1	[Health Code - Patient Rates - FYs 2015-2016 and 2016-2017]
2	
3	Ordinance amending the Health Code to set patient rates and other services provided
4	by the Department of Public Health, effective July 1, 2015, through June 30, 2017.
5	NOTE: Unchanged Code text and uncodified text are in plain
6	Arial font. Additions to Codes are in single-underline italics Times New Roman font.
7	Deletions to Codes are in strikethrough italics Times New Roman font. Board amendment additions are in double-underlined Arial font.
8	Board amendment deletions are in strikethrough Arial font. Asterisks (* * * *) indicate the omission of unchanged Code
9	subsections or parts of tables.
10	Be it ordained by the People of the City and County of San Francisco:
11	Section 1. The Health Code is hereby amended by revising
12	Section 128, to read as follows:
13	SEC. 128. PATIENT RATES. The Board of Supervisors of the City and County of Sar
14	Francisco does hereby determine and fix the proper reasonable amounts to be charged to
15	persons for services furnished by the Department of Public Health as follows, which rates
16	shall be effective for services delivered as of July 1, 2014 through June 30, 2016 July 1, 2015
17	<u>through June 30, 2017</u> .
18	
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1	TYPE OF SERVICE	UNIT		AMOUNT					
2			2014-15	2015-16	2016-17				
3	COMMUNITY HEALTH NETWORK								
4	San Franc	isco General	Hospital						
5 6 7 8 9 10 11	Supplies & Drugs		Special Price List located at 1001 Potrero Street, SFGH, incorporated in this provision by reference as if specifically set forth herein and are no subject to change except by amendment to this provision						
	Surgical Supplies		Special Price List located at 1001 Potrero Street, SFGH, incorporated into this provision by reference as if specifically set forth herein and are not subject to change except by amendment to this provision						
13 14 15	Pharmacy (IP)		Special Price List located at 1001 Potrero Street, SFGH, incorporated into this provision by reference as if specifically set forth herein and are not subject to change except by amendment to this provision						
16 17 18 19	Medical Supplies		Special Price List located at 1001 Potrero Street, SFGH, incorporated in this provision by reference as if specifically set forth herein and are not subject to change except by amendment to this provision						
202122232425	Diagnostic Radiology		Special Price List located at 1001 Potrero Street, SFGH, incorporated in this provision by reference as if specifically set forth herein and are not subject to change except by amendment to this provision						

1	TYPE OF SERVICE	UNIT	AMOUNT				
2			2014-15	2015-16	2016-17		
3 4 5 6	Clinical Lab		Special Price List located at 1001 Potrero Street, SFGH, incorporated interpretation by reference as if specifically set forth herein and are not subject to change except by amendment to this provision Special Price List located at 1001 Potrero Street, SFGH, incorporated interpretation by reference as if specifically set forth herein and are not subject to change except by amendment to this provision Special Price List located at 1001 Potrero Street, SFGH, incorporated interpretation by reference as if specifically set forth herein and are not subject to change except by amendment to this provision by reference as if specifically set forth herein and are not subject to change except by amendment to this provision				
7 8 9 10	Anatomic Pathology						
11 12 13	All Other Special Services						
14 15							
16	In-Patient Care						
	Medical Surgical	Day	7,387	8,126	<u>8,938</u>		
17	Intensive Care	Day	14,767	16,244	<u>17,869</u>		
18	Intensive Care – Trauma	Day	14,767	16,244	<u>17,869</u>		
19	Coronary Care	Day	14,767	16,244	<i>17,869</i>		
20	Stepdown Units	Day	10,664	11,730	<u>12,903</u>		
21	Pediatrics	Day	7,065	7,771	<u>8,549</u>		
22	Obstetrics	Day	<i>5,781</i> 6,35		<u>6,994</u>		
23	Nursery						
2425	New Born	Day	2,952	3,247	<u>3,572</u>		

1	TYPE OF SERVICE	UNIT	AMOUNT				
2			2014-15	2015-16	2016-17		
3	Observation/Well Baby	Day	5,136	5,650	<u>6,215</u>		
4	Semi-Intensive Care	Day	9,841	10,826	<u>11,908</u>		
5	Intensive Care	Day	14,767	16,244	<u>17,869</u>		
6	Labor/Delivery - 6G	Day	5,136	5,650	<u>6,215</u>		
7	Labor/Delivery Hours of Stay	Hour	257	283	<u>311</u>		
8	Psychiatric Inpatient	Day	5,781	6,359	<u>6,994</u>		
9	Psychiatric Forensic Inpatient - 7L	Day	5,781	6,359	<u>6,994</u>		
10	AIDS Unit - 5A	Day	5,781	6,359	<u>6,994</u>		
11	Security Unit - 7D	Day	5,781	6,359	<u>6,994</u>		
12	Skilled Nursing Facility	Day	2,313	2,545	<u>2,799</u>		
13	Mental Rehab Unit	Day	1,911	2,102	<u>2,313</u>		
14	Adult Residential Facility	Day	386	425	<u>467</u>		
15							
16	Respiratory Therapy						
17 18	O2 Therapy	per 24 hours	755	830	<u>913</u>		
19							
20	Surgical Services						
21	Minor Surgery I (Come & Go)	1st Hour	3,867	4,253	<u>4,679</u>		
22	Minor Surgery I (Come & Go)	Ea. Add'l 1/2 Hr.	1,970	2,167	<u>2,384</u>		
23	Minor Surgery II	1st Hour	4,221	4,643	<u>5,107</u>		
24 25	Minor Surgery II	Ea. Add'l 1/2 Hr.	2,106	2,316	<u>2,548</u>		

1	TYPE OF SERVICE	UNIT		AMOUNT	
2			2014-15	2015-16	2016-17
3	Major Surgery I	1st Hour	6,356	6,991	<u>7,690</u>
4 5	Major Surgery I	Add'l 1/2 Hour	2,541	2,795	<u>3,074</u>
6	Major Surgery II	1st Hour	7,157	7,872	<u>8,660</u>
7	Major Surgery II	Add'l 1/2 Hour	2,866	3,152	<u>3,467</u>
8	Major Surgery III	1st Hour	7,965	8,761	<u>9,637</u>
9 10	Major Surgery III	Add'l 1/2 Hour	3,186	3,505	<u>3,856</u>
11	Extraordinary Surgery	1st Hour	8,741	9,615	<u>10,576</u>
12	Extraordinary Surgery	Add'l 1/2 Hour	3,497	3,846	<u>4,231</u>
13	Surgery (2 Teams)	1st Hour	11,811	12,992	<u>14,292</u>
14 15	Surgery (2 Teams)	Add'l 1/2 Hour	4,724	5,196	<u>5,716</u>
16	Surgery (3 Teams)	1st Hour	13,132	14,445	<u>15,889</u>
17	Surgery (3 Teams)	Add'l 1/2 Hour	5,253	5,779	<u>6,357</u>
18	Major Trauma III	1st Hour	10,350	11,385	<u>12,523</u>
19 20	Major Trauma III	Add'l 1/2 Hour	4,141	4,555	<u>5,010</u>
21	Major Trauma II	1st Hour	9,841	10,826	<u>11,908</u>
22	Major Trauma II	Add'l 1/2 Hour	3,938	4,332	<u>4,765</u>
23	Major Trauma I	1st Hour	7,487	8,236	<u>9,059</u>
24 25	Major Trauma I	Add'l 1/2 Hour	2,996	3,296	<u>3,625</u>

TYPE OF SERVICE	UNIT	AMOUNT		
		2014-15	2015-16	2016-17
Recovery Room	1st Hour	2,462	2,709	<u>2,979</u>
Recovery Room	2nd Add'l Hour	1,970	2,167	<u>2,384</u>
Recovery Room	Each Add'l Hour	1,477	1,625	<u>1,788</u>
Anesthesia	1st Hour	5,530	6,083	<u>6,692</u>
Anesthesia	Add'l 1/2 Hour	2,760	3,037	<u>3,340</u>
Trauma Care				
Trauma Activation -900	Visit	22,627	24,890	<u>27,379</u>
Trauma Activation – 911	Visit	13,310	14,641	<u>16,105</u>
Trauma Critical Care	1st 30-74 Minutes	7,086	7,795	<u>8,574</u>
Trauma Critical Care	Each Add'l. 30 Min.	1,772	1,948	<u>2,143</u>
ED Level 5 Team Trauma	Visit	13,310	14,641	<u>16,105</u>
Emergency Clinic				
Level I	Room	421	463	<u>509</u>
Level II	Room	1,259	1,385	<u>1,524</u>
Level III	Room	2,694	2,963	<u>3,260</u>
Level IV	Room	4,438	4,881	<u>5,369</u>
Level V	Room	8,958	9,853	<u>10,839</u>
		6,206	6,827	<u>7,510</u>

1	TYPE OF SERVICE	UNIT		AMOUNT			
2			2014-15	2015-16	2016-17		
3							
4	Psychiatric Emergency Services						
5	Psych Crisis – Level 1 ER Room	Room	865	952	<u>1,047</u>		
6	Psych Crisis – Level 2 ER Room	Room	2,011	2,212	<u>2,433</u>		
7	Psych Crisis – Level 3 ER Room	Room	3,159	3,475	<u>3,823</u>		
8	Psych Crisis – Level 4 ER Room	Room	4,306	4,737	<u>5,211</u>		
9	Psych Crisis – Level 5 ER Room	Room	5,456	6,001	<u>6,602</u>		
10	Psych Crisis – Level 6 ER Room	Room	6,604	7,265	<u>7,991</u>		
11	Medication Svs/Min.	per minute	21	23	<u>25</u>		
12	General Clinic						
13	Initial						
14	E/M Focused Exam	Visit	282	310	<u>341</u>		
15	E/M Expanded Exam	Visit	470	517	<u>569</u>		
16	E/M Detailed Exam	Visit	536	590	<u>649</u>		
17	E/M Comprehensive Exam	Visit	717	789	<u>868</u>		
18	E/M Complex Exam	Visit	896	985	<u>1,084</u>		
19	Established Patient						
20	E/M Brief Exam	Visit	218	240	<u>264</u>		
21	E/M Focused Exam	Visit	260	285	<u>314</u>		
22	E/M Expanded Exam	Visit	342	376	<u>414</u>		
23	E/M Detailed Exam	Visit	484	533	<u>586</u>		
24	E/M Comprehensive Exam	Visit	756	832	<u>915</u>		
25							

1	TYPE OF SERVICE	E OF SERVICE UNIT AM			MOUNT		
2			2014-15	2015-16	2016-17		
3	Consultation						
4	E/M Focused Consult	Visit	248	272	<u>300</u>		
5	E/M Detailed Consult	Visit	<i>511</i>	562	<u>618</u>		
6	Primary Care						
7	Initial						
8	E/M Focused Exam	Visit	309	340	<u>374</u>		
9	E/M Expanded Exam	Visit	383	422	<u>464</u>		
10	E/M Detailed Exam	Visit	<i>556</i>	612	<u>673</u>		
11	E/M Comprehensive Exam	Visit 689 7	758	<u>834</u>			
12	E/M Complex Exam	Visit	1,083	1,192	<u>1,311</u>		
13	Established Patient						
14	E/M Brief Exam	Visit	157	173	<u>190</u>		
15	E/M Focused Exam	Visit	234	258	<u>283</u>		
16	E/M Expanded Exam	Visit	409	450	<u>495</u>		
17	E/M Detailed Exam	Visit	532	586	<u>644</u>		
18	E/M Comprehensive Exam	Visit	832	915	<u>1,007</u>		
19							
20	Dental Services						
21	Initial Complete Exam	Visit	131	144	<u>158</u>		
22	Periodic Exam	Visit	131	144	<u>158</u>		
23	Prophylaxis – Adult	Visit	181	199	<u>219</u>		
24	Prophylaxis – Child	Visit	172	189	<u>208</u>		
25							

1	TYPE OF SERVICE	UNIT		AMOUNT	
2			2014-15	2015-16	2016-17
3	Extract Single Tooth	Visit	260	286	<u>315</u>
4	One Surface, Permanent Tooth	Visit	209	230	<u>253</u>
5					
6	Home Health Services				
7	Skilled Nursing	Visit	487	536	<u>590</u>
8	Home Health Aide Services	Visit	258	284	<u>312</u>
9	Medical Social Services	Visit	672	739	<u>813</u>
10	Physical Therapy	Visit	559	587	<u>616</u>
11	Occupational Therapy	Visit	559	587	<u>616</u>
12	Speech Therapy	Visit	<i>556</i>	587	<u>619</u>
13					
14	Lagun	a Honda Hos	pital		
15	In-Patient Care				
16	Regular Hospital Rates				
17	Acute	Day	4,980	5,478	<u>6,026</u>
18	Rehabilitation	Day	4.980	5,478	<u>6,026</u>
19	Skilled Nursing Facility	Day	1,065	1,172	<u>1,289</u>
20	All Inclusive Rates				
21	Acute	Per Diem	6,535	7,189	<u>7,908</u>
22	Rehabilitation	Per Diem	5,446	6,263	<u>7,202</u>
23	Skilled Nursing Facility	Day	1,241	1,365	<u>1,502</u>
24					
25					

1	TYPE OF SERVICE	UNIT		AMOUNT	
2			2014-15	2015-16	2016-17
3					
4	POPULATION	N HEALTH & P	PREVENTION	N	
5	Community	/ Mental Healt	h Services		
6	24-Hour Service				
7	Hospital Inpatient	Day	5,781	6,359	<u>6,994</u>
8	Skilled Nursing	Day	1,911	2,102	<u>2,313</u>
9	Psychiatric Health Facility (PHF)	Day	799	815	<u>831</u>
0	Adult Crisis Residential	Day	448	457	<u>466</u>
1	Adult Residential	Day	218	230	<u>235</u>
2	Day Services				
3	Day Rehabilitation	Full Day	172	175	<u>210</u>
4	Day Rehabilitation	Half Day	110	112	<u>134</u>
5	Day Treatment Intensive	Full Day	270	290	<u>348</u>
6	Day Treatment Intensive	Half Day	188	192	<u>230</u>
7 8	Day Treatment Intensive (Children)	Full Day	383	390	<u>468</u>
9 0	Day Treatment Intensive (Children)	Half Day	274	280	<u>336</u>
:1	Crisis Stabilization	Hour	273	278	<u>334</u>
2	Socialization	Hour	56	66	<u>79</u>
3	Outpatient Services				
4	Case Management Brokerage	Minute	3.50	3.65 <u>4.80</u>	<u>5.76</u>
т 5	Mental Health Services	Minute	4.30	4.50- <u>6.35</u>	<u>7.62</u>

Mayor Lee; Supervisor Farrell **BOARD OF SUPERVISORS**

TYPE OF SERVICE	UNIT		Α	MOUNT		
		2014-15	20	015-16	2016-17	
Therapeutic Behavioral Services	Minute	4.30		4.50- <u>6.35</u>	<u>7.62</u>	
Medication Support	Minute	8.45	ť	8.75 <u>12.60</u>	<u>15.12</u>	
Crisis Intervention	Minute	6.20		6.45 <u>9.10</u>	<u>10.92</u>	
Other Services		Special Price List located at 1380 Howard Street, Community Behavioral Health Services, incorporated into this provision by reference as if specifically set forth herein and are not subject to change except by amendment to this provision				
Commi	unity Substance	e Abuse				
<u>Residential Services</u>						
Residential – Detoxification	Day		148	148 <u>155</u>	<u>163</u>	
Residential – Basic	Day		143	143 <u>160</u>	<u>168</u>	
Residential – Family	Day		220	220 <u>231</u>	<u>243</u>	
Residential - Medical Support	Day		324	324 <u>340</u>	<u>357</u>	
Recovery Home	Day		115	115 <u>121</u>	<u>127</u>	
Therapeutic Community	Day		132	132 <u>139</u>	<u>146</u>	
Non-Residential Services						
Day Care Rehabilitative	Per Visit		160	160		

1	TYPE OF SERVICE	UNIT	AMOUNT		MOUNT			
2			2014-15 20		2014-15 201 5		015-16	2016-17
3 4	Intensive Outpatient Treatment/Day Care Rehabilitative	<u>Per Visit</u>			<u>168</u>	<u>176</u>		
5	Outpatient - Individual Counseling	Per Visit		160	160 <u>180</u>	<u>189</u>		
6	Outpatient - Group Counseling	Per Visit		89	89 <u>93</u>	<u>98</u>		
7	Secondary Prevention Services							
8	Prevention/Intervention	Hour		78	78 <u>82</u>	<u>86</u>		
9	Narcotic Treatment Programs (NTP)							
10	Methadone <u>Dosing</u>	Day		40	40 <u>42</u>	<u>44</u>		
11	Buprenorphine	Day		72	72 <u>76</u>	<u>79</u>		
12	Naltrexone	Per Visit		65	65			
13 14	Narcotic Treatment Program – Individual Counseling	Per 10 minutes		40	<i>40</i> <u>42</u>	<u>44</u>		
15 16	Narcotic Treatment Program – Group Counseling	Per 10 minutes		12	12 <u>24</u>	<u>25</u>		
17	<u>NTP – Detoxification</u>	<u>Day</u>			<u>20</u>	<u>21</u>		
18	POPULATION		DEVENTIO	NI.				
19		ital Records	KLVLIVIIO	'IN				
20		Per	Potos Po	r Stat	e of Califorr	sia Haalth		
21	Birth Certificate	Certificate			ode, Section			
22 23	Death Certificate	Per Certificate	Rates Per State of California, Health and Safety Code, Section 103650					
24	Permit - Disposition of Human Remains	Per Permit	Rates Per State of California, Health and Safety Code, Section 103650					
25		I.	1					

1	TYPE OF SERVICE	UNIT	AMOUNT			
2			2014-15	2015-16	2016-17	
3 4	Out-of-County Cross File	Per Certificate	Rates Per State of California, Health and Safety Code, Section 103650			
5	Letter of Non-Contagious Disease	Per Letter		10 15	<u>15</u>	
6 7	Expedited Registration of Vital Event	Per Event	Rates Per State of California, Health and Safety Code, Section 103650			
8	Expedited Documents	Per Delivery		<i>30</i> 30	<u>30</u>	
9 10	After Hours Registration of Vital Event	Per Event		<i>40</i> 42	<u>42</u>	
11	Reproduction of Documents	Per Page		2 2	<u>2</u>	
12	Medical Marijuana					
13	Medical Marijuana ID	Card	4	20 120	<u>120</u>	
14	Medical Marijuana ID (Medi-Cal Beneficiaries)	Card		<i>60</i> 60	<u>60</u>	
15 16	ADULT IMMUNIZATION CLINIC					
17	Clinic Visits					
18	Travel Health Visit (THV1)	Per Visit		50 50	<u>55</u>	
19 20	Travel Health Visit (THV2) – Under Age 18 with Parent THV1	Per Visit		<i>30 31</i> 50	<u>55</u>	
2122232425	Registered Nurse Visit – Off- Site Location	Per Visit	4	53 156 172	<u>190</u>	

1	TYPE OF SERVICE	UNIT		AMOUNT		
2			2014-15	2015-16	2016-17	
3						
4			Special	Drice Liet less	tod at 101	
5	Other Vaccines	Per Injection	Special Price List located at 101 Grove Street, Adult Immunization and Travel Clinic, incorporated into this provision by reference as if specifically set forth herein and are not subject to change except by amendment			
6						
7						
8			<u>suojeci io c</u>	to this provisio		

Section 2. Special price lists referenced in Section 128 of the Health Code are available on request at the Office of the Clerk of the Board of Supervisors.

Section 3. Effective Date. This ordinance shall become effective 30 days after enactment. Enactment occurs when the Mayor signs the ordinance, the Mayor returns the ordinance unsigned or does not sign the ordinance within ten days of receiving of it, or the Board of Supervisors overrides the Mayor's veto of the ordinance. As stated in Section 128 of the Health Code, the rates specified therein shall apply starting July 1, 2015.

Section 4. Scope of Ordinance. In enacting this ordinance, the Board of Supervisors intends to amend only those words, phrases, paragraphs, subsections, sections, articles, numbers, punctuation marks, charts, diagrams, or any other constituent parts of the municipal code that are explicitly shown in this ordinance as additions, deletions, Board amendment

1	additions, and Board amendment deletions in accordance with the "Note" that appears under
2	the official title of the ordinance.
3	APPROVED AS TO FORM: DENNIS J. HERRERA, City Attorney
5 6	By: KATHLEEN MURPHY
7	Deputy City Attorney n:\legana\as2015\1500836\01019867.doc
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