

HEALTH CARE FOR THE HOMELESS/FARMWORKER HEALTH PROGRAM (HCH/FH)

Co-Applicant Board Meeting Agenda

San Mateo Medical Center/ 222 W. 39th Ave. 2nd floor (Education Classroom 2)

March 9th, 2023, 10:00am - 12:00pm

This meeting of The Health Care for The Homeless/Farmworker Health board will be held in-person at San Mateo Medical Center/ 222 W. 39th Ave. 2nd floor (Education Classroom 2). Remote participation in this meeting will not be available. To observe or participate in the meeting, please attend in-person at San Mateo Medical Center/ 222 W. 39th Ave. 2nd floor (Education Classroom 2).

*Written public comments may be emailed to masfaw@smcgov.org, and such written comments should indicate the specific agenda item on which you are commenting.

*Please see instructions for written and spoken public comments at the end of this agenda.

A. CALL TO ORDER & ROLL CALL	Robert Anderson	10:00am
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B. PUBLIC COMMENT	10:05am
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Persons wishing to address on matters NOT on the posted agenda may do so. Each speaker is limited to three minutes and the total time allocated to Public Comment is fifteen minutes. If there are more than five individuals wishing to speak during Public Comment, the Chairperson may choose to draw only five speaker cards from those submitted and defer the rest of the speakers to a second Public Comment at the end of the Board meeting. In response to comments on a non-agenda item, the Board may briefly respond to statements made or questions posed as allowed by the Brown Act (Government Code Section 54954.2) However, the Boards general policy is to refer items to staff for comprehensive action or report.

C. ACTION TO SET THE AGENDA & CONSENT AGENDA	Robert Anderson	10:10am
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1. Approve meeting minutes from February 9, 2023, Board Meeting	Tab 1
2. Contracts and MOUs update	Tab 2
3. Budget and Finance Report	Tab 3
4. Quality Improvement/Quality Assurance update	Tab 4

D. COMMUNITY ANNOUNCEMENTS / GUEST SPEAKER

Communications and Announcements are brief items from members of the Board regarding upcoming events in the community and correspondence that they have received. They are informational in nature and no action will be taken on these items at this meeting. A total of five minutes is allotted to this item. If there are additional communications and announcements, the Chairperson may choose to defer them to a second agenda item added at the end of the Board Meeting.

1. Community updates	Board members	10:15am
2. Chief of San Mateo County Health	Louis Rogers	10:20am
3. Pescadero assistance during the storm and HMB shooting	Rita Mancera	11:00am
4. Coastside assistance during the storm and HMB shooting	Judith Guerrero	11:10am

E. BUSINESS AGENDA	11:20am
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Request to approve updated to the sliding fee discount schedule for 2023	Jim Beaumont	Tab 5
Request to re-nominate board members with terms expiring in April and May 2023	Robert Anderson	Tab 6

F. REPORTING & DISCUSSION AGENDA

1. 2023 Western Forum for Migrant and Community Conference overview.	Tayischa Deldridge	11:30am	
2. Strategic plan overview and update	Irene Pasma	Tab 7	11:40am
3. HCH/FH director’s report	Jim Beaumont	Tab 8	11:50am

G. ADJOURNMENT

12:00pm

Future meeting: April 13th, 2023, 10am-12pm at County Building Room 101, RWC
 Address: 455 County Center, Redwood City, CA 94063

***Instructions for Public Comment During Meeting**

Members of the public may address the Members of the HCH/FH board as follows:

***Written Comments:**

Written public comments may be emailed in advance of the meeting. Please read the following instructions carefully:

1. Your written comment should be emailed to masfaw@smcgov.org.
2. Your email should include the specific agenda item on which you are commenting or note that your comment concerns an item that is not on the agenda or is on the consent agenda.
3. Members of the public are limited to one comment per agenda item.
4. The length of the emailed comment should be commensurate with the two minutes customarily allowed for verbal comments, which is approximately 250-300 words.
5. If your emailed comment is received by 5:00 p.m. on the day before the meeting, it will be provided to the Members of the HCH/FH board and made publicly available on the agenda website under the specific item to which your comment pertains. If emailed comments are received after 5:00p.m. on the day before the meeting, HCH/FH board will make every effort to either (i) provide such emailed comments to the HCH/FH board and make such emails publicly available on the agenda website prior to the meeting, or (ii) read such emails during the meeting. Whether such emailed comments are forwarded and posted, or are read during the meeting, they will still be included in the administrative record.

Meetings are accessible to people with disabilities. Individuals who need special assistance or a disability-related modification or accommodation (including auxiliary aids or services) to participate in this meeting, or who have a disability and wish to request an alternate format for the agenda, meeting notice, or other documents that may be distributed at the meeting, should contact the HCH/FH Program Coordinator at least five working days before the meeting at (650) 573-2640 in order to make reasonable arrangements to ensure accessibility to this meeting and the materials related to it. The HCH/FH Co-Applicant Board meeting documents are posted at least 72 hours prior to the meeting and are accessible online at: <http://www.smchealth.org/smmc-hfhfh-board>

TAB 1
Meeting
Minutes



**HEALTH CARE FOR THE HOMELESS/FARMWORKER HEALTH PROGRAM (HCH/FH)
 Co-Applicant Board Meeting Minutes**

February 9, 2023

Co-Applicant Board Members Present	County Staff Present	Members of the Public	Absent Board Members/Staff
Robert Anderson, Chair Victoria Sanchez De Alba, Vice Chair Brian Greenberg Francine Serafin Dickson Gabe Garcia Janet Schmidt Judith Guerrero Steve Carey Steve Kraft Suzanne Moore Tayischa Deldridge Tony Serrano Jim Beaumont, HCH/FH Program Director (Ex-Officio)	Alejandra Alvarado, Clinical Services Coordinator Meron Asfaw, Community Program Coordinator Gozel Kulieva, Management Analyst Amanda Hing Hernandez, HCH/FH Clinical Liaison Frank Trinh, HCH/FH Medical Director Kapil Chopra, HCH/FH Behavioral Health Director Lauren Carroll, County Counsel Chester Kunnappilly, smmc CEO Anessa Farber, Public Health Clinics Manager, PHPP	Maricela Zavala, Puente de la Costa Sur Delia McGrath Nicholas Jarero Belinda Hernandez-Arriaga, ALAS Joaquin Jimenez, ALAS	Irene Pasma, Planning & Implementation Coordinator

A. Call to order & roll call	Robert Anderson called the meeting to order at 9:01am and did a roll call.	
B. Public comment	None	
C. Action to set the agenda and consent agenda	<ol style="list-style-type: none"> Approve meeting minutes from January 12, 2022, Board Meeting. Adopt a resolution finding that, because of the continuing COVID-19 pandemic state of emergency, meeting in person would present imminent risks to the health or safety of attendees. Budget and Finance Report. Contracts and MOU's Memo 	Request to approve the Consent Agenda was <u>MOVED</u> by Brian Greenberg and <u>SECONDED</u> by Suzanne Moore. APPROVED by all Board members present.

<p>F. Reporting and Discussion</p> <p>1. HCH/FH Director's Report</p>	<p>Jim Beaumont Director's report is included in the board packet. The HCH/FH program is deep into preparing the annual UDS report.</p> <p>National Healthcare for the Homeless Council conference this may Board members can go, let Meron know.</p>	
<p>2. EPIC (upcoming electronic health record implementation) & Navigation Center</p>	<p>Chester Kunnappilly SMMC is proactively preparing to administer COVID-19 vaccinations on an annual basis, analogous to the yearly flu vaccine regimen, and is eager to resume flu and other vaccinations that were hampered due to the COVID-19 pandemic. However, to accomplish this, the county health organization must overcome the logistical challenges that come with managing a mass immunization campaign.</p> <p>Moreover, as a result of seismic safety standards, the current SMMC administrative building will be dismantled, and offices will be relocated to a newly constructed facility in April-May 2023. The newly constructed building will feature contemporary front-end staffing and meeting rooms to better serve the community's healthcare needs.</p>	
<p>3. Quality Improvement/Quality Assurance</p>	<p>Frank Trinh Frank welcomed program's new team member, clinical services coordinator Alejandra. The HCH/FH program is currently exploring with a telehealth pilot Activate. UDS measures are available, team is analyzing, we will report in April.</p>	

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<p>4. March Board Meeting & members update</p>	<p>Robert Anderson</p> <ul style="list-style-type: none"> - Eric Debode's term on the board is ending and he was asked about his interest in extending for another four years, but he is currently unable to do so. - The upcoming meetings will be held in person at SMMC, specifically on the 2nd floor of the Administration building in Educational Classroom 2, from 10 am to 12 pm. Visitors and patients can park in a designated spot, which will also be available for board members. 	
<p>G. Adjournment</p>	<p>Meeting was adjourned by Robert Anderson at 11:00 am.</p> <p>Next meeting: March 9th, 2023, 10am-12pm San Mateo Medical Center /Education Classroom 2</p>	

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TAB 2
Contracts and
MOUs update



DATE: March 9th, 2023

TO: Co-Applicant Board Finance Sub-Committee, San Mateo County Health Care for the Homeless/ Farmworker Health (HCH/FH) Program

FROM: Meron Asfaw, Community Program Coordinator

SUBJECT: Contracts & MOUs Update

I am writing to provide you with an update on the status of the contractors and MOUs associated with the HCH/FH program. The program has collaborated with several County departments and community-based organizations to offer primary care, behavioral health, enabling, and dental services to people experiencing homelessness, farmworkers, and their dependents. Please find below a detailed description of each contractor's status update for February 2023.

Abode Services:

In February, HCH/FH staff met with Abode Services to discuss the incentive program they are planning to implement to encourage patients to keep their appointments. The wellness specialist will collaborate with other Abode case managers who provide medical care coordination to identify eligible clients for the program. This initiative will be counted towards the target number, provided that the patients are newly housed (lease is required) and connected to county health (such as SMMC or any other SMMC services).

Ayudando Latinos a Soñar (ALAS):

HCH/FH staff met with ALAS to discuss the available resources for Chinese farmworkers. ALAS is offering resources and assistance to the farms, but there is a significant need for Chinese language health information. For the few Chinese farmworkers, promotores are using Google translation and county translations. To address this issue, HCH/FH will compile resources for Chinese farmworkers, so ALAS promotores can distribute them when they are out in the field.

Public Health Policy & Planning (PHPP):

HCH/FH staff held a meeting with PHPP this month to discuss the expansion of services provided by the street medicine team to serve more unhoused patients. PHPP will attempt to create a visual map for the street medicine team that mirrors the mobile clinic flyer. Once the Street medicine schedule is finalized, HCH/FH will integrate it with the LifeMoves schedule to have one comprehensive schedule. The draft will be reviewed at the next monthly meeting with PHPP.

Furthermore, three staff members have expressed interest in attending the 2023 National Health Care for Homeless Conference & Policy Symposium in Baltimore, Maryland during the week of May 15th.



SAN MATEO COUNTY HEALTH
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MEDICAL CENTER**

San Mateo Medical Center
222 W. 39th Avenue
San Mateo, CA 94403
650-573-2222 T
www.sanmateomedicalcenter.org
www.facebook.com/smchealth

Behavioral Health & Recovery Services (BHRS):

Two staff members from BHRS have expressed their interest in attending the 2023 National Health Care for Homeless Conference & Policy Symposium in Baltimore, Maryland during the week of May 15th.

LifeMoves:

HCH/FH staff met with LifeMoves to discuss the transition of one staff member into a different role, and the anticipated hiring of a new staff member within the next two weeks. The team expressed challenges in connecting with MHPC to get an appointment. To address this, HCH/FH staff is working on getting a separate line for MHPC.

Puente: No update

Sonrisas: No update

Saturday Dental Clinic at Coastside Clinic:

HCH/FH organized an introductory meeting between the dental team and ALAS to plan and discuss ways to reduce no-shows and improve coordination between the teams. ALAS will work closely with the dental team by identifying clients and flagging patients who might need help filling out paperwork. The dental team will post scheduling in a timely manner for the Promotores to fill out the open patient slot for the following dental clinic day. ALAS's promotores will update the waiting list by calling patients and asking if they are still interested. The Saturday dental team is anticipating hiring another dentist and increasing the Saturday service.

TAB 3

Budget and Finance Report



San Mateo Medical Center
222 W 39th Avenue
San Mateo, CA 94403
650-573-2222 T
smchealth.org/smmc

DATE: March 09,2023

TO: Co-Applicant Board, San Mateo County Health Care for the Homeless/Farmworker Health (HCH/FH) Program

FROM: Jim Beaumont
Director, HCH/FH Program

SUBJECT: HCH/FH PROGRAM BUDGET and FINANCIAL REPORT

Preliminary grant expenditures for the month total about \$92,042. This is showing less than actuals as none of the January Contract/MOU payments were included as they had not yet processed as part of SMMC's month-end accounting. This also includes the PHPP invoice for the last two quarters of 2022. A number of routine County charges had also not been completed when the report was run.

Basically, our Salary & Benefit costs and office operational expenses appear to be within budget so far. Our preliminary expenditure projection for the 2023 Grant Year (GY) will leave us with right around \$555,511 unexpended funding when compared to our total funds for the year (base grant award plus carryover from GY 2022). This is about 30% larger than our original spend-down target and provides some level of certainty for being able to fulfill our already awarded 2024 contracts, plus providing some flexibility for the Board in making potential finding choices during this and next GY.

Attachment:

- GY 2022 Summary Grant Expenditure Report Through 02/28/23



GRANT YEAR 2023

February \$\$

Details for budget estimates	Budgeted [SF-424]		To Date (02/28/23)	Projection for end of year	Projected for GY 2024
EXPENDITURES					
<u>Salaries</u>					
Director, Program Coordinator Management Analyst ,Medical Director new position, misc. OT, other, etc.	721,000	59,535	107,000	720,000	750,000
<u>Benefits</u>					
Director, Program Coordinator Management Analyst ,Medical Director new position, misc. OT, other, etc.	270,000	24,686	44,765	265,000	292,500
<u>Travel</u>					
National Conferences (2500*8)	15,000			15,000	20,000
Regional Conferences (1000*5)	5,000			5,000	7,500
Local Travel	1,500			1,500	1,500
Taxis	1,000		108	1,000	1,500
Van & vehicle usage	1,500			1,500	1,500
	24,000		108	24,000	32,000
<u>Supplies</u>					
Office Supplies, misc. Small Funding Requests	10,000			10,000	10,000
	10,000		0	10,000	10,000
<u>Contractual</u>					
2021 Contracts		3,600	27,691	24,091	
2021 MOUs					
Current 2022 MOUs	1,241,000			1,175,000	1,200,000
Current 2022 contracts	865,979			825,000	825,000
---unallocated---/other contracts					
	2,106,979		27,691	2,024,091	2,025,000
<u>Other</u>					
Consultants/grant writer	40,000		6,348	40,000	40,000
IT/Telcom	4,200	1,346	1,422	28,000	30,000
New Automation				0	-
Memberships	2,000	2,875	2,875	4,000	5,000
Training	5,000			5,000	20,000
Misc				1,500	1,500
	51,200		10,645	78,500	96,500
TOTAL	3,183,179	92,042	190,209	3,121,591	3,206,000
<u>GRANT REVENUE</u>					
Available Base Grant	2,858,632		2,858,632	2,858,632	2,858,632
Carryover	818,470		818,470	818,470	
Available Expanded Services Awards **					555,511 carryover
HCH/FH PROGRAM TOTAL	3,677,102		3,677,102	3,677,102	3,414,143
<u>BALANCE</u>	493,923	Available	3,486,893 Current Estimate	555,511 Projected	208,143 based on est. grant of \$2,858,632
<u>Non-Grant Expenditures</u>					
Salary Overage	13,750	950	2,450	42,500	20,000
Health Coverage	57,000	7,605	12,840	48,000	62,000
base grant prep	60,000			60,000	
food	2,500			2,500	1,500
incentives/gift cards	1,000			1,000	1,500
	134,250	8,555	15,290	154,000	85,000
TOTAL EXPENDITURES	3,317,429	100,597	205,499	3,275,591	NEXT YEAR 3,291,000

TAB 4
**Quality Improvement/
Quality Assurance
update**



DATE: March 9, 2023

TO: Co-Applicant Board, San Mateo County Health Care for the Homeless/Farmworker Health (HCH/FH) Program

FROM: Frank Trinh, Medical Director HCH/FH Program

SUBJECT: QI/QA COMMITTEE REPORT

- **Next HCH/FH QI/QA Committee Meeting**

- HCH/FH Program Clinical Services Coordinator will be scheduling the next QI/QA Committee meeting by mid-April 2023.

- **ACTIVATE Pilot**

- HCH/FH working with Mitre and Coastside Clinic to pilot telehealth support for improved care of chronic illness, with potential focus on diabetes and hypertension. HCH/FH working with San Mateo Medical Center Materials Management to develop a Memorandum of Understanding (MOU) with Mitre.

- **Homeless Mortality Data**

- HCH/FH Program to work with San Mateo County Public Health Epidemiology and homeless service providers to accurately collect County homeless mortality data.

- **2022 Clinical Quality Metrics**

- 2022 Clinical quality metrics data is available and is currently being analyzed for the 2023 UDS submission. Quality metrics data will be reported to the Co-Applicant Board once it is finalized, likely at the April 2023 meeting.

TAB 5

**Request to approve
updated to the sliding fee
discount schedule for 2023**



SAN MATEO COUNTY HEALTH
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MEDICAL CENTER**

San Mateo Medical Center
222 W. 39th Avenue
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650-573-2222 T
www.sanmateomedicalcenter.org
www.facebook.com/smchealth

DATE: March 9, 2023

TO: Co-Applicant Board, San Mateo County Health Care for the Homeless/Farmworker Health (HCH/FH) Program

FROM: Gozel Kulieva, HCH/FH Management Analyst

SUBJECT: REQUEST TO APPROVE UPDATES TO THE SLIDING FEE DISCOUNT SCHEDULE FOR 2023

One of the HRSA health center program requirements is having an approved Sliding Fee Discount Program (SFDP). This Board approved SFDP policy in October 2014 and has been approving an updated fee schedule annually based on federal poverty guidelines. The last Sliding Fee Discount Schedule was updated in March 2022.

According to the HCH/FH Sliding Fee Discount Program Policy "The income levels included in the SFDS shall be updated annually based on the annual release of the Federal Poverty Level" (FPL). The attached revisions to the Sliding Fee Scale Schedule are based on the updates to the 2023 (FPL) guidelines.

This request is for the Co-Applicant Board to approve revisions to its approved Sliding Fee Discount Program Policy Schedule to adjust for the new FPL for 2023. A majority vote of the members present is necessary and sufficient to approve the request.

ATTACHMENTS:

- 2023 Federal Poverty Guidelines
- Revised 2023 Sliding Fee Scale Discount Schedule

San Mateo County Health Care for the Homeless Farmworker Health (HCH/FH) Program

(HRSA 330 Program/FQHC)

Sliding Fee Discount Schedule

Monthly Income Thresholds by Family Size for Sliding Fee Discount Policy

Poverty Level*	0-100%	101-138%	139-175%	176-200%	>200%
Family Size					
1	\$1,215	\$1,677	\$2,126	\$2,430	\$2,431
2	\$1,643	\$2,268	\$2,876	\$3,287	\$3,288
3	\$2,072	\$2,859	\$3,625	\$4,143	\$4,144
4	\$2,500	\$3,450	\$4,375	\$5,000	\$5,001
5	\$2,928	\$4,041	\$5,125	\$5,857	\$5,858
6	\$3,357	\$4,632	\$5,874	\$6,713	\$6,714
7	\$3,785	\$5,223	\$6,624	\$7,570	\$7,571
8	\$4,213	\$5,814	\$7,373	\$8,427	\$8,428
For each additional person add:	\$393	\$543	\$629	\$787	\$788
Patient Cost	No Charge	\$20	\$25	\$30	No sliding fee discount**

*Based on 2023 HHS Poverty Guidelines (<https://aspe.hhs.gov/topics/poverty-economic-mobility/poverty-guidelines>)

**Reduced payments may be available through other state or locally funded discount programs

Opportunities to present oral comments to the Committee will be provided at a future meeting.

- *Online (preferred method):* Follow the instructions for submitting comments at www.regulations.gov. Comments submitted electronically, including attachments, will be posted to Docket OASH–2022–0021.

- *Mail:* Mail/courier to Janet M. de Jesus, MS, RD, HHS/OASH/ODPHP, 1101 Wootton Parkway, Suite 420, Rockville, MD 20852. For written/paper submissions, ODPHP will post your comment, as well as any attachments, to www.regulations.gov.

Meeting materials for each meeting will be accessible at www.DietaryGuidelines.gov. Materials may be requested by email at dietaryguidelines@hhs.gov.

Paul Reed,

Deputy Assistant Secretary for Health, Office of Disease Prevention and Health Promotion.

[FR Doc. 2023–00921 Filed 1–18–23; 8:45 am]

BILLING CODE 4150–32–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Office of the Secretary

Annual Update of the HHS Poverty Guidelines

AGENCY: Department of Health and Human Services.

ACTION: Notice.

SUMMARY: This notice provides an update of the Department of Health and Human Services (HHS) poverty guidelines to account for last calendar year’s increase in prices as measured by the Consumer Price Index.

DATES: January 12, 2023 unless an office administering a program using the guidelines specifies a different effective date for that particular program.

ADDRESSES: Office of the Assistant Secretary for Planning and Evaluation, Room 404E, Humphrey Building, Department of Health and Human Services, Washington, DC 20201.

FOR FURTHER INFORMATION CONTACT: For information about how the guidelines are used or how income is defined in a particular program, contact the federal, state, or local office that is responsible for that program. For information about poverty figures for immigration forms, the Hill-Burton Uncompensated Services Program, and the number of people in poverty, use the specific telephone numbers and addresses given below.

For general questions about the poverty guidelines themselves, contact

Kendall Swenson, Office of the Assistant Secretary for Planning and Evaluation, Room 404E.3, Humphrey Building, Department of Health and Human Services, Washington, DC 20201—telephone: (202) 795–7309—or visit <http://aspe.hhs.gov/poverty/>.

For information about the percentage multiple of the poverty guidelines to be used on immigration forms such as USCIS Form I–864, Affidavit of Support, contact U.S. Citizenship and Immigration Services at 1–800–375–5283. You also may visit <https://www.uscis.gov/i-864>.

For information about the Hill-Burton Uncompensated Services Program (free or reduced-fee health care services at certain hospitals and other facilities for persons meeting eligibility criteria involving the poverty guidelines), visit <https://www.hrsa.gov/get-health-care/affordable/hill-burton/index.html>.

For information about the number of people in poverty, visit the Poverty section of the Census Bureau’s website at <https://www.census.gov/topics/income-poverty/poverty.html> or contact the Census Bureau’s Customer Service Center at 1–800–923–8282 (toll-free) or visit <https://ask.census.gov> for further information.

SUPPLEMENTARY INFORMATION:

Background

Section 673(2) of the Omnibus Budget Reconciliation Act (OBRA) of 1981 (42 U.S.C. 9902(2)) requires the Secretary of the Department of Health and Human Services to update the poverty guidelines at least annually, adjusting them on the basis of the Consumer Price Index for All Urban Consumers (CPI–U). The poverty guidelines are used as an eligibility criterion by Medicaid and a number of other federal programs. The *poverty guidelines* issued here are a simplified version of the *poverty thresholds* that the Census Bureau uses to prepare its estimates of the number of individuals and families in poverty.

As required by law, this update is accomplished by increasing the latest published Census Bureau poverty thresholds by the relevant percentage change in the Consumer Price Index for All Urban Consumers (CPI–U). The guidelines in this 2023 notice reflect the 8.0 percent price increase between calendar years 2021 and 2022. After this inflation adjustment, the guidelines are rounded and adjusted to standardize the differences between family sizes. In rare circumstances, the rounding and standardizing adjustments in the formula result in small decreases in the poverty guidelines for some household sizes even when the inflation factor is

not negative. In cases where the year-to-year change in inflation is not negative and the rounding and standardizing adjustments in the formula result in reductions to the guidelines from the previous year for some household sizes, the guidelines for the affected household sizes are fixed at the prior year’s guidelines. As in prior years, these 2023 guidelines are roughly equal to the poverty thresholds for calendar year 2022 which the Census Bureau expects to publish in final form in September 2023.

The poverty guidelines continue to be derived from the Census Bureau’s current official poverty thresholds; they are not derived from the Census Bureau’s Supplemental Poverty Measure (SPM).

The following guideline figures represent annual income.

2023 POVERTY GUIDELINES FOR THE 48 CONTIGUOUS STATES AND THE DISTRICT OF COLUMBIA

Persons in family/household	Poverty guideline
1	\$14,580
2	19,720
3	24,860
4	30,000
5	35,140
6	40,280
7	45,420
8	50,560

For families/households with more than 8 persons, add \$5,140 for each additional person.

2023 POVERTY GUIDELINES FOR ALASKA

Persons in family/household	Poverty guideline
1	\$18,210
2	24,640
3	31,070
4	37,500
5	43,930
6	50,360
7	56,790
8	63,220

For families/households with more than 8 persons, add \$6,430 for each additional person.

2023 POVERTY GUIDELINES FOR HAWAII

Persons in family/household	Poverty guideline
1	\$16,770
2	22,680
3	28,590
4	34,500

2023 POVERTY GUIDELINES FOR HAWAII—Continued

Persons in family/household	Poverty guideline
5	40,410
6	46,320
7	52,230
8	58,140

For families/households with more than 8 persons, add \$5,910 for each additional person.

Separate poverty guideline figures for Alaska and Hawaii reflect Office of Economic Opportunity administrative practice beginning in the 1966–1970 period. (Note that the Census Bureau poverty thresholds—the version of the poverty measure used for statistical purposes—have never had separate figures for Alaska and Hawaii.) The poverty guidelines are not defined for Puerto Rico or other outlying jurisdictions. In cases in which a federal program using the poverty guidelines serves any of those jurisdictions, the federal office that administers the program is generally responsible for deciding whether to use the contiguous-states-and-DC guidelines for those jurisdictions or to follow some other procedure.

Due to confusing legislative language dating back to 1972, the poverty guidelines sometimes have been mistakenly referred to as the “OMB” (Office of Management and Budget) poverty guidelines or poverty line. In fact, OMB has never issued the guidelines; the guidelines are issued each year by the Department of Health and Human Services. The poverty guidelines may be formally referenced as “the poverty guidelines updated periodically in the **Federal Register** by the U.S. Department of Health and Human Services under the authority of 42 U.S.C. 9902(2).”

Some federal programs use a percentage multiple of the guidelines (for example, 125 percent or 185 percent of the guidelines), as noted in relevant authorizing legislation or program regulations. Non-federal organizations that use the poverty guidelines under their own authority in non-federally-funded activities also may choose to use a percentage multiple of the guidelines.

The poverty guidelines do not make a distinction between farm and non-farm families, or between aged and non-aged units. (Only the Census Bureau poverty thresholds have separate figures for aged and non-aged one-person and two-person units.)

This notice does not provide definitions of such terms as “income” or

“family” as there is considerable variation of these terms among programs that use the poverty guidelines. The legislation or regulations governing each program define these terms and determine how the program applies the poverty guidelines. In cases where legislation or regulations do not establish these definitions, the entity that administers or funds the program is responsible to define such terms as “income” and “family.” Therefore questions such as net or gross income, counted or excluded income, or household size should be directed to the entity that administers or funds the program.

Dated: January 12, 2023.

Xavier Becerra,

Secretary, Department of Health and Human Services.

[FR Doc. 2023–00885 Filed 1–18–23; 8:45 am]

BILLING CODE 4150–05–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES**National Institutes of Health****National Center for Advancing Translational Sciences; Notice of Closed Meeting**

Pursuant to section 10(d) of the Federal Advisory Committee Act, as amended, notice is hereby given of the following meeting.

The meetings will be closed to the public in accordance with the provisions set forth in sections 552b(c)(4) and 552b(c)(6), Title 5 U.S.C., as amended. The contract proposals and the discussions could disclose confidential trade secrets or commercial property such as patentable material, and personal information concerning individuals associated with the contract proposals, the disclosure of which would constitute a clearly unwarranted invasion of personal privacy.

Name of Committee: National Center for Advancing Translational Sciences Special Emphasis Panel; SBIR Phase I Topic 023 Contract Review.

Date: February 15, 2023.

Time: 9 a.m. to 1 p.m.

Agenda: To review and evaluate contract proposals.

Place: National Center for Advancing Translational Sciences, National Institutes of Health, 6701 Democracy Boulevard, Room 1037, Bethesda, MD 20892.

Contact Person: Rahat (Rani) Khan, Ph.D., Scientific Review Officer, Office of Scientific Review, National Center for Advancing Translational Sciences, National Institutes of Health, 6701 Democracy Boulevard, Room 1037, Bethesda, MD 20892, (301) 594–7319, kharr2@csr.nih.gov.

(Catalogue of Federal Domestic Assistance Program Nos. 93.859, Pharmacology, Physiology, and Biological Chemistry Research; 93.350, B—Cooperative Agreements; 93.859, Biomedical Research and Research Training, National Institutes of Health, HHS)

Dated: January 13, 2023.

Melanie J. Pantoja,

Program Analyst, Office of Federal Advisory Committee Policy.

[FR Doc. 2023–00993 Filed 1–18–23; 8:45 am]

BILLING CODE 4140–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES**National Institutes of Health****National Institute of Dental and Craniofacial Research; Notice of Closed Meeting**

Pursuant to section 10(d) of the Federal Advisory Committee Act, as amended, notice is hereby given of the following meeting.

The meeting will be closed to the public in accordance with the provisions set forth in sections 552b(c)(4) and 552b(c)(6), Title 5 U.S.C., as amended. The grant applications and the discussions could disclose confidential trade secrets or commercial property such as patentable material, and personal information concerning individuals associated with the grant applications, the disclosure of which would constitute a clearly unwarranted invasion of personal privacy.

Name of Committee: National Institute of Dental and Craniofacial Research Special Emphasis Panel; DSR Member Conflict Applications Meeting.

Date: February 17, 2023.

Time: 11 a.m. to 5 p.m.

Agenda: To review and evaluate grant applications.

Place: National Institute of Dental and Craniofacial Research, 6701 Democracy Boulevard, Bethesda, MD 20892 (Virtual Meeting).

Contact Person: Aiwu Cheng, Ph.D., MD, Scientific Review Officer, Scientific Review Branch, Division of Extramural Activities, National Institute of Dental and Craniofacial Research, 6701 Democracy Blvd., Bethesda, MD 20892, 301–594–4859, Aiwu.cheng@nih.gov.

(Catalogue of Federal Domestic Assistance Program No. 93.121, Oral Diseases and Disorders Research, National Institutes of Health, HHS)

Dated: January 13, 2023.

Melanie J. Pantoja,

Program Analyst, Office of Federal Advisory Committee Policy.

[FR Doc. 2023–00995 Filed 1–18–23; 8:45 am]

BILLING CODE 4140–01–P

2023 Poverty Guidelines: 48 Contiguous States (all states except Alaska and Hawaii)

Per Year

Household/ Family Size	25%	50%	75%	100%	125%	130%	133%	135%	138%	150%	175%	180%	185%	200%
1	\$3,645	\$7,290	\$10,935	\$14,580	\$18,225	\$18,954	\$19,391	\$19,683	\$20,120	\$21,870	\$25,515	\$26,244	\$26,973	\$29,160
2	\$4,930	\$9,860	\$14,790	\$19,720	\$24,650	\$25,636	\$26,228	\$26,622	\$27,214	\$29,580	\$34,510	\$35,496	\$36,482	\$39,440
3	\$6,215	\$12,430	\$18,645	\$24,860	\$31,075	\$32,318	\$33,064	\$33,561	\$34,307	\$37,290	\$43,505	\$44,748	\$45,991	\$49,720
4	\$7,500	\$15,000	\$22,500	\$30,000	\$37,500	\$39,000	\$39,900	\$40,500	\$41,400	\$45,000	\$52,500	\$54,000	\$55,500	\$60,000
5	\$8,785	\$17,570	\$26,355	\$35,140	\$43,925	\$45,682	\$46,736	\$47,439	\$48,493	\$52,710	\$61,495	\$63,252	\$65,009	\$70,280
6	\$10,070	\$20,140	\$30,210	\$40,280	\$50,350	\$52,364	\$53,572	\$54,378	\$55,586	\$60,420	\$70,490	\$72,504	\$74,518	\$80,560
7	\$11,355	\$22,710	\$34,065	\$45,420	\$56,775	\$59,046	\$60,409	\$61,317	\$62,680	\$68,130	\$79,485	\$81,756	\$84,027	\$90,840
8	\$12,640	\$25,280	\$37,920	\$50,560	\$63,200	\$65,728	\$67,245	\$68,256	\$69,773	\$75,840	\$88,480	\$91,008	\$93,536	\$101,120
9	\$13,925	\$27,850	\$41,775	\$55,700	\$69,625	\$72,410	\$74,081	\$75,195	\$76,866	\$83,550	\$97,475	\$100,260	\$103,045	\$111,400
10	\$15,210	\$30,420	\$45,630	\$60,840	\$76,050	\$79,092	\$80,917	\$82,134	\$83,959	\$91,260	\$106,470	\$109,512	\$112,554	\$121,680
11	\$16,495	\$32,990	\$49,485	\$65,980	\$82,475	\$85,774	\$87,753	\$89,073	\$91,052	\$98,970	\$115,465	\$118,764	\$122,063	\$131,960
12	\$17,780	\$35,560	\$53,340	\$71,120	\$88,900	\$92,456	\$94,590	\$96,012	\$98,146	\$106,680	\$124,460	\$128,016	\$131,572	\$142,240
13	\$19,065	\$38,130	\$57,195	\$76,260	\$95,325	\$99,138	\$101,426	\$102,951	\$105,239	\$114,390	\$133,455	\$137,268	\$141,081	\$152,520
14	\$20,350	\$40,700	\$61,050	\$81,400	\$101,750	\$105,820	\$108,262	\$109,890	\$112,332	\$122,100	\$142,450	\$146,520	\$150,590	\$162,800

Household/ Family Size	225%	250%	275%	300%	325%	350%	375%	400%	500%	600%	700%	800%	1000%
1	\$32,805	\$36,450	\$40,095	\$43,740	\$47,385	\$51,030	\$54,675	\$58,320	\$72,900	\$87,480	\$102,060	\$116,640	\$145,800
2	\$44,370	\$49,300	\$54,230	\$59,160	\$64,090	\$69,020	\$73,950	\$78,880	\$98,600	\$118,320	\$138,040	\$157,760	\$197,200
3	\$55,935	\$62,150	\$68,365	\$74,580	\$80,795	\$87,010	\$93,225	\$99,440	\$124,300	\$149,160	\$174,020	\$198,880	\$248,600
4	\$67,500	\$75,000	\$82,500	\$90,000	\$97,500	\$105,000	\$112,500	\$120,000	\$150,000	\$180,000	\$210,000	\$240,000	\$300,000
5	\$79,065	\$87,850	\$96,635	\$105,420	\$114,205	\$122,990	\$131,775	\$140,560	\$175,700	\$210,840	\$245,980	\$281,120	\$351,400
6	\$90,630	\$100,700	\$110,770	\$120,840	\$130,910	\$140,980	\$151,050	\$161,120	\$201,400	\$241,680	\$281,960	\$322,240	\$402,800
7	\$102,195	\$113,550	\$124,905	\$136,260	\$147,615	\$158,970	\$170,325	\$181,680	\$227,100	\$272,520	\$317,940	\$363,360	\$454,200
8	\$113,760	\$126,400	\$139,040	\$151,680	\$164,320	\$176,960	\$189,600	\$202,240	\$252,800	\$303,360	\$353,920	\$404,480	\$505,600
9	\$125,325	\$139,250	\$153,175	\$167,100	\$181,025	\$194,950	\$208,875	\$222,800	\$278,500	\$334,200	\$389,900	\$445,600	\$557,000
10	\$136,890	\$152,100	\$167,310	\$182,520	\$197,730	\$212,940	\$228,150	\$243,360	\$304,200	\$365,040	\$425,880	\$486,720	\$608,400
11	\$148,455	\$164,950	\$181,445	\$197,940	\$214,435	\$230,930	\$247,425	\$263,920	\$329,900	\$395,880	\$461,860	\$527,840	\$659,800
12	\$160,020	\$177,800	\$195,580	\$213,360	\$231,140	\$248,920	\$266,700	\$284,480	\$355,600	\$426,720	\$497,840	\$568,960	\$711,200
13	\$171,585	\$190,650	\$209,715	\$228,780	\$247,845	\$266,910	\$285,975	\$305,040	\$381,300	\$457,560	\$533,820	\$610,080	\$762,600
14	\$183,150	\$203,500	\$223,850	\$244,200	\$264,550	\$284,900	\$305,250	\$325,600	\$407,000	\$488,400	\$569,800	\$651,200	\$814,000

2023 Poverty Guidelines: 48 Contiguous States (all states except Alaska and Hawaii)

Per Month

Household/

Family Size	25%	50%	75%	100%	125%	130%	133%	135%	138%	150%	175%	180%	185%	200%
1	\$304	\$608	\$911	\$1,215	\$1,519	\$1,580	\$1,616	\$1,640	\$1,677	\$1,823	\$2,126	\$2,187	\$2,248	\$2,430
2	\$411	\$822	\$1,233	\$1,643	\$2,054	\$2,136	\$2,186	\$2,219	\$2,268	\$2,465	\$2,876	\$2,958	\$3,040	\$3,287
3	\$518	\$1,036	\$1,554	\$2,072	\$2,590	\$2,693	\$2,755	\$2,797	\$2,859	\$3,108	\$3,625	\$3,729	\$3,833	\$4,143
4	\$625	\$1,250	\$1,875	\$2,500	\$3,125	\$3,250	\$3,325	\$3,375	\$3,450	\$3,750	\$4,375	\$4,500	\$4,625	\$5,000
5	\$732	\$1,464	\$2,196	\$2,928	\$3,660	\$3,807	\$3,895	\$3,953	\$4,041	\$4,393	\$5,125	\$5,271	\$5,417	\$5,857
6	\$839	\$1,678	\$2,518	\$3,357	\$4,196	\$4,364	\$4,464	\$4,532	\$4,632	\$5,035	\$5,874	\$6,042	\$6,210	\$6,713
7	\$946	\$1,893	\$2,839	\$3,785	\$4,731	\$4,921	\$5,034	\$5,110	\$5,223	\$5,678	\$6,624	\$6,813	\$7,002	\$7,570
8	\$1,053	\$2,107	\$3,160	\$4,213	\$5,267	\$5,477	\$5,604	\$5,688	\$5,814	\$6,320	\$7,373	\$7,584	\$7,795	\$8,427
9	\$1,160	\$2,321	\$3,481	\$4,642	\$5,802	\$6,034	\$6,173	\$6,266	\$6,406	\$6,963	\$8,123	\$8,355	\$8,587	\$9,283
10	\$1,268	\$2,535	\$3,803	\$5,070	\$6,338	\$6,591	\$6,743	\$6,845	\$6,997	\$7,605	\$8,873	\$9,126	\$9,380	\$10,140
11	\$1,375	\$2,749	\$4,124	\$5,498	\$6,873	\$7,148	\$7,313	\$7,423	\$7,588	\$8,248	\$9,622	\$9,897	\$10,172	\$10,997
12	\$1,482	\$2,963	\$4,445	\$5,927	\$7,408	\$7,705	\$7,882	\$8,001	\$8,179	\$8,890	\$10,372	\$10,668	\$10,964	\$11,853
13	\$1,589	\$3,178	\$4,766	\$6,355	\$7,944	\$8,262	\$8,452	\$8,579	\$8,770	\$9,533	\$11,121	\$11,439	\$11,757	\$12,710
14	\$1,696	\$3,392	\$5,088	\$6,783	\$8,479	\$8,818	\$9,022	\$9,158	\$9,361	\$10,175	\$11,871	\$12,210	\$12,549	\$13,567

Household/

Family Size	225%	250%	275%	300%	325%	350%	375%	400%	500%	600%	700%	800%	1000%
1	\$2,734	\$3,038	\$3,341	\$3,645	\$3,949	\$4,253	\$4,556	\$4,860	\$6,075	\$7,290	\$8,505	\$9,720	\$12,150
2	\$3,698	\$4,108	\$4,519	\$4,930	\$5,341	\$5,752	\$6,163	\$6,573	\$8,217	\$9,860	\$11,503	\$13,147	\$16,433
3	\$4,661	\$5,179	\$5,697	\$6,215	\$6,733	\$7,251	\$7,769	\$8,287	\$10,358	\$12,430	\$14,502	\$16,573	\$20,717
4	\$5,625	\$6,250	\$6,875	\$7,500	\$8,125	\$8,750	\$9,375	\$10,000	\$12,500	\$15,000	\$17,500	\$20,000	\$25,000
5	\$6,589	\$7,321	\$8,053	\$8,785	\$9,517	\$10,249	\$10,981	\$11,713	\$14,642	\$17,570	\$20,498	\$23,427	\$29,283
6	\$7,553	\$8,392	\$9,231	\$10,070	\$10,909	\$11,748	\$12,588	\$13,427	\$16,783	\$20,140	\$23,497	\$26,853	\$33,567
7	\$8,516	\$9,463	\$10,409	\$11,355	\$12,301	\$13,248	\$14,194	\$15,140	\$18,925	\$22,710	\$26,495	\$30,280	\$37,850
8	\$9,480	\$10,533	\$11,587	\$12,640	\$13,693	\$14,747	\$15,800	\$16,853	\$21,067	\$25,280	\$29,493	\$33,707	\$42,133
9	\$10,444	\$11,604	\$12,765	\$13,925	\$15,085	\$16,246	\$17,406	\$18,567	\$23,208	\$27,850	\$32,492	\$37,133	\$46,417
10	\$11,408	\$12,675	\$13,943	\$15,210	\$16,478	\$17,745	\$19,013	\$20,280	\$25,350	\$30,420	\$35,490	\$40,560	\$50,700
11	\$12,371	\$13,746	\$15,120	\$16,495	\$17,870	\$19,244	\$20,619	\$21,993	\$27,492	\$32,990	\$38,488	\$43,987	\$54,983
12	\$13,335	\$14,817	\$16,298	\$17,780	\$19,262	\$20,743	\$22,225	\$23,707	\$29,633	\$35,560	\$41,487	\$47,413	\$59,267
13	\$14,299	\$15,888	\$17,476	\$19,065	\$20,654	\$22,243	\$23,831	\$25,420	\$31,775	\$38,130	\$44,485	\$50,840	\$63,550
14	\$15,263	\$16,958	\$18,654	\$20,350	\$22,046	\$23,742	\$25,438	\$27,133	\$33,917	\$40,700	\$47,483	\$54,267	\$67,833

2023 Poverty Guidelines: Alaska

Per Year

Household/

Family Size	25%	50%	75%	100%	125%	130%	133%	135%	138%	150%	175%	180%	185%	200%
1	\$4,553	\$9,105	\$13,658	\$18,210	\$22,763	\$23,673	\$24,219	\$24,584	\$25,130	\$27,315	\$31,868	\$32,778	\$33,689	\$36,420
2	\$6,160	\$12,320	\$18,480	\$24,640	\$30,800	\$32,032	\$32,771	\$33,264	\$34,003	\$36,960	\$43,120	\$44,352	\$45,584	\$49,280
3	\$7,768	\$15,535	\$23,303	\$31,070	\$38,838	\$40,391	\$41,323	\$41,945	\$42,877	\$46,605	\$54,373	\$55,926	\$57,480	\$62,140
4	\$9,375	\$18,750	\$28,125	\$37,500	\$46,875	\$48,750	\$49,875	\$50,625	\$51,750	\$56,250	\$65,625	\$67,500	\$69,375	\$75,000
5	\$10,983	\$21,965	\$32,948	\$43,930	\$54,913	\$57,109	\$58,427	\$59,306	\$60,623	\$65,895	\$76,878	\$79,074	\$81,271	\$87,860
6	\$12,590	\$25,180	\$37,770	\$50,360	\$62,950	\$65,468	\$66,979	\$67,986	\$69,497	\$75,540	\$88,130	\$90,648	\$93,166	\$100,720
7	\$14,198	\$28,395	\$42,593	\$56,790	\$70,988	\$73,827	\$75,531	\$76,667	\$78,370	\$85,185	\$99,383	\$102,222	\$105,062	\$113,580
8	\$15,805	\$31,610	\$47,415	\$63,220	\$79,025	\$82,186	\$84,083	\$85,347	\$87,244	\$94,830	\$110,635	\$113,796	\$116,957	\$126,440
9	\$17,413	\$34,825	\$52,238	\$69,650	\$87,063	\$90,545	\$92,635	\$94,028	\$96,117	\$104,475	\$121,888	\$125,370	\$128,853	\$139,300
10	\$19,020	\$38,040	\$57,060	\$76,080	\$95,100	\$98,904	\$101,186	\$102,708	\$104,990	\$114,120	\$133,140	\$136,944	\$140,748	\$152,160
11	\$20,628	\$41,255	\$61,883	\$82,510	\$103,138	\$107,263	\$109,738	\$111,389	\$113,864	\$123,765	\$144,393	\$148,518	\$152,644	\$165,020
12	\$22,235	\$44,470	\$66,705	\$88,940	\$111,175	\$115,622	\$118,290	\$120,069	\$122,737	\$133,410	\$155,645	\$160,092	\$164,539	\$177,880
13	\$23,843	\$47,685	\$71,528	\$95,370	\$119,213	\$123,981	\$126,842	\$128,750	\$131,611	\$143,055	\$166,898	\$171,666	\$176,435	\$190,740
14	\$25,450	\$50,900	\$76,350	\$101,800	\$127,250	\$132,340	\$135,394	\$137,430	\$140,484	\$152,700	\$178,150	\$183,240	\$188,330	\$203,600

Household/

Family Size	225%	250%	275%	300%	325%	350%	375%	400%	500%	600%	700%	800%	1000%
1	\$40,973	\$45,525	\$50,078	\$54,630	\$59,183	\$63,735	\$68,288	\$72,840	\$91,050	\$109,260	\$127,470	\$145,680	\$182,100
2	\$55,440	\$61,600	\$67,760	\$73,920	\$80,080	\$86,240	\$92,400	\$98,560	\$123,200	\$147,840	\$172,480	\$197,120	\$246,400
3	\$69,908	\$77,675	\$85,443	\$93,210	\$100,978	\$108,745	\$116,513	\$124,280	\$155,350	\$186,420	\$217,490	\$248,560	\$310,700
4	\$84,375	\$93,750	\$103,125	\$112,500	\$121,875	\$131,250	\$140,625	\$150,000	\$187,500	\$225,000	\$262,500	\$300,000	\$375,000
5	\$98,843	\$109,825	\$120,808	\$131,790	\$142,773	\$153,755	\$164,738	\$175,720	\$219,650	\$263,580	\$307,510	\$351,440	\$439,300
6	\$113,310	\$125,900	\$138,490	\$151,080	\$163,670	\$176,260	\$188,850	\$201,440	\$251,800	\$302,160	\$352,520	\$402,880	\$503,600
7	\$127,778	\$141,975	\$156,173	\$170,370	\$184,568	\$198,765	\$212,963	\$227,160	\$283,950	\$340,740	\$397,530	\$454,320	\$567,900
8	\$142,245	\$158,050	\$173,855	\$189,660	\$205,465	\$221,270	\$237,075	\$252,880	\$316,100	\$379,320	\$442,540	\$505,760	\$632,200
9	\$156,713	\$174,125	\$191,538	\$208,950	\$226,363	\$243,775	\$261,188	\$278,600	\$348,250	\$417,900	\$487,550	\$557,200	\$696,500
10	\$171,180	\$190,200	\$209,220	\$228,240	\$247,260	\$266,280	\$285,300	\$304,320	\$380,400	\$456,480	\$532,560	\$608,640	\$760,800
11	\$185,648	\$206,275	\$226,903	\$247,530	\$268,158	\$288,785	\$309,413	\$330,040	\$412,550	\$495,060	\$577,570	\$660,080	\$825,100
12	\$200,115	\$222,350	\$244,585	\$266,820	\$289,055	\$311,290	\$333,525	\$355,760	\$444,700	\$533,640	\$622,580	\$711,520	\$889,400
13	\$214,583	\$238,425	\$262,268	\$286,110	\$309,953	\$333,795	\$357,638	\$381,480	\$476,850	\$572,220	\$667,590	\$762,960	\$953,700
14	\$229,050	\$254,500	\$279,950	\$305,400	\$330,850	\$356,300	\$381,750	\$407,200	\$509,000	\$610,800	\$712,600	\$814,400	\$1,018,000

2023 Poverty Guidelines: Alaska

Per Month

Household/ Family Size	25%	50%	75%	100%	125%	130%	133%	135%	138%	150%	175%	180%	185%	200%
1	\$379	\$759	\$1,138	\$1,518	\$1,897	\$1,973	\$2,018	\$2,049	\$2,094	\$2,276	\$2,656	\$2,732	\$2,807	\$3,035
2	\$513	\$1,027	\$1,540	\$2,053	\$2,567	\$2,669	\$2,731	\$2,772	\$2,834	\$3,080	\$3,593	\$3,696	\$3,799	\$4,107
3	\$647	\$1,295	\$1,942	\$2,589	\$3,236	\$3,366	\$3,444	\$3,495	\$3,573	\$3,884	\$4,531	\$4,661	\$4,790	\$5,178
4	\$781	\$1,563	\$2,344	\$3,125	\$3,906	\$4,063	\$4,156	\$4,219	\$4,313	\$4,688	\$5,469	\$5,625	\$5,781	\$6,250
5	\$915	\$1,830	\$2,746	\$3,661	\$4,576	\$4,759	\$4,869	\$4,942	\$5,052	\$5,491	\$6,406	\$6,590	\$6,773	\$7,322
6	\$1,049	\$2,098	\$3,148	\$4,197	\$5,246	\$5,456	\$5,582	\$5,666	\$5,791	\$6,295	\$7,344	\$7,554	\$7,764	\$8,393
7	\$1,183	\$2,366	\$3,549	\$4,733	\$5,916	\$6,152	\$6,294	\$6,389	\$6,531	\$7,099	\$8,282	\$8,519	\$8,755	\$9,465
8	\$1,317	\$2,634	\$3,951	\$5,268	\$6,585	\$6,849	\$7,007	\$7,112	\$7,270	\$7,903	\$9,220	\$9,483	\$9,746	\$10,537
9	\$1,451	\$2,902	\$4,353	\$5,804	\$7,255	\$7,545	\$7,720	\$7,836	\$8,010	\$8,706	\$10,157	\$10,448	\$10,738	\$11,608
10	\$1,585	\$3,170	\$4,755	\$6,340	\$7,925	\$8,242	\$8,432	\$8,559	\$8,749	\$9,510	\$11,095	\$11,412	\$11,729	\$12,680
11	\$1,719	\$3,438	\$5,157	\$6,876	\$8,595	\$8,939	\$9,145	\$9,282	\$9,489	\$10,314	\$12,033	\$12,377	\$12,720	\$13,752
12	\$1,853	\$3,706	\$5,559	\$7,412	\$9,265	\$9,635	\$9,858	\$10,006	\$10,228	\$11,118	\$12,970	\$13,341	\$13,712	\$14,823
13	\$1,987	\$3,974	\$5,961	\$7,948	\$9,934	\$10,332	\$10,570	\$10,729	\$10,968	\$11,921	\$13,908	\$14,306	\$14,703	\$15,895
14	\$2,121	\$4,242	\$6,363	\$8,483	\$10,604	\$11,028	\$11,283	\$11,453	\$11,707	\$12,725	\$14,846	\$15,270	\$15,694	\$16,967

Household/ Family Size	225%	250%	275%	300%	325%	350%	375%	400%	500%	600%	700%	800%	1000%
1	\$3,414	\$3,794	\$4,173	\$4,553	\$4,932	\$5,311	\$5,691	\$6,070	\$7,588	\$9,105	\$10,623	\$12,140	\$15,175
2	\$4,620	\$5,133	\$5,647	\$6,160	\$6,673	\$7,187	\$7,700	\$8,213	\$10,267	\$12,320	\$14,373	\$16,427	\$20,533
3	\$5,826	\$6,473	\$7,120	\$7,768	\$8,415	\$9,062	\$9,709	\$10,357	\$12,946	\$15,535	\$18,124	\$20,713	\$25,892
4	\$7,031	\$7,813	\$8,594	\$9,375	\$10,156	\$10,938	\$11,719	\$12,500	\$15,625	\$18,750	\$21,875	\$25,000	\$31,250
5	\$8,237	\$9,152	\$10,067	\$10,983	\$11,898	\$12,813	\$13,728	\$14,643	\$18,304	\$21,965	\$25,626	\$29,287	\$36,608
6	\$9,443	\$10,492	\$11,541	\$12,590	\$13,639	\$14,688	\$15,738	\$16,787	\$20,983	\$25,180	\$29,377	\$33,573	\$41,967
7	\$10,648	\$11,831	\$13,014	\$14,198	\$15,381	\$16,564	\$17,747	\$18,930	\$23,663	\$28,395	\$33,128	\$37,860	\$47,325
8	\$11,854	\$13,171	\$14,488	\$15,805	\$17,122	\$18,439	\$19,756	\$21,073	\$26,342	\$31,610	\$36,878	\$42,147	\$52,683
9	\$13,059	\$14,510	\$15,961	\$17,413	\$18,864	\$20,315	\$21,766	\$23,217	\$29,021	\$34,825	\$40,629	\$46,433	\$58,042
10	\$14,265	\$15,850	\$17,435	\$19,020	\$20,605	\$22,190	\$23,775	\$25,360	\$31,700	\$38,040	\$44,380	\$50,720	\$63,400
11	\$15,471	\$17,190	\$18,909	\$20,628	\$22,346	\$24,065	\$25,784	\$27,503	\$34,379	\$41,255	\$48,131	\$55,007	\$68,758
12	\$16,676	\$18,529	\$20,382	\$22,235	\$24,088	\$25,941	\$27,794	\$29,647	\$37,058	\$44,470	\$51,882	\$59,293	\$74,117
13	\$17,882	\$19,869	\$21,856	\$23,843	\$25,829	\$27,816	\$29,803	\$31,790	\$39,738	\$47,685	\$55,633	\$63,580	\$79,475
14	\$19,088	\$21,208	\$23,329	\$25,450	\$27,571	\$29,692	\$31,813	\$33,933	\$42,417	\$50,900	\$59,383	\$67,867	\$84,833

2023 Poverty Guidelines: Hawaii

Per Year

Household /Family Size	25%	50%	75%	100%	125%	130%	133%	135%	138%	150%	175%	180%	185%	200%
1	\$4,193	\$8,385	\$12,578	\$16,770	\$20,963	\$21,801	\$22,304	\$22,640	\$23,143	\$25,155	\$29,348	\$30,186	\$31,025	\$33,540
2	\$5,670	\$11,340	\$17,010	\$22,680	\$28,350	\$29,484	\$30,164	\$30,618	\$31,298	\$34,020	\$39,690	\$40,824	\$41,958	\$45,360
3	\$7,148	\$14,295	\$21,443	\$28,590	\$35,738	\$37,167	\$38,025	\$38,597	\$39,454	\$42,885	\$50,033	\$51,462	\$52,892	\$57,180
4	\$8,625	\$17,250	\$25,875	\$34,500	\$43,125	\$44,850	\$45,885	\$46,575	\$47,610	\$51,750	\$60,375	\$62,100	\$63,825	\$69,000
5	\$10,103	\$20,205	\$30,308	\$40,410	\$50,513	\$52,533	\$53,745	\$54,554	\$55,766	\$60,615	\$70,718	\$72,738	\$74,759	\$80,820
6	\$11,580	\$23,160	\$34,740	\$46,320	\$57,900	\$60,216	\$61,606	\$62,532	\$63,922	\$69,480	\$81,060	\$83,376	\$85,692	\$92,640
7	\$13,058	\$26,115	\$39,173	\$52,230	\$65,288	\$67,899	\$69,466	\$70,511	\$72,077	\$78,345	\$91,403	\$94,014	\$96,626	\$104,460
8	\$14,535	\$29,070	\$43,605	\$58,140	\$72,675	\$75,582	\$77,326	\$78,489	\$80,233	\$87,210	\$101,745	\$104,652	\$107,559	\$116,280
9	\$16,013	\$32,025	\$48,038	\$64,050	\$80,063	\$83,265	\$85,187	\$86,468	\$88,389	\$96,075	\$112,088	\$115,290	\$118,493	\$128,100
10	\$17,490	\$34,980	\$52,470	\$69,960	\$87,450	\$90,948	\$93,047	\$94,446	\$96,545	\$104,940	\$122,430	\$125,928	\$129,426	\$139,920
11	\$18,968	\$37,935	\$56,903	\$75,870	\$94,838	\$98,631	\$100,907	\$102,425	\$104,701	\$113,805	\$132,773	\$136,566	\$140,360	\$151,740
12	\$20,445	\$40,890	\$61,335	\$81,780	\$102,225	\$106,314	\$108,767	\$110,403	\$112,856	\$122,670	\$143,115	\$147,204	\$151,293	\$163,560
13	\$21,923	\$43,845	\$65,768	\$87,690	\$109,613	\$113,997	\$116,628	\$118,382	\$121,012	\$131,535	\$153,458	\$157,842	\$162,227	\$175,380
14	\$23,400	\$46,800	\$70,200	\$93,600	\$117,000	\$121,680	\$124,488	\$126,360	\$129,168	\$140,400	\$163,800	\$168,480	\$173,160	\$187,200

Household /Family Size	225%	250%	275%	300%	325%	350%	375%	400%	500%	600%	700%	800%	1000%
1	\$37,733	\$41,925	\$46,118	\$50,310	\$54,503	\$58,695	\$62,888	\$67,080	\$83,850	\$100,620	\$117,390	\$134,160	\$167,700
2	\$51,030	\$56,700	\$62,370	\$68,040	\$73,710	\$79,380	\$85,050	\$90,720	\$113,400	\$136,080	\$158,760	\$181,440	\$226,800
3	\$64,328	\$71,475	\$78,623	\$85,770	\$92,918	\$100,065	\$107,213	\$114,360	\$142,950	\$171,540	\$200,130	\$228,720	\$285,900
4	\$77,625	\$86,250	\$94,875	\$103,500	\$112,125	\$120,750	\$129,375	\$138,000	\$172,500	\$207,000	\$241,500	\$276,000	\$345,000
5	\$90,923	\$101,025	\$111,128	\$121,230	\$131,333	\$141,435	\$151,538	\$161,640	\$202,050	\$242,460	\$282,870	\$323,280	\$404,100
6	\$104,220	\$115,800	\$127,380	\$138,960	\$150,540	\$162,120	\$173,700	\$185,280	\$231,600	\$277,920	\$324,240	\$370,560	\$463,200
7	\$117,518	\$130,575	\$143,633	\$156,690	\$169,748	\$182,805	\$195,863	\$208,920	\$261,150	\$313,380	\$365,610	\$417,840	\$522,300
8	\$130,815	\$145,350	\$159,885	\$174,420	\$188,955	\$203,490	\$218,025	\$232,560	\$290,700	\$348,840	\$406,980	\$465,120	\$581,400
9	\$144,113	\$160,125	\$176,138	\$192,150	\$208,163	\$224,175	\$240,188	\$256,200	\$320,250	\$384,300	\$448,350	\$512,400	\$640,500
10	\$157,410	\$174,900	\$192,390	\$209,880	\$227,370	\$244,860	\$262,350	\$279,840	\$349,800	\$419,760	\$489,720	\$559,680	\$699,600
11	\$170,708	\$189,675	\$208,643	\$227,610	\$246,578	\$265,545	\$284,513	\$303,480	\$379,350	\$455,220	\$531,090	\$606,960	\$758,700
12	\$184,005	\$204,450	\$224,895	\$245,340	\$265,785	\$286,230	\$306,675	\$327,120	\$408,900	\$490,680	\$572,460	\$654,240	\$817,800
13	\$197,303	\$219,225	\$241,148	\$263,070	\$284,993	\$306,915	\$328,838	\$350,760	\$438,450	\$526,140	\$613,830	\$701,520	\$876,900
14	\$210,600	\$234,000	\$257,400	\$280,800	\$304,200	\$327,600	\$351,000	\$374,400	\$468,000	\$561,600	\$655,200	\$748,800	\$936,000

2023 Poverty Guidelines: Hawaii

Per Month

Household /Family Size	25%	50%	75%	100%	125%	130%	133%	135%	138%	150%	175%	180%	185%	200%
1	\$349	\$699	\$1,048	\$1,398	\$1,747	\$1,817	\$1,859	\$1,887	\$1,929	\$2,096	\$2,446	\$2,516	\$2,585	\$2,795
2	\$473	\$945	\$1,418	\$1,890	\$2,363	\$2,457	\$2,514	\$2,552	\$2,608	\$2,835	\$3,308	\$3,402	\$3,497	\$3,780
3	\$596	\$1,191	\$1,787	\$2,383	\$2,978	\$3,097	\$3,169	\$3,216	\$3,288	\$3,574	\$4,169	\$4,289	\$4,408	\$4,765
4	\$719	\$1,438	\$2,156	\$2,875	\$3,594	\$3,738	\$3,824	\$3,881	\$3,968	\$4,313	\$5,031	\$5,175	\$5,319	\$5,750
5	\$842	\$1,684	\$2,526	\$3,368	\$4,209	\$4,378	\$4,479	\$4,546	\$4,647	\$5,051	\$5,893	\$6,062	\$6,230	\$6,735
6	\$965	\$1,930	\$2,895	\$3,860	\$4,825	\$5,018	\$5,134	\$5,211	\$5,327	\$5,790	\$6,755	\$6,948	\$7,141	\$7,720
7	\$1,088	\$2,176	\$3,264	\$4,353	\$5,441	\$5,658	\$5,789	\$5,876	\$6,006	\$6,529	\$7,617	\$7,835	\$8,052	\$8,705
8	\$1,211	\$2,423	\$3,634	\$4,845	\$6,056	\$6,299	\$6,444	\$6,541	\$6,686	\$7,268	\$8,479	\$8,721	\$8,963	\$9,690
9	\$1,334	\$2,669	\$4,003	\$5,338	\$6,672	\$6,939	\$7,099	\$7,206	\$7,366	\$8,006	\$9,341	\$9,608	\$9,874	\$10,675
10	\$1,458	\$2,915	\$4,373	\$5,830	\$7,288	\$7,579	\$7,754	\$7,871	\$8,045	\$8,745	\$10,203	\$10,494	\$10,786	\$11,660
11	\$1,581	\$3,161	\$4,742	\$6,323	\$7,903	\$8,219	\$8,409	\$8,535	\$8,725	\$9,484	\$11,064	\$11,381	\$11,697	\$12,645
12	\$1,704	\$3,408	\$5,111	\$6,815	\$8,519	\$8,860	\$9,064	\$9,200	\$9,405	\$10,223	\$11,926	\$12,267	\$12,608	\$13,630
13	\$1,827	\$3,654	\$5,481	\$7,308	\$9,134	\$9,500	\$9,719	\$9,865	\$10,084	\$10,961	\$12,788	\$13,154	\$13,519	\$14,615
14	\$1,950	\$3,900	\$5,850	\$7,800	\$9,750	\$10,140	\$10,374	\$10,530	\$10,764	\$11,700	\$13,650	\$14,040	\$14,430	\$15,600

Household /Family Size	225%	250%	275%	300%	325%	350%	375%	400%	500%	600%	700%	800%	1000%
1	\$3,144	\$3,494	\$3,843	\$4,193	\$4,542	\$4,891	\$5,241	\$5,590	\$6,988	\$8,385	\$9,783	\$11,180	\$13,975
2	\$4,253	\$4,725	\$5,198	\$5,670	\$6,143	\$6,615	\$7,088	\$7,560	\$9,450	\$11,340	\$13,230	\$15,120	\$18,900
3	\$5,361	\$5,956	\$6,552	\$7,148	\$7,743	\$8,339	\$8,934	\$9,530	\$11,913	\$14,295	\$16,678	\$19,060	\$23,825
4	\$6,469	\$7,188	\$7,906	\$8,625	\$9,344	\$10,063	\$10,781	\$11,500	\$14,375	\$17,250	\$20,125	\$23,000	\$28,750
5	\$7,577	\$8,419	\$9,261	\$10,103	\$10,944	\$11,786	\$12,628	\$13,470	\$16,838	\$20,205	\$23,573	\$26,940	\$33,675
6	\$8,685	\$9,650	\$10,615	\$11,580	\$12,545	\$13,510	\$14,475	\$15,440	\$19,300	\$23,160	\$27,020	\$30,880	\$38,600
7	\$9,793	\$10,881	\$11,969	\$13,058	\$14,146	\$15,234	\$16,322	\$17,410	\$21,763	\$26,115	\$30,468	\$34,820	\$43,525
8	\$10,901	\$12,113	\$13,324	\$14,535	\$15,746	\$16,958	\$18,169	\$19,380	\$24,225	\$29,070	\$33,915	\$38,760	\$48,450
9	\$12,009	\$13,344	\$14,678	\$16,013	\$17,347	\$18,681	\$20,016	\$21,350	\$26,688	\$32,025	\$37,363	\$42,700	\$53,375
10	\$13,118	\$14,575	\$16,033	\$17,490	\$18,948	\$20,405	\$21,863	\$23,320	\$29,150	\$34,980	\$40,810	\$46,640	\$58,300
11	\$14,226	\$15,806	\$17,387	\$18,968	\$20,548	\$22,129	\$23,709	\$25,290	\$31,613	\$37,935	\$44,258	\$50,580	\$63,225
12	\$15,334	\$17,038	\$18,741	\$20,445	\$22,149	\$23,853	\$25,556	\$27,260	\$34,075	\$40,890	\$47,705	\$54,520	\$68,150
13	\$16,442	\$18,269	\$20,096	\$21,923	\$23,749	\$25,576	\$27,403	\$29,230	\$36,538	\$43,845	\$51,153	\$58,460	\$73,075
14	\$17,550	\$19,500	\$21,450	\$23,400	\$25,350	\$27,300	\$29,250	\$31,200	\$39,000	\$46,800	\$54,600	\$62,400	\$78,000

TAB 6
Request to re-nominate
board members with
terms expiring in April
and May 2023



SAN MATEO COUNTY HEALTH
**SAN MATEO
MEDICAL CENTER**

San Mateo Medical Center
222 W. 39th Avenue
San Mateo, CA 94403
650-573-2222 T
www.sanmateomedicalcenter.org
www.facebook.com/smchealth

DATE: March 9th, 2023

TO: Co-Applicant Board, San Mateo County Health Care for the Homeless/
Farmworker Health (HCH/FH) Program

FROM: Meron Asfaw, Community Program Coordinator

SUBJECT: REQUEST FOR APPROVAL TO RE-NOMINATE BOARD MEMBERS
WITH EXPIRING TERMS

As per the board's bylaws, one term on the board is four years, and there are no limitations to the number of terms a board member can serve. In light of this, we would like to request approval to re-nominate these board members for another term.

We believe that these board members have demonstrated an unwavering commitment to HCH/FH board and possess the experience and expertise necessary to continue contributing meaningfully to our mission.

To ensure a seamless continuation of our operations, we kindly request your approval to re-nominate the following board members:

Victoria Sanchez De Alba, whose term expires in April 2023. The new term will expire in April 2027

Suzanne Moore, whose term expires in May 2023. The new term will expire in May 2027

TAB 7
**Strategic plan
overview and update**



DATE: March 9, 2023

TO: Co-Applicant Board, San Mateo County Health Care for the Homeless/Farmworker Health (HCH/FH) Program

FROM: Irene Pasma, Program Planning and Implementation Coordinator

SUBJECT: HCH/FH STRATEGIC PLAN 2024-2027 UPDATE

The HCH/FH Strategic Plan is due to be updated this year by September/October 2023, allowing for the remainder of the year to create the RFP. New contracts would begin January 1, 2025. The steps to accomplish this are:

1. **March 2023 Board Meeting:** Staff presents Strategic Plan, Needs Assessment, RFP, and Contracts timeline and process
2. **March 2023:** Strategic Planning Subcommittee Meets to review progress against goals. Subcommittee Members are: Gabe Garcia, Janet Schmidt, Robert Anderson, Steven Kraft and Suzanne Moore. SMMC colleagues will be invited.
3. **April 2023 Board Meeting:** will be dedicated to presenting how the program has done against the strategic plan, share preliminary results from the Needs Assessment, and obtain feedback on type of changes the Board would like to see in the plan for the next cycle.
4. **May 2023-July 2023:** Staff attends various standing meetings across the County to get input on the strategic plan, for example Center on Homelessness' Lived Experience, Continuum of Care, BHRS and PHPP, Farmworker Affairs Meeting, etc.
5. **August 2023 Board Meeting:** will be dedicated to sharing all information gathered and additional Needs Assessment findings
6. **September 2023:** Subcommittee meets to create a recommendation for the Board
7. **October 2023 Board Meeting:** Business agenda to approve 2024-2027 Strategic Plan
8. **October – December 2023:** Program Staff begins developing the RFP

During the March 2023 Board Meeting, staff will present the above timeline and seek input from Board Members on the plan.

Attached: Strategic Plan 2020-2023 (without appendices)

County of San Mateo

**Healthcare for the
Homeless/Farmworker Health
HCH/FH Co-Applicant Board's
Strategic Plan 2020-2023**



**San Mateo County Healthcare for Homeless/Farmworker Health
Co-Applicant Board
Strategic Plan 2020-2023**

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 - c. **Strategic Priority 3:** Support health care providers serving homeless and farmworker patients.
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SAN MATEO COUNTY HEALTH
**SAN MATEO
MEDICAL CENTER**

Executive Summary

The 2020-2023 Strategic Plan builds upon previous efforts and reflects the evolution of the HCH/FH program both due to an expansion of program staff as well as new members on the Co-Applicant Board which, when combined, allowed the program to think more broadly and comprehensively.

The strategic planning process included a day-long kick off meeting for the Co-Applicant Board in September 2019, key informant interviews with ~40 stakeholders, 10 two-hour brainstorming sessions with diverse stakeholders, and a strategic planning subcommittee which consisted of Co-Applicant Board Members and San Mateo County Health Leadership. A Needs Assessment was completed in parallel to these efforts and its findings, including surveys from ~400 respondents, infused all aspects of Strategic Planning. Through these conversations and data analysis, several key findings arose:

Key Findings:

1. HCH/FH is a relatively small team and at the time of writing the strategic plan, were managing 14 contracts and MOUs across 10 entities. This does not include managing small funding requests or ad hoc expenditures which also require substantial administrative oversight. This takes significant staff time and effort that does not allow the program to dive deeply or measure outcomes fully of any one service beyond what is federally mandated.
2. There is a need for advocacy on behalf of the farmworker and homeless populations and a recognition of the emotional load it takes on providers to care for these patients. The two populations have unique differences which the Program needs to address more completely.
3. Street/Field Medicine and the Mobile Clinic (part of San Mateo County (SMC) Health's Public Health, Policy and Planning division) are extremely successful in providing services to the most vulnerable, difficult-to-reach patients. Due to this, their services are a cornerstone to the HCH/FH program and are lauded by county and community partners.
4. SMC Health provides many direct services (primary, dental, and behavioral health) and in some instances – particularly when it comes to Alcohol and Other Drug Services – they are underutilized. Accessing these services by marginalized communities remains difficult.
5. HCH/FH's funding agency, the Health Resources and Services Administration (HRSA) has generated compliance issues and concerns around the programs' contracting with external entities for clinical services. Compliance is an ongoing focus for this Program.

Key Decisions:

1. Funding for the Street/Field Medicine and the Mobile Clinic will be managed through direct negotiation rather than a competitive process, a change from previous funding cycles.
2. HCH/FH will focus efforts on improving and directing access of our populations to SMC Health and San Mateo Medical Center (SMMC) clinical services by funding enabling

services such as care navigators. This decision allows the Program to avoid compliance issues and have more control of health outcomes.

3. Efforts will be made to reduce the number of unique contracts/MOUs, increasing their amounts, and improving how outcomes are measured and reported.
4. How externally contracted partners think about advocacy on an organizational level and trauma-informed care on a provider level will be built into the RFP and taken into consideration when awarding funding.

In considering the findings and results, the board and the program arrived at strategic priorities to address them. Those priorities are:

- 1. Strategic Priority 1:** Increase homeless & farmworker patient utilization of SMMC & BHRS Services.
- 2. Strategic Priority 2:** Decrease barriers for homeless and farmworker patients to access health care.
- 3. Strategic Priority 3:** Support health care providers serving homeless and farmworker patients.
- 4. Strategic Priority 4:** Decrease health disparities among people experiencing homelessness & farmworker patients
- 5. Strategic Priority 5:** Meet and Exceed all HRSA Compliance Requirements

How these priorities will be implemented and measured are covered in the following pages.

Background

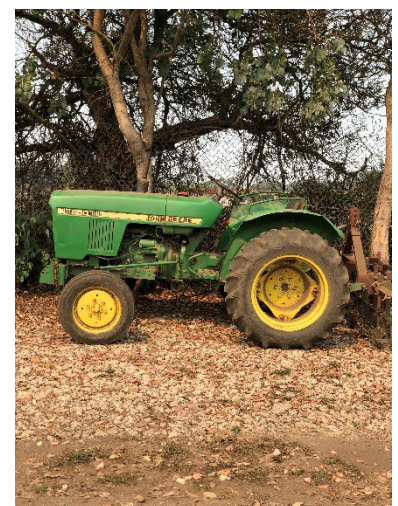
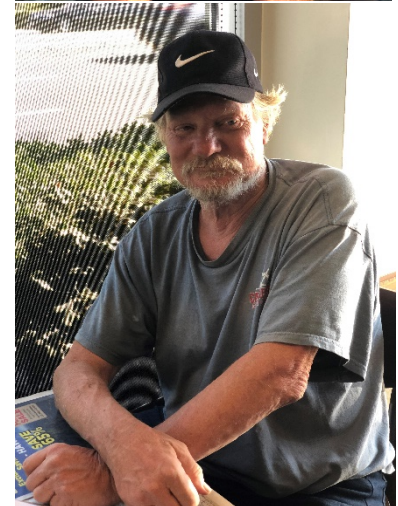
The San Mateo County Health Care for the Homeless/Farmworker Health (HCH/FH) Program is a county program that is federally funded by the Health Resources and Services Administration (HRSA) through the Public Health Act, with an annual budget of roughly \$3M. The Public Health Act supports over 1,300 Community Health Centers, Health Care for the Homeless Programs, Migrant/Farmworker Health Programs, and Public Housing Health Centers around the country. These programs support the availability and delivery of health services for their populations and focus on primary care, dental care, behavioral health, and supportive services in the outpatient setting. HCH/FH is the only known program in the United States which is solely both a Health Care for the Homeless Center and a Migrant Health Center.

HCH/FH complies with all HRSA regulations and grant requirements, therefore providing for all San Mateo County Health outpatient clinics to be considered Federally Qualified Health Centers (FQHC) and receive enhanced Medi-Cal and Medi-Care reimbursement rates, bringing in an estimated \$15-30M per year. Persons experiencing homelessness and/or farmworkers living in San Mateo County can access primary health care regardless of their ability to pay.

Within the County structure, the HCH/FH Program is primarily governed by an independent Board which is composed of community members who live in San Mateo County and are not employed by San Mateo County Health. The Board, which is typically about 12 people in size, decides how grant funds are spent, the services to be provided, and is responsible for ensuring compliance with HRSA's regulations and grant requirements.

Organizationally, HCH/FH resides within the San Mateo Medical Center which is one branch of San Mateo County Health, and reports to SMMC's CEO Chester Kunnappilly. Additionally, HCH/FH collaborates closely with other branches of Health, including Public Health, Policy & Planning (PHPP) and Behavioral Health & Recovery Services (BHRS) via Memorandums of Understanding (MOUs). HCH/FH also contracts with nonprofits to provide additional services that improve patients' access to healthcare. . Finally, HCH/FH builds relationships with county and non-county organizations and works closely with its counterparts Center on Homelessness, which is housed in the Human Services Agency, and the Department of Agriculture.

Since 1996, when the County first began to receive HRSA funding, the HCH/FH Program has grown significantly as have HRSA requirements. As the complexity of regulatory compliance increased, so have the challenges of our patients. With San Mateo County as one of the most expensive counties in the country, along with a national opioid public health emergency, immigration policies, and the ongoing housing crisis, numerous factors impact the program's ability to provide services. As such, strategic planning efforts are undertaken periodically to ensure the HCH/FH program is maximizing its impact while being responsive to the everchanging needs of our service population.



Mission, Values, and Philosophy

HCH/FH aligns with the San Mateo Medical Center's mission to "partner with patients to provide excellent care with compassion and respect" with the vision that every patient live the healthiest life possible.

In 2016, the HCH/FH Co-Applicant Board developed their own mission, vision, and value statements which still hold true today with some minor modifications to reflect the Board's evolution. These guiding principles will inform the Board and Program Staff when developing programs

Mission

The mission of the San Mateo Health Care for the Homeless/Farmworker Health (HCH/FH) Program is to serve homeless and farmworker individuals and families by ensuring they have access to comprehensive health care, in particular, primary health care, dental health care, and behavioral health services in a supportive, welcoming, and accessible environment.

Vision

- Health care services provided to homeless and/or farmworker individuals are patient centered and utilize a harm reduction model that meets patients where they are in their progress towards their goals.
- The HCH/FH Program lessens the barriers that homeless and/or farmworker individuals and their families may encounter when they try to access care.
- Health services are provided in consistent, accessible locations where people experiencing homelessness and farmworkers can receive timely care and have their immediate needs addressed in a supportive, respectful environment.
- Through its funded services and partnership with the Medical Center, the HCH/FH Program reduces the health care disparities in the homeless and farmworker populations.
- HCH/FH advocates on behalf of both populations' health needs and becomes a hub for health-related information for both San Mateo County and Community Based Organizations for these two populations.

Values

Access: Homeless and farmworker individuals and their families have full access to the continuum of health care and social services.

Dignity: Services provided are respectful, culturally competent, and treat the whole person's physical health and behavioral health.

Integrity: Homeless and farmworker individuals and their families are valued and considered a partner in making decisions regarding their health care.

Innovation: Services will continuously evolve to reflect current best practices and technological advances.

Strategic Priority 1: Increase homeless & farmworker patient utilization of SMMC & BHRS Services.

Activities	Outputs	Outcomes
<p>Attach care navigator capacity to New Patient Connection Center to help NPCC locate, follow up, and bring patients to SMMC</p>	<p>Number of patients care navigator locates upon request from NPCC</p>	<p>By EOY 2023, 50% of clients receiving care coordination will have at least one brick and mortar health care visit (primary care, behavioral health or dental care) within a 12-month period at SMMC or BHRS.</p> <p>By EOY 2023, increase percent of people experiencing homelessness receiving mental health & AOD services by 40% from 2019 baseline</p> <p>By EOY 2023, increase percent of farmworkers receiving mental health & AOD services by 20% from 2019 baseline.</p> <p><i>Approved by the Board July 2021</i></p>
<p>Attach care navigator capacity to Mobile Clinic to help patients seen at Mobile Clinic seek follow up/continuous care at Brick and Mortar Clinics</p>	<p>Number of patients referred to Care Coordinators by Mobile Clinic/Street/Field to be seen at SMMC or BHRS.</p>	
<p>Attach care navigator capacity to Street/Field Medicine to help patients seen follow up/continuous care at Brick and Mortar Clinics</p>	<p>Number of referred patients Care Navigator helps to get scheduled for a visit.</p>	
<p>Attach care navigator capacity to newly housed individuals to transition them from potentially mobile-based health services to brick and mortar/help maintain existing connection to health care services</p>	<p>Number of newly housed homeless patients who maintain their connection or create a connection to SMMC brick and mortar clinics after moving</p>	
<p>Work with SMMC NPCC and SMMC COO to ensure homeless patients can get slotted into a clinic visit within a reasonable time frame</p>	<p>Length of time between patient/care navigator on behalf of patient requests an appointment and obtaining an appointment at SMMC</p>	
<p>Open Saturday Dental Clinic at Coastside Clinic for farmworkers and family members</p>	<p>Number of farmworker and dependents receiving preventive dental care.</p>	

Strategic Priority 2: Decrease barriers for homeless and farmworker patients to access health care.

Activities	Outputs	Outcomes
Bring primary care to locations where people experiencing homelessness reside, i.e. encampments and shelters	Number of patients seen by Mobile Clinic and Street Medicine # of unique locations visited by Street Medicine and Mobile Clinic	<p>By EOY 2023, decrease the number of un-insured homeless and farmworker patients seen by HCH/FH to 5% and 10% respectively.</p> <p><i>Approved by the Board September 2021</i></p>
Bring primary care to farmworkers at their employment location in San Mateo County, South and North Coast	Number of farms visited by Field Medicine team per month Number of farmworkers seen by Field Medicine per month	
Provide behavioral health services at locations where people experiencing homelessness reside, i.e. street, encampments and shelters	Number of people experiencing homelessness and farmworkers seen by BHRS and PHPP IBHS	
Provide mild/moderate mental health & AOD services to people experiencing homelessness in shelters		
Provide mild/moderate mental health& AOD services to farmworkers		
Provide behavioral health care coordination via referral from community providers serving people experiencing homelessness		
HCH/FH staff works with SMMC/IT to ensure primary care/behavioral health services are provided via Tele-Health Stations at Maple Street & Puente	Number of tele-health visits conducted at baseline, midpoint, and final: % encounter face to face, % phone, % video	
Develop relationships with farm owners to support services for farmworkers	# of growers contacted # of growers responding	
Plan for transportation for farmworkers in South Coast to get to Coastside Clinic for Saturday dental clinic	# of people who use transportation	
Healthcare insurance/other benefits sign up for people experiencing homelessness and farmworkers	Number of people helped to sign up for health insurance Number of people who maintain their health insurance	
Work with BHRS IT to develop data reports from Avatar	Have a method to un-duplicate data between SMMC and BHRS patients	

Strategic Priority 3: Support health care providers serving homeless and farmworker patients

Activities	Outputs	Outcomes
Provide training to SMMC, BHRS, PHPP, and community providers at least 2/year, including tele-health related.	Number of trainings conducted Number Post-training Surveys received	Refer to QI/QA Plan for patient satisfaction related outcomes.
Create/maintain/update LMS modules (i.e. PSA training, homeless & farmworker health topics)	Number of HCH/FH Specific modules created/updated/maintained per year.	
Financially support SMMC, BHRS, PHPP, and community providers to attend relevant health conference	Number of people attending conferences.	
Partner with SMMC's Patient Experience department to conduct "Provider Appreciation" activities	# of events # of email communications	
Conduct two way dialogue with clinic managers/providers on HCH/FH program (quarterly report, meetings, etc)	# meetings/presentations	
Host forums for providers within SMMC, PHPP, BHRS, and nonprofits to discuss healthcare needs of homeless and farmworker patients	# provider collaboratives hosted for homeless health providers per year	
Support providers via small funding requests	# small funding requests completed	

Strategic Priority 4: Decrease health disparities among people experiencing homelessness & farmworker patients

Activities	Outputs	Outcomes
<p>Follow work outlined in the HCH/FH QI/QA Plan. In 2020/2021, the Plan focuses on:</p> <ol style="list-style-type: none"> 1. Cervical, colorectal, and breast cancer screening 2. Diabetic control 3. 1st trimester prenatal care 4. Depression screening and follow up 5. Adult BMI screening & follow up 	<p>Refer to QI/QA Plan</p>	<p>Refer to QI/QA Plan for clinical outcome goals</p>
<p>Standardize a reporting pathways between gathering and analyzing data and presenting the data to the San Mateo Medical Center to execute change*</p>		
<p>Asses feasibility of capturing homeless and farmworker status in SMC County death certificates.</p>		
<p>Education/Outreach for farmworkers and people experiencing homelessness</p>	<p># of education events held</p> <p># of farmworkers engaged</p> <p># of outreach materials developed and distributed</p>	

Strategic Priority 5: Meet and Exceed all HRSA Compliance Requirements

Activities	Outputs	Outcomes
Ensure HRSA Site Visits are conducted to an excellent level and minimize findings	Number of findings from site visits	<p>Following a site visit, have no more than 5 immediate enforcement actions, fewer than 2 conditions enter the 90-day phase of Progressive Action and 0 conditions enter the 30-day phase of Progressive Action</p> <p>Program will have no more than 5% of funds remaining at the end of the current grant cycle (December 2023)</p> <p><i>Approved by the Board September 2021</i></p>
Have a well functioning Co-Applicant Board, with proper representation across numerous areas of subject matter expertise and robust visibility in the community, Brown Act compliant, ethics and conflict of interest	Number of new members on-boarded per year.	
Submit UDS reports on time, answer all responses, improve year over year the processes by which data is reported.	Annual on-time UDS submissions	
Conduct Needs Assessment, update QI/QA and Strategic Plan on a regular basis	QI/QA award amount per year	
Apply for supplemental awards when appropriate.	Amount of supplemental awards received	
Right-sizing contracts throughout the year & identifying opportunities to spend down grant funds.	Amount of unexpended funds remaining at grant cycle end	
Stay connected to technical assistance opportunities through HRSA.	Number of webinars/trainings attended by staff	

Reporting and Refinement

The HCH/FH program reports on a large number of metrics throughout the year, ranging from contractor performance to Uniform Data System reports which holistically describes utilization numbers and quality metrics.

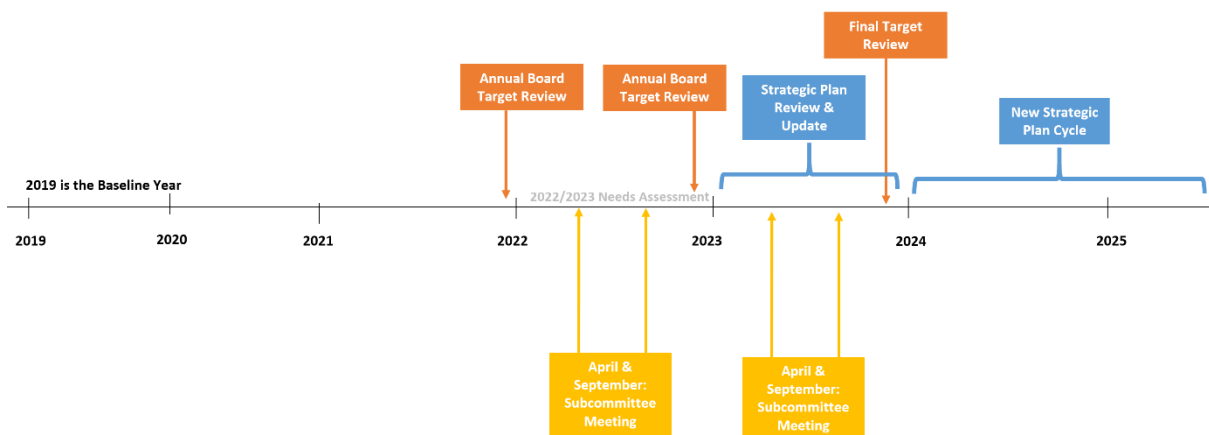
The Board will be regularly updated on outputs and outcomes outlined in the Strategic Plan.

1. By EOY 2023, **50%** of clients receiving care coordination will have at least one brick and mortar health care visit (primary care, behavioral health or dental care) within a 12-month period at SMMC or BHRS.
2. By EOY 2023, increase percent of people experiencing homelessness receiving mental health & AOD services by **40%** from 2019 baseline
3. By EOY 2023, increase percent of farmworkers receiving mental health & AOD services by **20%** from 2019 baseline.
4. By EOY 2023, decrease the number of un-insured homeless and farmworker patients seen by HCH/FH to **5% and 10%** respectively.
5. Following a site visit, have no more than **5** immediate enforcement actions, fewer than **2** conditions enter the 90-day phase of Progressive Action and **0** conditions enter the 30-day phase of Progressive Action
6. Program will have no more than **5%** of funds remaining at the end of the current grant cycle (December 2023)

The strategic plan also refers to the QI/QA Plan for patient satisfaction and clinical outcome measurements. Reporting on those metrics will continue per existing timelines and reporting pathways.

A Strategic Plan Sub-Committee will meet twice a year to get an update on the output measures as well as a preview into how the program is doing against the strategic plan. At these meetings, input on operations will be received and tweaked to support meeting targets.

Evaluation/Update Timeline



TAB 8

HCH/FH
director's
report



SAN MATEO COUNTY HEALTH
**SAN MATEO
MEDICAL CENTER**

San Mateo Medical Center
222 W 39th Avenue
San Mateo, CA 94403
650-573-2222 T
smchealth.org/smmc

DATE: March 09, 2023

TO: Co-Applicant Board, San Mateo County Health Care for the Homeless/Farmworker Health (HCH/FH) Program

FROM: Jim Beaumont Director, HCH/FH Program

SUBJECT: DIRECTOR'S REPORT & PROGRAM CALENDAR

Program activity update since the February 09, 2023, Co-Applicant Board meeting:

The HCH/FH Program continues to work with Health Administration, PHPP, LifeMoves and HiA (Healthcare in Action) in preparing for the opening of the County Homeless Navigation Center. We are also continued to work with Health Administration on assisting with the equipment needs for the Navigation Center medical and dental clinics.

HCH/FH submitted our annual UDS report (for Calendar Year (CY) 2022) on February 15th. We showed a somewhat significant drop in the number of homeless patients (~900), while the farmworker patient count was steady. We expected some potential loss in the homeless count due to no longer contracting with Ravenswood Family Health Center and some of the shifting in focus of the program's contracting, however, this appears somewhat larger than we expected. HCH/FH will begin analyzing the data in more depth soon to see if there are any potential issues that may need to be addressed. We have already received our initial UDS reviewer response with a small listing of questions and issues (~9), which have been responded to.

The National Health Care for the Homeless Council will hold their annual conference in Baltimore, MD, from May 15th through May 18th. This is always an excellent and informative conference. We continue putting together a list of potential attendees including Board members, staff, and possibly some partners from SMMC, Health and/or our community partners. Board members interested in attending should let Meron know as soon as possible.

Seven Day Update

ATTACHED:

- Program Calendar





2023 Calendar - County of San Mateo Health Care for the Homeless & Farmworker Health (HCH/FH) Program

*Board meetings are on the 2nd Thursday of the Month 9am-11am and are conducted virtually.
 Finance Sub-Committee Meets every month prior to the Main Board Meeting.*

Month	Events
January	<ul style="list-style-type: none"> HCH/FH Board's first meeting of the year HCH/FH Board will vote on new time change for the board meeting
February	<ul style="list-style-type: none"> Initial UDS Submission: February 15, 2023 2023 Western Forum for Migrant and Community Health, February 14-16, Long Beach, CA. https://www.nwrpca.org/events/event_details.asp?legacy=1&id=1670924
March	<ul style="list-style-type: none"> HCH/FH Board will return to an in-person meeting. Location: SMMC Education Room 2 Sliding Fee Discount Scale (SFDS)-Approve
April	<ul style="list-style-type: none"> SMMC Annual Audit – Approve In-person meeting location: County Building Room 101 455 County Center Redwood City, CA 94063
May	<ul style="list-style-type: none"> National Health Care for the Homeless Conference and Policy Symposium, May 15-18, Baltimore, Maryland https://nhchc.org/trainings/conferences/
June	<ul style="list-style-type: none"> Services/Locations Form 5A/5B – Approve
July	
August	
September	
October	
November	
December	

BOARD ANNUAL CALENDAR	
Project	Timeframe
UDS Submission – Review	Spring
SMMC Annual Audit – Approve	April/May
Services/Locations Form 5A/5B – Approve	June/July
Budget Renewal - Approve	July/Sept (program)– December/January (grant)
Annual Conflict of Interest Statement	October (and during new appointments)
Annual QI/QA Plan – Approve	Winter
Board Chair/Vice Chair Elections	November/December



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650-573-2222 T
www.sanmateomedicalcenter.org
www.facebook.com/smchealth

Program Director Annual Review	Fall/Spring
Sliding Fee Discount Scale (SFDS)	Spring
Strategic Plan Target Overview	December