

SAN FRANCISCO DEPARTMENT OF PUBLIC HEALTH  
 FY 2014-16 PROPOSED BUDGET - Health Commission Meeting

Division	Item	Description	14-15 FTE Change	14-15 Expend Incr/(Decr)	14-15 Revenues Incr/(Decr)	Dept Proposed 15 Net GF Cost/(Savings)	15-16 FTE Change	15-16 Expend Incr/(Decr)	15-16 Revenues Incr/(Decr)	Dept Proposed 16 Net GF Cost/(Savings)	Comment
INFLATIONARY											
DPH All	C1	DPH Pharmaceutical and Materials and Supplies Inflation	-	-	-	-	-	2,084,399	-	2,084,399	This initiative requests increased expenditure authority related to pharmaceuticals (3%), Food (4%) and Laundry and Linen (3.25%) to reflect inflation on the price of critical healthcare supplies.
Transitions	C2	Annual Rent Increase for Direct Access to Housing (DAH) Master Leases and Rent Subsidies and 3rd party rent payment	-	-	-	-	-	587,819	-	587,819	Direct Access to Housing provides high-quality housing for homeless persons who have been living on the streets, individuals revolving through costly emergency care settings, and Health Department clients exiting higher levels of care. The master lease sites contracts include annual rent increases which the department is obligated to fund.
		<b>TOTAL INFLATIONARY</b>	-	-	-	-	-	<b>2,672,218</b>	-	<b>2,672,218</b>	
BUDGET NEUTRAL											
PH	E1	Environmental Health Fee Adjustments	3.60	759,097	759,097	-	4.75	759,097	759,097	-	Annual and legislated increases in Environmental Services inspection fees to cover related program expenditures.
LHH	E2	LHH Hepatitis C Pharmacy Services	-	1,104,000	1,104,000	-	-	1,137,120	1,137,120	-	This initiative requests increase expenditure authority to purchase a new class of pharmaceuticals developed to treat Hepatitis C. The cost of this drug will be offset by reimbursement from insurance programs including Medi-Cal and Medicare.
	E3	Denti-Cal Expansion	2.60	428,076	428,076	-	4.00	665,077	665,077	-	DPH will expand its Dental Program to address changes in State law that greatly enhances adult dental benefits. Specifically, this proposal would add four new positions to expand dental service capacity in the following DPH primary care health centers: Silver Avenue, Chinatown, Southeast, Potrero Hill and Tom Waddell.
SFGH - PC	E4	SFGH Primary Care Clinic Expansion	10.91	1,572,232	1,572,232	-	11.55	1,694,615	1,694,615	-	This program expansion creates capacity to provide primary care medical homes for an additional 3,600 patients at the Family Health Center and the General Medicine Clinic. Both clinics will be expanding evening and weekend hours to accommodate these new patients, and will be staffed according to the San Francisco Health Network's target ratio of 4.5 FTE support staff per provider FTE.

Division	Item	Description	14-15 FTE Change	14-15 Expend Incr/(Decr)	14-15 Revenues Incr/(Decr)	Dept Proposed 14-15 Net GF Cost/(Savings)	15-16 FTE Change	15-16 Expend Incr/(Decr)	15-16 Revenues Incr/(Decr)	Dept Proposed 15-16 Net GF Cost/(Savings)	Comment
	E5	Non-Specialty Mental Health Services	1.54	1,831,659	1,831,659	-	2.00	1,831,659	1,831,659	-	This initiative will add capacity to enable the Department of Public Health's, San Francisco Health Network (SFHN), DPH's provider network, to meet the capacity and reporting requirements for the delivery of non-specialty mental health services to its eligible members. Non-specialty mental health services are an essential benefit that must be available within each provider network, per the requirements of the Affordable Care Act (ACA).
<b>TOTAL REVENUE NEUTRAL</b>											
<b>EMERGING NEEDS</b>											
LHH	F1	LHH Administrative Building Operating Costs	6.22	1,066,703	-	1,066,703	6.42	1,106,245	-	1,106,245	Remodeling of the former LHH buildings is currently funded by the \$2.8 M cost savings of the LHH COPs. This request will fund the old buildings operation for non hospital programs (i.e. DPH Programs, other city departments or Community Agencies) that will be relocated to the Laguna Honda site. Operation expenses will include utilities, telecommunication, housekeeping, environmental services, security, facility, storekeeping and accounting support. There will be an initial up front costs for the operation but DPH anticipates cost savings from the elimination of property leases for some DPH Programs.
PH	F2	SFGH New Hospital Supplemental Operating Budget	-	-	-	-	96.74	26,853,346	-	26,853,346	Since 1994, the City and County of San Francisco has been planning for a seismically safe public hospital. In 2008 voters approved \$887 million dollars in general obligation bonds to rebuild SFGH. Acute care medical services currently located in the existing main hospital building will be relocated to the new hospital while services not subject to Senate Bill 1953 requirements for seismic compliance would remain in the existing hospital. The new facility is scheduled to operationalize in December 2015. This initiative requests \$26.9 M of operating costs for the new facility to start in FY 15-16.
<b>TOTAL EMERGING NEEDS</b>											
			6.22	1,066,703	-	1,066,703	103.16	27,959,591	-	27,959,591	
<b>TOTAL ALL PROPOSED INITIATIVES</b>											
			24.87	6,761,767	5,695,064	1,066,703	125.46	36,719,376	6,087,568	30,631,809	

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2014-15 and 2015-16 Program Change Request

DEPARTMENT NAME:

- |  |  |
|--|--|
| <input checked="" type="checkbox"/> San Francisco General Hospital | <input type="checkbox"/> Public Health                   |
| <input checked="" type="checkbox"/> Laguna Honda Hospital          | <input checked="" type="checkbox"/> CBHS - Mental Health |
| <input checked="" type="checkbox"/> Primary Care                   | <input type="checkbox"/> CBHS - Substance Abuse          |
| <input checked="" type="checkbox"/> Jail Health                    | <input type="checkbox"/> Health At Home                  |

PROGRAM / INITIATIVE TITLE: **DPH Pharmaceuticals and Materials and Supplies Inflation**

PROGRAM CONTACT NAME/PHONE: David Woods 206-2332

TARGETED CLIENTS: DPH clients

2013-14 FTE Change	2014-15 FTE Cumulative Change	FY 2014-15 Net General Fund Impact	FY 2015-16 Cumulative Net General Fund Impact
n/a	n/a	\$0	\$2,084,399

**PROGRAM DESCRIPTION: (Description of Program Change)**

This initiative requests annual inflationary adjustments for expenses critical to the hospital operations in FY 15-16. The department projects costs increases of 3% for pharmaceuticals, 4% for food and 3.25% for laundry & linen costs.

**JUSTIFICATION: (required by the Mayor's Office)**

Drugs continue to be the primary treatment modality for the prevention, mitigation or cure of disease. Drug therapy cost increases have exceeded the inflationary rate for other goods and services for the past decade, and increases in the utilization of novel therapeutic agents are expected to continue into year 2014-15 and 2015-16. Projected nation-wide increases in drug expenditures are 3-5% across all settings. At DPH, continued participation in drug manufacturer patient assistance programs, tight drug formulary control, and aggressive use of lower cost generic drugs will help offset increases in expense due to volume. The net result of factors that will increase and decrease drug costs at DPH are projected to lead to an overall increase in the cost of pharmaceuticals for the department of 3% in FY 2015-16.

Higher food costs are resulted from the severe drought that spread across nation-wide last year. While DPH continues to leverage discounts for its food purchase, it expects a 4% increase in food costs in next fiscal year. Finally, laundry and linen costs will rise by 3.25%.

These adjustments are critical to ensuring that DPH is able to continue to provide services and treatments to its patients.

**IMPACT ON NUMBER OF CLIENTS SERVED AND UNITS OF SERVICE PROVIDED**

All patients of SFGH, LHH, Primary Care, Behavioral Health and Jail Health clinics are impacted.

**EXPENSE AND REVENUE IMPACT (Reductions/Reallocations-complete supporting budget doc)**

Increase in base expenditure budget by 2,084,399 in FY 14-15.

**IMPACT ON DEPARTMENT'S WORKFORCE (increase or decrease of FTE's)**

None.

**ATTACHMENT B  
SUMMARY OF PROGRAM COST**

**INITIATIVE TITLE: DPH Pharmaceuticals and Materials and Supplies Inflation**

Description		FY 2014-15	FY 2015-16
<b>Sources:</b>		\$ -	\$ -
Subtotal Sources		\$ -	\$ -
<b>Uses:</b>			
	Operating Expenses	\$ -	\$ 2,084,399
Subtotal Uses		\$ -	\$ 2,084,399
<b>Net General Fund Subsidy Required (savings)/cost (Uses less Sources)</b>		\$ -	\$ 2,084,399
<b>Total FTE's</b>		n/a	n/a

**New Positions** (List positions by Class, Title and FTE)

<u>Class</u>	<u>Title</u>	FTE	FY 14-15	FTE	FY 15-16
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**Operating Expenses**

Index Code	Character/Subobject Code	FY 14-15	FY 15-16
HGH1HUN40061	040/04461 Pharmaceutical Supplies - SFGH	-	953,820
HLH448803	040/04461 Pharmaceutical Supplies - LHH	-	234,876
HJAILHLTH-GF	040/04461 Pharmaceutical Supplies - Jail Health	-	72,120
HCHAPADMINGF	040/04461 Pharmaceutical Supplies - Primary Care	-	15,208
HMHMCC730515	040/04461 Pharmaceutical Supplies - CBHS	-	315,755
HLH448811	040/04699 Food (LHH)	-	203,739
HGH1HUN40061	040/04699 Food (SFGH)	-	166,698
HLH449439	021/03511 Laundry & Linen Services (LHH)	-	74,145
HGH1HUN40061	021/03511 Laundry & Linen Services (SFGH)	-	48,039

**Facilities Maintenance, and Equipment** (List by each item by count and amount)

**2013-14 and 2014-15 Program Change Request**

**DIVISION AND SECTION:**

- |   |  |   |
|---|--|---|
| <input type="checkbox"/> San Francisco General Hospital | <input type="checkbox"/> Laguna Honda Hospital | <input type="checkbox"/> CBHS - Substance Abuse                 |
| <input type="checkbox"/> Primary Care                   | <input type="checkbox"/> Health At Home        | <input type="checkbox"/> CBHS - Mental Health                   |
| <input type="checkbox"/> Jail Health                    | <input type="checkbox"/> Public Health         | <input checked="" type="checkbox"/> DPH – Department Wide (HUH) |

PROGRAM / INITIATIVE TITLE: **Annual DAH Master Lease and Property Management Cost Increases**

TARGETED CLIENTS: Chronically Homeless People

PROGRAM CONTACT NAME/PHONE: **Margot Antonetty / 554-2642**

2014-15 FTE Change	2015-16 FTE Cumulative Change	FY 2014-15 Net General Fund Impact	FY 2015-16 Cumulative Net General Fund Impact
0	0	\$0	\$587,819

**PROGRAM DESCRIPTION:** (Brief description of Program Change)

The Department of Public Health’s Housing and Urban Health (HUH) section currently oversees 36 supportive housing sites totaling 1,707 units through its Direct Access to Housing Program (DAH). The goal of DAH is to provide housing environments that promote stability, improved health and well being, as well as integration into the surrounding community. The housing is provided to homeless persons who have been living on the streets, individuals revolving through costly emergency care settings, and Health Department clients exiting higher levels of care.

As the Department master leases seven of the DAH sites and is therefore responsible for funding annual rent increases and property management cost increases as indicated in its contracts for each site.

**JUSTIFICATION:**

As in years past, the department is obligated to fund the scheduled increases to adhere to the lease agreements.

**IMPACT ON CLIENTS:** (unit of service and/or number of clients affected)

None.

**EXPENSE AND REVENUE IMPACT:** (for both fiscal years)

Total rent and contractual expenses will increase by \$587,819 in FY 15-16.

**IMPACT ON DEPARTMENT’S WORKFORCE :**

None.

**ATTACHMENT B  
SUMMARY OF PROGRAM COST**

**INITIATIVE TITLE: Annual DAH Master Lease and Property Management Cost Increases**

Description		FY 2014-15	FY 2015-16
<b>Sources:</b>		\$ -	\$ -
Subtotal Sources		-	-
<b>Uses:</b>			
	Contractual Services	\$ -	\$ 408,000
	Rent and Leases - Buildings	-	179,819
Subtotal Uses		-	587,819
<b>Net General Fund Subsidy Required (savings)/cost (Uses less Sources)</b>		\$ -	\$ 587,819
<b>Total FTE's</b>		<b>0.0</b>	<b>0.0</b>

**New Positions** (List positions by Class, Title and FTE)

Class	Title	FTE		
			-	-
			-	-
			-	-
			-	-
	Fringe (FY 13-14 = 42% , FY 14-15 = 47% )		-	-
			\$ -	\$ -

**Operating Expenses**

Index Code	Character/Subobject Code		
HCHSHHOUSGGF	021/02700		\$ 408,000
HCHSHHOUSGGF	021/03000		179,819

**Facilities Maintenance, and Equipment** (List by each item by count and amount)

**2014-15 and 2015-16 Program Change Request**

**DEPARTMENT NAME:**

- |   |   |
|---|---|
| <input type="checkbox"/> San Francisco General Hospital | <input checked="" type="checkbox"/> Public Health |
| <input type="checkbox"/> Laguna Honda Hospital          | <input type="checkbox"/> CBHS - Mental Health     |
| <input type="checkbox"/> Primary Care                   | <input type="checkbox"/> CBHS - Substance Abuse   |
| <input type="checkbox"/> Jail Health                    | <input type="checkbox"/> Health At Home           |

PROGRAM / INITIATIVE TITLE: **Environmental Health Baseline Revenue/Expenditures**

TARGETED CLIENTS: All San Francisco Residents and Regulated Business Establishments

PROGRAM CONTACT NAME/PHONE: Cyndy Comerford 415-252-3989

2014-15 FTE Change	2015-16 FTE Cumulative Change	FY 2014-15 Net General Fund Impact	FY 2015-16 Cumulative Net General Fund Impact
3.60	4.75	(\$0)	(\$0)

**PROGRAM DESCRIPTION:** (Brief description of Program Change)

The San Francisco Department of Public Health's Environmental Health Branch strives to promote health and quality of life in San Francisco by ensuring healthy living and working conditions in the City and County of San Francisco. Projected revenues fluctuate annually due various reasons, including change in inventory, new fees, and changes in regulatory programs, fee increases and economic conditions. Expenditures are adjusted ensure that programs do not exceed 100% cost recovery and that there is little net impact on the General Fund.

**JUSTIFICATION:**

Projected increases in revenues are due to fee increases, changes in inventory and program changes due to state regulations. Expenditures are adjusted accordingly for workloads to ensure cost recovery, there is adequate staff, resources to carry out additional regulatory work and there is not net impact on the General Fund. Environmental Health's baseline revenues will be increased by 759,098 in FY14-15 and 15-16.

The following programs have changes in revenue:

Program Name	Cost Center	Justification	Change in Baseline Revenue
Base Closure Program	HCHPBBSCLSGF	The circumstances and funding stream for increased revenue has changed because of redevelopment. Expenditures and fees (20%) have been changed accordingly.	(199,733)
Retail Food Safety Program	HCHPBFOOD-GF	There has been a significant increase in new restaurants (321 new eating establishments and 78 new mobile food vendors), changes in legislation, Cottage Food and the introduction of Hazard Analysis Critical Control Plans (HACCP) for high risk food establishments. There are no fee increases and a need for increased staff (4 FTE) supported completely by revenue due to increase inventory.	578,275
Hazardous Materials and Waste Program	HCHPBHAZMTGF	Decrease in revenue and cost which has been consistent with historical trends. 3.5% increase in fees.	(240,027)

Air Quality, Noise, Radiation & Site Mitigation Programs	HCHPBHAZWTGF	Slight increase in revenue due to new legislation last year (Maher Ordinance) and fee increases (3.5%)	84,986
Agriculture, Weights and Measure Program	HCHPBINSPECT	Increase in revenue due to 2013 legislation. Fees are set by the state.	242,268
Massage Program	HCHPBMASSAGF	Minor fee increases (3.5%) and increase in inventory due to new legislation that will now let us inspect CAMTC sites	67,282
Medical Cannabis Program	HCHPBMEDCNGF	No major changes	(2,749)
Potable Water Program	HCHPBNONPWGF	Slight Increase in fees & inventory	31,833
Solid Waste Inspection Program	HCHPBPUBSVGF	Increase revenue due to inventory	116,100
Tattoo, Body Piercing and Permanent Cosmetics Program	HCHPBTAOOGF	Minor Fee Increases (3.5% ) and inventory increase due to new legislation (Safe Body Arts)	17,900
Tobacco Prevention Program	HCHPBTOBACGF	Minor fee increases (3.5%) and decreases in revenue expected.	2,618
The Healthy Housing Program	HCHPBVECTRGF	The Healthy Housing program will add a mental health specialist (1 FTE) to support housing inspectors with behavioral health issues for proper code enforcement to ensure safe and healthy housing. Revenue increases include fee increases (4.5%), increase in inventory (new housing) and increased collections.	259,442
Water Quality Program	HCHPBWATERGF	Removal of the cross connection placard program which will result in loss of \$250K and 7 – 10% increase in pool and water well inspections. No significant impact to general fund	(199,097)

**IMPACT ON CLIENTS:** (unit of service and/or number of clients affected)

None.

**EXPENSE AND REVENUE IMPACT:** (for both fiscal years)

The Environmental Health's baseline revenues will be increased by \$759,099 in FY14-15 and \$759,099 in FY15-16. The Environmental Health's baseline expenditures will be increased accordingly.

**IMPACT ON DEPARTMENT'S WORKFORCE :**

Increase FTE 3.60 in FY 2014-2015 and 4.75 FY 2015-2016



**INITIATIVE TITLE: Environmental Health Baseline Revenue/Expenditures**

Description		FY 2014-15	FY 2015-16
<b>Sources:</b>			
	Revenues	\$ 759,098	\$ 759,098
	Subtotal Sources	\$ 759,098	\$ 759,098
<b>Uses:</b>			
	Salary and Benefits	\$ 738,222	\$ 738,223
	Non Personnel Services	\$ 20,875	\$ 20,875
	Subtotal Uses	\$ 759,097	\$ 759,098
<b>Net General Fund Subsidy Required (savings)/cost (Uses less Sources)</b>		\$ (0)	\$ -
<b>Total FTE's</b>		3.60	4.75

**New Positions (List positions by Class, Title and FTE)**

Class	Title	FTE		FTE	
6120	Environmental Health Inspector	1.54	\$ 160,400	2.00	\$ 208,312
6122	Senior Environmental Health Inspector	0.77	\$ 85,806	1.00	\$ 111,436
1406	Environmental Health Technician I	0.77	\$ 41,722	1.00	\$ 54,184
2930	Senior Pyschiatric Social Worker	0.77	\$ 69,269	1.00	\$ 89,960
2233	Senior Supervising Physician	(1.00)	\$ (234,054)	(1.00)	\$ (240,148)
0941	Manager VI	1.00	\$ 164,346	1.00	\$ 164,346
1023	IS Administrator II	(1.00)	\$ (102,882)	(1.00)	\$ (102,882)
1024	IS Administrator Supervisor	1.00	\$ 110,708	1.00	\$ 110,708
5207	Associate Engineer	(1.00)	\$ (112,918)	(1.00)	\$ (112,918)
1823	Senior Administrative Analyst	1.00	\$ 98,488	1.00	\$ 98,448
6137	Assistant Industrial Hygenist	(0.25)	\$ (21,580)	(0.25)	\$ (21,580)
9993M	Salary Savings Adjustment	-	\$ 271,368	-	\$ 94,895
	Total Salary	3.60	530,673	4.75	454,761
	Fringe		207,549		283,462
	Total Salary and Fringe	3.60	\$ 738,222	4.75	\$ 738,223

**Operating Expenses**

Index Code	Character/Subobject Code		
02401	Membership Dues	\$ 875	\$ 875
081PF	Central Shops	\$ 20,000	\$ 20,000
		\$ 20,875	\$ 20,875

## 2014-15 and 2015-16 Program Change Request

**DEPARTMENT NAME:**

- |   |   |
|---|---|
| <input type="checkbox"/> San Francisco General Hospital   | <input type="checkbox"/> Public Health          |
| <input checked="" type="checkbox"/> Laguna Honda Hospital | <input type="checkbox"/> CBHS - Mental Health   |
| <input type="checkbox"/> Primary Care                     | <input type="checkbox"/> CBHS - Substance Abuse |
| <input type="checkbox"/> Jail Health                      | <input type="checkbox"/> Health At Home         |

PROGRAM / INITIATIVE TITLE: Laguna Honda Hospital Hepatitis C Pharmacy Services

TARGETED CLIENTS:

PROGRAM CONTACT NAME/PHONE: **David Woods/206-2332**

2014-15 FTE Change	2014-15 FTE Cumulative Change	FY 2014-15 Net General Fund Impact	FY 2015-16 Cumulative Net General Fund Impact
n/a	n/a	(\$0)	(\$0)

**PROGRAM DESCRIPTION:** (Brief description of Program Change)

This initiative requests increase expenditure authority to purchase a new class of pharmaceuticals developed to treat Hepatitis C. The cost of this drug will be offset by reimbursement from insurance programs including Medi-Cal and Medicare.

**JUSTIFICATION:**

Hepatitis C is a contagious viral infection that can result in long term liver disease. Symptoms can range from a mild illness lasting a few weeks ("acute") to a serious, lifelong illness ("chronic"). Chronic hepatitis C is the most common reason for liver transplantation which has an average cost in the range of \$280,000 in just the first year after transplant. There is no vaccine for hepatitis C.

New medications have become available which are aimed at treating the most common variant of the hepatitis C virus (known as Genotype 1) which accounts for around 70 percent of hepatitis C cases in the United States. Combining one of these new protease inhibitors with the current standard therapy almost doubles effectiveness and makes it possible to shorten the length of some treatments, which reduces side effects and improves outcomes.

This group of drugs includes Sofosbuvir, an all-oral treatment, which was recently approved by the FDA. This new treatment offers a higher cure rate with less toxicity and a shorter duration for treatment. Hepatitis C is a chronic infection which can be effectively treated with new medications. That means fewer cases of cirrhosis, liver cancer, fewer liver transplants, or deaths. New medications offer a higher cure rate with less side effects and a shorter duration of treatment. Pricing is approximately \$92,000 per a course per patient and is reimbursable by insurance.

**IMPACT ON CLIENTS:** (unit of service and/or number of clients affected)

Approximately 1 patient per month will be eligible for treatment. Total of 12 patients annually.

**EXPENSE AND REVENUE IMPACT:** (for both fiscal years)

Insurance providers will now cover the cost of treatment for appropriately selected patients. \$1,104,000 additional drug cost will be offset by increased revenue of \$1,104,000 in first year and increase to \$1,137,120 for both ongoing revenue and expenses. There is no General Fund impact for treatment.

**IMPACT ON DEPARTMENT'S WORKFORCE:**

None.



**2014-15 and 2015-16 Program Change Request**

**DIVISION AND SECTION:**

- |   |  |   |
|---|--|---|
| <input type="checkbox"/> San Francisco General Hospital | <input type="checkbox"/> Laguna Honda Hospital | <input type="checkbox"/> CBHS - Substance Abuse |
| <input checked="" type="checkbox"/> Primary Care        | <input type="checkbox"/> Health At Home        | <input type="checkbox"/> CBHS - Mental Health   |
| <input type="checkbox"/> Jail Health                    | <input type="checkbox"/> Public Health         | <input type="checkbox"/> DPH – Department Wide  |

PROGRAM / INITIATIVE TITLE: **Denti-Cal Expansion**

TARGETED CLIENTS: Denti-Cal and Healthy San Francisco Patients in DPH Primary Care System

PROGRAM CONTACT NAME/PHONE: Bill Blum (415) 255-3516

2014-15 FTE Change	2015-16 FTE Cumulative Change	FY 2014-15 Net General Fund Impact	FY 2015-16 Cumulative Net General Fund Impact
2.60	4.00	\$0	\$0

**PROGRAM DESCRIPTION: (Brief description of Program Change)**

DPH will expand its Dental Program to address changes in State law that greatly enhances adult dental benefits. (In California, the Medicaid program is called Medi-Cal and the dental program is called Denti-Cal.) Specifically, this proposal would add four new positions to expand dental service capacity in the following DPH primary care health centers: Silver Avenue, Chinatown, Southeast, Potrero Hill and Tom Waddell.

**JUSTIFICATION:**

Based on the May 1, 2014 expansion of dental benefits to DPH's currently MediCal eligible adults, along with the January 1, 2014 implementation of ACA and its resulting increase of an estimated 15,000 newly MediCal eligible DPH patients, DPH must expand its capacity to provide mandated dental services to these members. The new positions will be fully covered by Denti-Cal reimbursement for services. Also, the Department believes that by co-locating dental services within primary care clinics, allowing patients to receive all their care in one location, DPH's San Francisco Health Network will be a more attractive choice as a health care provider for both existing and new members.

Coverage for dental services has shifted over the past few years. In July, 2009, State law eliminated most adult dental services as a Medi-Cal benefit due to the State's budget crisis. Federally mandated services were continued, including some adult dental services for women 21 years of age or older who were pregnant and needed to receive pregnancy-related services or services to treat a condition that could have caused a problem in pregnancy, as well as limited dental services for the relief of pain, infection or trauma, (such as tooth removal) for otherwise excluded adults. As of May, 2014, State law changed again in response to a lawsuit, and now all eligible adults have access to an expanded set of dental services including exams, x-rays, cleanings, fillings, dentures, etc.

**IMPACT ON CLIENTS: (unit of service and/or number of clients affected)**

Based on previous utilization patterns, a minimum of 25% of the 15,000 newly MediCal eligible, or 3,750 individuals, plus an estimated 866 existing MediCal eligible adults (4,616 total) will have approximately 2.77 visits each, resulting in an additional 12,787 visits annually.

**EXPENSE AND REVENUE IMPACT: (for both fiscal years)**

Total Revenues and Expenses: \$484,677 in FY14-15; \$665,077 in FY15-16.

**IMPACT ON DEPARTMENT'S WORKFORCE:**

Increase of 2.0 FTE 2210 Dentist and 2.0 FTE Dental Aide.

**INITIATIVE TITLE: Denti-Cal Expansion Initiative**

Description		FY 2013-14	FY 2014-15
<b>Sources:</b>			
	Revenues	\$ 428,076	\$ 665,077
Subtotal Sources		\$ 428,076	\$ 665,077
<b>Uses:</b>			
	Salary and Benefits	\$ 421,576	\$ 655,077
	Non Personnel Services	\$ 6,500	\$ 10,000
Subtotal Uses		\$ 428,076	\$ 665,077
<b>Net General Fund Subsidy Required (savings)/cost (Uses less Sources)</b>		\$ -	\$ 0
<b>Total FTE's</b>		2.60	4.00

**New Positions (List positions by Class, Title and FTE)**

<u>Class</u>	<u>Title</u>	<u>FTE</u>		<u>FTE</u>	
2202	Dental Aide (2 - COPC)	1.30	\$ 88,962	2.00	\$ 138,233
2210	Dentist (2 - COPC)	<u>1.30</u>	<u>\$ 206,585</u>	<u>2.00</u>	<u>\$ 321,002</u>
	Total Salary	2.60	295,547	4.00	459,235
	Fringe		<u>126,028</u>		<u>195,842</u>
	Total Salary and Fringe	2.60	\$ 421,576	4.00	\$ 655,077

**Operating Expenses**

Index Code			
HCHAPADMINGF	Dental Supplies (04000 - M&S)	\$ 6,500	\$ 10,000
		\$ 6,500	\$ 10,000

**Facilities Maintenance, and Equipment (List by each item by count and amount)**

**2014-15 and 2015-16 Program Change Request****DEPARTMENT NAME:**

- |  |   |
|--|---|
| <input checked="" type="checkbox"/> San Francisco General Hospital | <input type="checkbox"/> Public Health          |
| <input type="checkbox"/> Laguna Honda Hospital                     | <input type="checkbox"/> CBHS - Mental Health   |
| <input type="checkbox"/> Primary Care                              | <input type="checkbox"/> CBHS - Substance Abuse |
| <input type="checkbox"/> Jail Health                               | <input type="checkbox"/> Health At Home         |

PROGRAM / INITIATIVE TITLE: **Primary Care Expansion**

TARGETED CLIENTS: Primary Care Patients

PROGRAM CONTACT NAME/PHONE: Alice Chen, MD and Hali Hammer, MD

2014-15 FTE Change	2015-16 FTE Cumulative Change	FY 2014-15 Net General Fund Impact	FY 2015-16 Cumulative Net General Fund Impact
10.91	11.55	\$0	\$0

**PROGRAM DESCRIPTION:** (Brief description of Program Change)

In the context of health reform and Medicaid expansion, this initiative creates capacity to provide primary care medical homes for an additional 3,600 patients. This expansion will occur in the Family Health Center, which will care for 3,000 additional patients, and the General Medicine Clinic, which will care for 600 additional patients compared to June 2013 baseline active panel sizes. Both clinics will be expanding evening and weekend hours to accommodate these new patients, and will be staffed according to the San Francisco Health Network's target ratio of 4.5 FTE support staff per provider FTE.

**JUSTIFICATION:**

The San Francisco Health Network has approximately 78,000 patients assigned to primary care medical homes; however, only approximately 70,000 have established care. This is due in part to a lack of capacity in our system, which impacts access to care. In order to maximize the likelihood that patients who are newly insured by Medicaid choose SFHN as their healthcare provider, SFHN is undertaking a "primary care surge" to rapidly expand capacity and increase access to care. The initial surge from July 2013 through June 2015 is being funded by one-time funds from the San Francisco Health Plan. On-going cost will be covered through increased capitation revenues in FY1516.

**IMPACT ON CLIENTS:** (unit of service and/or number of clients affected)

Between July 1, 2013 and December 31, 2013, the Family Health Center increased its active patient panel size by 1,000 patients. Between January 1, 2014 and June 30, 2014, the Family Health Center will increase its active panel size by another 500 patients. During fiscal year 2014-2015, the Family Health Center will increase its active panel size by an additional 1,500 patients, and the General Medicine Clinic by 600 patients. These increases are contingent upon hiring new providers and maintaining existing provider staff as well the San Francisco Health Network's target ratio of 4.5 FTE support staff per provider FTE

**EXPENSE AND REVENUE IMPACT:** (for both fiscal years)

Expenses and revenues will both increase by \$1,572,232 in FY1415 and by \$1,694,615 in FY15-16.

**IMPACT ON DEPARTMENT'S WORKFORCE :**

FTE's will increase by 10.14 FTE's in FY14-15 and 10.55 FTE's in FY15-16.

**INITIATIVE TITLE: PC Expansion**

Description		FY 2014-15	FY 2015-16
<b>Sources:</b>			
Revenues		\$ 1,572,232	\$ 1,694,615
Subtotal Sources		\$ 1,572,232	\$ 1,694,615
<b>Uses:</b>			
Salary and Benefits		\$ 1,019,805	\$ 1,171,094
Operating Expense		\$ 552,427	\$ 523,521
Subtotal Uses		\$ 1,572,232	\$ 1,694,615
<b>Net General Fund Subsidy Required (savings)/cost (Uses less Sources)</b>		\$ -	\$ -
<b>Total FTE's</b>		10.91	11.55

**New Positions (List positions by Class, Title and FTE)**

Class	Title	FTE		FTE	
1406	Sr Clerk (FHC)	1.39	75,099	1.80	97,531
2112	Medical Records Technician	1.54	106,506	2.00	138,320
2586	Healthworker II (FHC)	0.77	45,666	1.00	59,306
2591	Health Program Coordinator II Telehealth	0.77	67,447	1.00	87,594
2430	Medical Exam Assistant (FHC)	2.31	140,060	3.00	181,896
2320	Registered Nurse (FHC)	0.46	65,261	0.60	84,755
2430	Medical Exam Assistant (GMC)	1.54	93,373	2.00	121,264
2320	Registered Nurse (GMC)	0.54	76,138	0.70	98,881
TEMPM	Temp Salaries	2.09	178,490	0.00	0
STEPM	Step Adjustment		(30,100)		(50,040)
9993M	Attrition	(0.50)	(36,120)	(0.55)	(41,700)
Total Salary		10.91	781,821	11.55	777,807
Fringe		30.4%	237,984	50.6%	393,287
Total Salary and Fringe		<b>10.91</b>	<b>1,019,805</b>	<b>11.55</b>	<b>1,171,094</b>

**Operating Expenses**

Index Code	Character/Subobject Code		
	UCSF Affiliation FHC		440,503
	UCSF Affiliation GMC	\$ 211,308	\$ 211,308
	Non Personnel Services VMI	\$ (99,384)	\$ (128,290)
		\$ 552,427	\$ 523,521

**Facilities Maintenance, and Equipment (List by each item by count and amount)**

2013-14 and 2014-15 Program Change Request

**DIVISION AND SECTION:**

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> San Francisco General Hospital | <input type="checkbox"/> Laguna Honda Hospital | <input type="checkbox"/> CBHS - Substance Abuse          |
| <input checked="" type="checkbox"/> Primary Care        | <input type="checkbox"/> Health At Home        | <input checked="" type="checkbox"/> CBHS - Mental Health |
| <input type="checkbox"/> Jail Health                    | <input type="checkbox"/> Public Health         | <input type="checkbox"/> DPH – Department Wide (HUH)     |

PROGRAM / INITIATIVE TITLE: **Non-Specialty Mental Health Services**

TARGETED CLIENTS: MediCal Eligible Clients

PROGRAM CONTACT NAME/PHONE: **Jo Robinson/255-3400**

2014-15 FTE Change	2015-16 FTE Cumulative Change	FY 2014-15 Net General Fund Impact	FY 2015-16 Cumulative Net General Fund Impact
1.54	2.0	\$0	\$0

**PROGRAM DESCRIPTION:** (Brief description of Program Change)

The purpose of this initiative is to add capacity to enable the Department of Public Health's, San Francisco Health Network (SFHN), DPH's provider network, to meet the capacity and reporting requirements for the delivery of non-specialty mental health services to its eligible members.

Non-specialty mental health services are an essential benefit that must be available within each provider network, per the requirements of the Affordable Care Act (ACA). Specifically, outpatient mental health services must be offered to members who have been diagnosed with a mental health disorder that results in mild to moderate distress. Research indicates that approximately 11 percent of the population requires non-specialty mental health care, or approximately 2,665 of the 24,136 enrolled members of the SFHN. Like all members of the SFHN, each of these 2,665 members will be assigned to a primary care clinic, which will serve as his or her Medical Home. Within each primary care clinical team is a team member referred to as a Behaviorist, and it is the Behaviorist, a licensed mental health professional, who will address the mental health needs of these members. If a primary care clinic does not have a Behaviorist, or if the individual requires more than a brief intervention, he or she will be referred to DPH's Community Behavioral Health Services (CBHS) Private Provider Network (PPN).

The proposed initiative would fund one Behaviorist (2930- Psychiatric Social Worker) to address the anticipated growth of non-specialty mental health service need thus ensuring members are able to obtain services for which they are eligible. In addition, to addressing capacity issues, the San Francisco Health Network must comply with intensive and complex, monthly reporting requirements, covering multiple data elements derived from multiple reporting systems (and the creation of new ones) to be in compliance with the State Department of Health Care Services requirements. The Department would hire a 2119 Health Care Analyst to perform these reporting requirements. The balance of the expected capitation revenues would be allocated to the PPN. The San Francisco Health Plan reimburses the San Francisco Health Network a per member per month capitated rate for each member for the provision of non-specialty mental health services.

**JUSTIFICATION:**

The Department's San Francisco Health Network is obligated to deliver non-specialty mental health services to its members to be in compliance with ACA. Additionally, the Department must comply with the State's reporting requirements, or risk losing its status as a provider network available through the San Francisco Health Plan. Therefore, the proposed initiative is cost neutral.

**IMPACT ON CLIENTS:** (unit of service and/or number of clients affected)

The Department estimates that approximately 2,665 of the SFHN's MediCal members will seek non-specialty mental health services.



**EXPENSE AND REVENUE IMPACT: (for both fiscal years)**

The Department anticipates revenues of \$1,831,659, based on the capitation rate paid each  
The proposed expenses would be \$1,831,659, of which in FY14-15, \$199,108 would be used for Salaries and Fringe Benefits, and \$1,632,551 would be used for the Private Provider Network, and in FY15-16, \$258,582 would be used for Salaries and Fringe Benefits, and \$1,573,077 would be used for the Private Provider Network.

**IMPACT ON DEPARTMENT'S WORKFORCE :**

Increase of 1.0 FTE 2930/31 Psychiatric Social Worker and 1.0 FTE 2119 Health Care Analyst.

**ATTACHMENT B  
SUMMARY OF PROGRAM COST**

**INITIATIVE TITLE: SFHP Non-Specialty MH Services**

Description		FY 2014-15	FY 2015-16
<b>Sources:</b>			
SFHP Capitation		\$ 1,831,659	\$ 1,831,659
Subtotal Sources		1,831,659	1,831,659
<b>Uses:</b>			
001/013	Salary & Fringes	\$ 199,108	\$ 258,582
027	Private Provider Network	1,632,551	1,573,077
Subtotal Uses		1,831,659	1,831,659
<b>Net General Fund Subsidy Required (savings)/cost (Uses less Sources)</b>		\$ 0	\$ (0)
<b>Total FTE's</b>		<b>1.54</b>	<b>2.00</b>

**New Positions** (List positions by Class, Title and FTE)

Class	Title	FTE		FTE	
2930	Psychiatric Social Worker	0.77	69,278	1.00	89,971
2119	Health Care Analyst	0.77	66,170	1.00	85,935
		1.54	135,448	2.00	175,906
Fringes - 47%			63,660		82,676
			199,108		258,582

**Operating Expenses**

Index Code	Character/Subobject Code	\$	\$
		-	-

**Facilities Maintenance, and Equipment** (List by each item by count and amount)

**2014-15 and 2015-16 Program Change Request**

**DEPARTMENT NAME:**

- |   |   |
|---|---|
| <input type="checkbox"/> San Francisco General Hospital | <input type="checkbox"/> Public Health          |
| X Laguna Honda Hospital                                 | <input type="checkbox"/> CBHS - Mental Health   |
| <input type="checkbox"/> Primary Care                   | <input type="checkbox"/> CBHS - Substance Abuse |
| <input type="checkbox"/> Jail Health                    | <input type="checkbox"/> Health At Home         |

PROGRAM / INITIATIVE TITLE: **LHH Admin Building Operating Expenses**  
 PROGRAM CONTACT NAME/PHONE: **Mike Llewellyn/759-2363**  
 TARGETED CLIENTS: N/A

2014-15 FTE Change	2015-16 FTE Cumulative Change	FY 2014-15 Net General Fund Impact	FY 2015-16 Cumulative Net General Fund Impact
0.00	0.00	\$1,066,703	\$1,106,245

**PROGRAM DESCRIPTION:** (Brief description of Program Change)

As part of the LHH Administrative Building Re-Use Project, DPH will renovate the remaining vacant space in the LHH administration building to help address DPH's administrative space needs. This request is to fund the facility and operating costs of this newly utilized space, including utilities, telecommunication, security, housekeeping, environmental services, building maintenance, storekeeper and accounting services.

**JUSTIFICATION:**

This additional space will help address DPH's current and upcoming administrative space needs as well as long term goal of vacating rented space from private property owners. Additional administrative office space is currently needed to support DPH program expansions over the last several years. In several areas, existing space has been inadequate to meet the needs of existing administrative staff. In addition, in the next several years, DPH plans to seismically retrofit major buildings on the SFGH campus after the new SFGH Rebuild is complete, as well as 101 Grove, a major administrative hub. DPH plans to utilize the space at LHH as swing space, as needed, to house staff until the seismic retrofit on their respective building is complete. This will allow the department to avoid additional temporary rental relocation costs during construction. Finally, the department will be permanently relocating administrative staff over a number of years, many of which currently occupy rented space, to reduce general fund costs.

**IMPACT ON CLIENTS:** (unit of service and/or number of clients affected)

None.

**EXPENSE AND REVENUE IMPACT:** (for both fiscal years)

Expenses will increase by \$1,066,703 in first year and \$1,106,245 in second year.

**IMPACT ON DEPARTMENT'S WORKFORCE:**

This new building will require funding for 6.22 FTE to maintain and manage the expanded and full use of this existing vacant facility.

**ATTACHMENT B  
SUMMARY OF PROGRAM COST**

**INITIATIVE TITLE: LHH Admin Building Operating Expenses**

Description		FY 2014-15	FY 2015-16
<b>Sources:</b>		\$ -	\$ -
Subtotal Sources		-	-
<b>Uses:</b>			
Salary & Fringes		680,271	698,173
Operating Expenses		386,432	408,072
Subtotal Uses		1,066,703	1,106,245
<b>Net General Fund Subsidy Required (savings)/cost (Uses less Sources)</b>		\$ 1,066,703	\$ 1,106,245
<b>Total FTE's</b>		<b>0.00</b>	<b>0.00</b>

**New Positions** (List positions by Class, Title and FTE)

Class	Title	FTE	FY 14-15	FTE	FY15-16
2740	Porter Supervisor (existing position)		66,213		66,213
1406	Clerk (EVS & Fac Maint - existing position)		54,186		54,186
7342	Locksmith (existing position)		41,361		41,361
7347	Plumber (existing position)		96,139		96,139
1652	Accountant (existing position)		94,749		94,749
1934	Storekeeper (existing position)		57,186		57,186
TempM	Temp Misc		39,303		50,357
		0.00	449,137	0.00	460,191
	Fringe (FY 14-15 = 51.46% , FY 15-16 = 47% )		231,134		237,982
			\$ 680,271		\$ 698,173

**Operating Expenses**

Index Code	Character/Subobject Code	FY 14-15	FY15-16
HLHNONLHH	081UL PUC work order (utilities)	2,776	3,569
HLHNONLHH	081W2 PUC work order (water)	320	412
HLHNONLHH	081W1 PUC work order (sewer services)	1,281	1,647
HLHNONLHH	081W6 Real Estate work order (elevator & fire alarm maint)	30,000	30,000
HLHNONLHH	081SH Sheriff work order (security services)	280,694	280,694
HLHNONLHH	021/02800 other building maintenance (EVS)	47,824	61,488
HLHNONLHH	021/02800 other building maintenance (Fac Maint)	5,338	6,863
HLHNONLHH	040/04000 Materials & Supplies	18,200	23,400

**Facilities Maintenance, and Equipment** (List by each item by count and amount)

**2014-15 and 2015-16 Program Change Request**

**DEPARTMENT NAME:**

- |  |   |
|--|---|
| <input checked="" type="checkbox"/> San Francisco General Hospital | <input type="checkbox"/> Public Health          |
| <input type="checkbox"/> Laguna Honda Hospital                     | <input type="checkbox"/> CBHS - Mental Health   |
| <input type="checkbox"/> Primary Care                              | <input type="checkbox"/> CBHS - Substance Abuse |
| <input type="checkbox"/> Jail Health                               | <input type="checkbox"/> Health At Home         |

PROGRAM / INITIATIVE TITLE: **SFGH New Hospital Operating Budget**

TARGETED CLIENTS: Patients of San Francisco General Hospital

PROGRAM CONTACT NAME/PHONE: Sue Currin, CEO

2014-15 FTE Change	2015-16 FTE Change Operating Fund	FY 2014-15 Net General Fund Impact	FY 2015-16 Cumulative Net General Fund Impact
n/a	96.74	\$0	\$26,853,346

**PROGRAM DESCRIPTION:** (Brief description of Program Change)

Since 1854, San Francisco General Hospital (SFGH) has evolved into a major academic medical center and currently serves approximately 1,500 patients per day (100,000 patients per year) and is the only Level One Trauma Center serving 1.5 million residents of San Francisco and northern San Mateo counties.

In 1994 the State of California Legislature passed SB1953, an amendment to the *Alfred E. Alquist Hospital Seismic Safety Act of 1983* emphasizing that essential facilities, such as hospitals, should remain operational after an earthquake.

Since 1994, the City and County of San Francisco has been planning for a seismically safe public hospital and in 2008 voters approved \$887 million dollars in general obligation bonds to rebuild SFGH. Acute care medical services currently located in the existing main hospital building will be relocated to the new hospital while services not subject to Senate Bill 1953 requirements for seismic compliance would remain in the existing hospital. The new facility is scheduled to open operationalize in December 2015.

**JUSTIFICATION:**

In addition to an expanded and more technologically advanced physical plant, the new hospital plans for increased services in the Emergency Department, Perioperative and Ancillary Services, as well as a reconfiguration of inpatient beds in order to decrease wait times and increase access to services.

- **Emergency Department (ED):** The new facility increases the number of beds in the ED from 27 to 60. The hospital plans to staff 44 beds with an estimated 10% increase in adult visits and reducing the Left Without Being Seen (LWBS) rate. Additionally, approximately 10,400 Pediatric Urgent Care Services visits will relocate to the new Emergency Department and allow for expansion of the pediatric primary care clinic capacity. We expect the ED expansion to dramatically decrease our diversion rate, which was 41% in 2013.
- **Perioperative Services:** The new hospital budget plans for 3 additional Operating Rooms for Surgery as well as an increase in Endoscopy suites. Surgical procedures are expected to increase by an estimated 17% while endoscopy procedures are estimated to increase by 1500 sessions per year. Increased services in Surgery and Endoscopy require that additional resources be budgeted for Anesthesia, Pre-Op Clinics, Surgicenter and the Post Anesthesia Care Unit (PACU). Currently, the wait time for pelective surgery is 180 days. The expansion will improve access.

- **Inpatient Services** The new facility contains a total of 284 acute inpatient beds. The budget plans for staffing approximately 75% of these beds (210) and reprogramming beds to increase higher level beds and decrease lower level beds for a net decrease of 15 staffed beds compared to current budgeted operations (225 budgeted beds). An increase in higher level beds requires additional resources in Respiratory Services.
- **Ancillary Services.** *Pharmacy Services* for Inpatient and Surgery will move into the new facility while maintaining outpatient pharmacy services and a satellite pharmacy (fourth floor) in the old facility. The new facility calls for an increase in medication dispensing stations as well as a discharge kiosk both of which require additional budgeted resources. These changes from current operations are expected to increase nursing efficiencies and provide for a better patient experience. *Radiology Services* requires additional budgeted resources in order to provide for decentralized Emergency, Inpatient and Interventional Radiology services in the new facility while maintaining comprehensive outpatient services in the current facility. Additional staffing is required to support an increased number of PET-CT/CT/MRI and ultrasound devices with improved technology.
- **Facilities:** The new hospital supplemental operating budget plans for additional resources to support increased square footage and density of technology. For example, there will be room configuration changes (e.g., isolations rooms with ante rooms that have variable air volume controls and dedicated exhaust systems, two kitchens) and increased regulatory demands driven by increased equipment and technology. The new hospital is designed as a "stand alone" structure and will not use any existing plant infrastructure. New building systems are duplicative and additional to the existing facility. Highly complex technology for building systems also contributes to more staffing and an evolved skill mix that can administer and maintain new technologies
- **Environmental Services:** The new hospital operating budget plans for additional resources in order to support a larger Emergency Department, increased number of operating rooms, IR and Endoscopy Suites, more inpatient rooms and for an additional 217 bathrooms compared to current operations.
- **Other Support Services;** The new hospital operating budget plans additional resources for support services; Information Technology, Food Service, Materials Management, Clinical Labs and Medical Social Services. (details available in attachments)

**IMPACT ON CLIENTS:** (unit of service and/or number of clients affected)

Emergency Department adult visits are expected to increase by 10% or 5,000 visits per year. In addition, 10,400 pediatric urgent care visits will be relocated to the Emergency Department. Surgical Procedures are expected to increase by 17% or 1,250 procedures. Endoscopy Procedures are planned to increase by 28.5 sessions per week and 1,500 procedures per year  
Inpatient bed days are planned to decrease by 5,475 days per year, with 210 budgeted beds.

**EXPENSE AND REVENUE IMPACT:** (for both fiscal years)

Operating Expenses will begin in FY15-16 is projected to be \$26,853,346 with an annualized cost of 32,334,914 (see attachment B).

**IMPACT ON DEPARTMENT'S WORKFORCE:**

FTE's will increase by 96.74 in FY15-16, and will increase to 118.72 by FY16-17 (see attached).

**INITIATIVE TITLE: SFGH New Hospital Supplemental Operating Budget**

Description		FY 2014-15	FY 2015-16	FY 2016-17
<b>Sources:</b>			\$ -	
Subtotal Sources		\$ -	\$ -	
<b>Uses:</b>	Salary and Benefits		\$ 11,419,491	\$ 14,346,842
	UCSF Affiliation Agreement	\$ -	\$ 8,039,974	\$ 10,008,655
	Non Personell Services		\$ 2,681,759	\$ 2,681,759
	Materials and Supplies		\$ 2,550,536	\$ 3,136,072
	City Dept Workorders		\$ 2,161,586	\$ 2,161,586
Subtotal Uses		\$ -	\$ 26,853,346	\$ 32,334,914
<b>Net General Fund Subsidy Required (savings)/cost (Uses less Sources)</b>		\$ -	\$ 26,853,346	\$ 32,334,914
<b>Total FTE's</b>			<b>96.74</b>	<b>118.72</b>