Tenancy and Sustaining Services

Recuperative Care (Medical Respite)
 Other (please describe):

Housing Deposits

Short-Term Post-Hospitalization Housing

 N/A – This request is not focused on expanding these services

Refer to supplemental documentation.

• If this request will help increase ECM enrollment or capacity, please indicate which CalAIM Populations of Focus you are currently serving or will be served by your organization as a result of this project. Check all that apply.

Individuals experiencing or at risk of homelessness

Individuals with serious mental health and/or substance use disorder needs

Adult nursing facility residents transitioning to the community

Adults and youth who are transitioning from incarceration

N/A – This request is not focused on expanding these services

Individuals who are at risk for avoidable hospital or emergency department

Individuals living in the community and at risk for long-term care institutionalization

Children/youth with complex

- medical needs
- Pregnant and postpartum individuals; birth equity population of focus

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- 22. Describe the population(s) that will be served through this project, including the estimated number of Medi-Cal members expected to be served annually.
 - If the project targets specific populations, provide a detailed demographic breakdown (e.g., race/ethnicity, gender, age, etc.) below.

Population(s) Served	Current # of Medi-Cal Members Served	Estimated # of Additional Members Served	Total # of Members to be Served (Current + Additional)
Refer to "Populations Served			0
			0
			0
			0
			0
			0

- 23. Please describe how your project will support/incorporate the following best practices:
 - Housing First, Housing Focused, and Harm Reduction
 Trat
 - Trauma Informed Care
 - Use of San Francisco's One System (HMIS) and Coordinated Entry System (CES)

Refer to supplemental documentation.

24. Describe how this project will support increased housing placements and/or expand housing capacity in San Francisco.

Clients who are enrolled in these recuperative care programs will be provided care management (for example, Enhanced Care Management and/or Intensive Care Management) which will be a vehicle to support increased housing placements. Clients will be referred to Coordinated Entry to access SF Homelessness and Supportive Housing (HSH) Department's Community Supports programs, or directly to SFHP to access Housing Community Supports programs offered by non-HSH entities. Additionally, clients will be connected to programs such as therapeutic community living and residential treatment. By providing funding for RESTORE operating expenses and staffing, the model is positioned to scale from 25 to 80 beds. The Eleanora Fagan / Kean site is currently an unoccupied hotel with space for 76 beds. As these recuperative care models become operational as CS and implement Epic, there is potential to stand up new sites to further expand housing capacity in SF.

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25. Project Objectives and Performance Measurement

Use the tables below to describe the project objectives, major activities, and how you will measure success. Please limit the number of objectives to no more than four. Please make sure that your objectives are Specific, Measurable, Achievable, Relevant, and Time-Framed (SMART). Elements to include: By (dates), (applicant) will (what, where, how and for whom) in order to (impact, by how much).

Objective #1 Refer to supplemental documentation.

Major Activities	Measureable Outcome	Target Completion Date

Evaluation Methods: How will your outcomes be measured?

Objective #2 Refer to supplemental documentation.

Major Activities	Measureable Outcome	Target Completion Date

Evaluation Methods: How will your outcomes be measured?



Objective #3 Refer to supplemental documentation.				
Major Activities	Measureable Outcome	Target Completion Date		

Evaluation Methods: How will your outcomes be measured?

Objective #4 Refer to supplemental documentation.				
Major Activities	Measureable Outcome	Target Completion Date		

Evaluation Methods: How will your outcomes be measured?

26. Describe how the project will be sustained after the grant period ends.

RESTORE operating expenses are one time funding; any ongoing maintenance fees will be absorbed by DPH budget. RESTORE staff costs will be sustained through direct CalAIM Medi-Cal billing as a Recuperative Care Community Support program. Epic staff costs are one time only.



27. Please complete the budget template and justification below. For each line item, please identify which project objective it supports.

Line Item	Description	Objective	Total Funding Requested
Personnel (% FTE)	f (refer to CalAIM Recuperative Care Staffir	Objective #3	804,912.23
For each position, specify the percentage of time dedicated to the project (% FTE) and number of months covered by the requested funds	Id Analysts (refer to CalAIM Recuperative C	Objective #4	1,110,000.00
Capital expenses			
	Vans	Objective #1	300,000.00
Operating expenses	er to "CalAIM RESTORE Operating Expens	Objective #2	274,786.40
Other costs			
Total Requested An	nount		2,489,698.63

Budget Justification (200 words)

Personnel was calculated based on RESTORE pilot program and prior Community Supports Epic builds. Vans and operating expenses calculated based on pricing research and prior purchases. All costs are either one-time or have sustainability plans for ongoing costs.

	Current # of Medi-Cal Members	Estimated # of Additional Members	Total # of Members to be Served	
Population(s) Served	Served	Served	(Current + Additional)	Notes
Individuals experiencing or at risk of				Total number of clients - same clients
homelessness	#REF!	#REF!	#REF!	as row below.
Individuals with serious mental health				Total number of clients - same clients
and/or substance use disorder needs	#REF!	#REF!	#REF!	as row above.
Pregnant and postpartum individuals;				These clients are a subset of total
birth equity population of focus	#REF!	#REF!	#REF!	clients.
Adults and youth who are transitioning				These clients are a subset of total
from incarceration	#REF!	#REF!	#REF!	clients.
Individuals who are at risk for				
avoidable hospital or emergency				These clients are a subset of total
department	#REF!	#REF!	#REF!	clients.