

**Community Clinic Tobacco Settlement Revenue
Board Policy
Approved 4/28/2009
Effective 7/1/2009**

Summary of Policy:

- ❑ Restrict expenditure of community clinic TSR funds allocated to the individual clinics to direct medical, mental health and dental services for uninsured persons.
- ❑ Allow the Coalition and/or HCA to expend community clinic TSR for contract administration, for functions more effectively provided centrally, and for improvement of the community clinic system.
- ❑ Prohibit use of any community clinic TSR for abortions, abortion counseling, or promotion or advocacy of abortion as a method of family planning.

Policy Details:

1. Restrict expenditure of community clinic TSR funds allocated to the individual clinics to direct medical, mental health and dental services for uninsured persons.

1. Restrict TSR to direct medical, mental health and dental services.

Direct services are those providing specific treatment benefits to individual patients. This excludes the following types of services:

- * Health education activities, including family planning education. Education as a part of direct clinical service, such as treatment of diabetes or hypertension, is still permitted; however, group information programs, health education classes, or group education activities including media productions and publications are not permitted to be funded with community clinic TSR.
- * Language translation services, except as a part of direct services.

2. Restrict TSR to persons who have no private health insurance and are not eligible for any public health insurance

The limited TSR funds should not be used for persons who have private health insurance, or who are eligible for governmental health insurance programs such as Med-Cal or Healthy Families. This is similar to the limitation of the County's Medical Safety Net (MSN) Program, under which no person with private health insurance, or actual or potential other governmental insurance, is eligible for MSN. This limitation is consistent with Measure H's requirement that the funds supplement and not supplant existing federal, state and local funding.

2. Allow the Coalition and/or HCA to expend community clinic TSR for contract administration, for functions more effectively provided centrally, and for improvement of the community clinic system.

This allows a portion of community clinic TSR funds to be set aside for the Coalition to provide contract administration and centralized services on behalf of clinics when such services can be provided more effectively centrally than by each of the individual clinics. Also permitted is HCA administration of community clinic TSR funds designated for improvement of the overall community clinic system.

3. Prohibit use of any community clinic TSR for abortions, abortion referrals, abortion counseling, or promotion or advocacy of abortion as a method of family planning

No community clinic has ever used TSR to pay for abortions. However, since abortions could be considered a direct service they still could be provided within the restriction limiting TSR to direct services. To assure that abortions would not be funded by TSR in the future, the use of Measure H Community Clinic funds for abortions is specifically prohibited. Community clinic TSR is not to be used to fund abortion counseling, abortion referrals, or to engage in promotion or advocacy of abortion as a method of family planning. If a clinic were to elect to engage in any of these activities that would be impermissible uses for the limited TSR funds, the clinic would be required to physically and financially separate them from any activities funded by community clinic TSR to avoid the possibility that Measure H funds would indirectly support these activities.