

**COUNTY OF SAN DIEGO, CALIFORNIA**  
**BOARD OF SUPERVISORS POLICY**

**Subject**

Legislative Policy: Community Health Centers

**Policy  
Number**

M-20

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**Purpose**

To establish the Board of Supervisors' legislative policy regarding community health centers and to provide guidance to the County's legislative representatives when advocating the County's interests to legislators, other elected officials and policy makers.

**Background**

After leasing the County Hospital to the Regents of the University of California San Diego in 1968 (subsequently sold in 1980), the County ceased being a direct provider of ambulatory primary care, the exception being preventive health services provided by the Health and Human Services Agency. However, since 1971, the County has funded community health centers to provide preventive, diagnostic and treatment services. This history of County financial support for community health centers represents a significant portion of County-funded health care. This policy supports the County of San Diego's *Live Well San Diego* vision for a region that is building better health, living safely and thriving by providing quality community-based health care to San Diego County residents.

**Policy**

The legislative policy of the Board of Supervisors regarding community health centers is to:

1. Support legislation that would improve the ability of community health centers in securing low-cost medical professional liability insurance coverage.
2. Support legislation that would encourage the use of professional and non-professional volunteers, paraprofessionals and allied health professionals to the maximum extent possible.
3. Support legislation that would encourage the development of community health center programs, including patient-centered medical homes, in medically underserved communities.
4. Support legislation that would provide State and/or federal funds for community health center programs and services, including, but not limited to programs that support behavioral health and physical health integration.

**Responsible Departments**

Chief Administrative Office  
Office of Strategy and Intergovernmental Affairs

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**Sunset Date**

This policy will be reviewed for continuance by 12-31-25.

**References**

Board Action 4/26/77

Board Action 1/11/78 (1)

Board Action 12/11/84 (30)

Board Action 1/29/91 (78)

Board Policy A-67 — Primary Care Services for the Poor

Board Action 4/13/99 (42A)

Board Action 1/13/04 (13)

Board Action 12/11/07 (14)

Board Action 12/09/08 (33)

Board Action 11/08/11 (24)

Board Action 10/30/18 (23)

Board Action 1/12/21 (12)-Suspended