

[Health Code - Patient Rates for FYs 2020-2021 and 2021-2022]

**Ordinance amending the Health Code to set patient rates and rates for other services provided by the Department of Public Health, for FYs 2020-2021 and 2021-2022, starting July 1, 2020, through June 30, 2022.**

NOTE: **Unchanged Code text and uncodified text** are in plain Arial font. **Additions to Codes** are in *single-underline italics Times New Roman font*. **Deletions to Codes** are in *strikethrough italics Times New Roman font*. **Board amendment additions** are in double-underlined Arial font. **Board amendment deletions** are in ~~strikethrough Arial font~~. **Asterisks (\* \* \* \*)** indicate the omission of unchanged Code subsections or parts of tables.

Be it ordained by the People of the City and County of San Francisco:

Section 1. The Health Code is hereby amended by revising Section 128, to read as follows:

The Board of Supervisors of the City and County of San Francisco does hereby determine and fix the proper reasonable amounts to be charged to persons for services furnished by the Department of Public Health as follows, which rates shall be effective for services delivered as of July 1, ~~2017~~20, through June 30, ~~2020~~22.

TYPE OF SERVICE	UNIT	AMOUNT			
		<del>2017-18</del>	<del>2018-19</del>	<u>201920-201</u>	<u>2021-22</u>
<b>SAN FRANCISCO HEALTH NETWORK</b>					
<b><i>Zuckerberg San Francisco General Hospital and Trauma Center (ZSFG)</i></b>					
Supplies & Drugs	Special Price Lists located at 1001 Potrero Avenue, ZSFG, incorporated into this provision by reference as if specifically set forth herein, <del>and not subject to change except by amendment to this provision</del> . Such rates are <u>subject to change by the Director of Health based on increases or decreases to procurement cost of the individual supplies and medications</u> <del>shall be increased 7% effective July 1, 2019,</del>				

TYPE OF SERVICE	UNIT	AMOUNT			
		<u>2017-18</u>	<u>2018-19</u>	<u>2019-20</u>	<u>2020-21</u>
		<i>rounded to the nearest dollar.</i> These Special Price Lists are posted on the Office of Statewide Health Planning and Development website ( <a href="http://www.oshpd.ca.gov">www.oshpd.ca.gov</a> ).			
<b><u>Zuckerberg San Francisco General Hospital and Trauma Center (ZSFG)</u></b>					
<u>Diagnostic Radiology</u> <u>Clinical Lab</u> <u>Anatomic Pathology</u> <u>All Other Special Services</u>	<u>Special Price Lists located at 1001 Potrero Avenue, ZSFG, incorporated into this provision by reference as if specifically set forth herein. Such rates are subject to change by the Director of Health. This Special Price Lists are posted on the Office of Statewide Health Planning and Development website (<a href="http://www.oshpd.ca.gov">www.oshpd.ca.gov</a>).</u>				
<b>In-Patient Care</b>					
Medical Surgical	Day	9,216	9,769	10,453	9,769
Intensive Care	Day	18,424	19,530	20,897	22,460
Intensive Care - Trauma	Day	18,424	19,530	20,897	22,460
Coronary Care	Day	18,424	19,530	20,897	22,460
Stepdown Units	Day	13,305	14,103	15,090	14,103
Pediatrics	Day	8,814	9,343	9,997	9,343
Obstetrics	Day	7,212	7,645	8,180	7,645
Nursery					
New Born	Day	3,683	3,904	4,177	4,177
<i>Observation/Well Baby</i>	<i>Day</i>	6,408	6,793	7,268	
Semi-Intensive Care	Day	12,278	13,015	13,926	14,901
Intensive Care	Day	18,424	19,530	20,897	22,459
<i>Labor/Delivery – 6G</i>	<i>Day</i>	6,408	6,793	7,268	
Labor/Delivery Hours of Stay	Hour	320	340	364	363
Psychiatric Inpatient	Day	7,212	7,645	8,180	7,645

TYPE OF SERVICE	UNIT	AMOUNT			
		<u>2017-18</u>	<u>2018-19</u>	<u>2019-20</u>	<u>2020-21</u>
Psychiatric Forensic Inpatient - 7L	Day	<u>7,212</u>	<u>7,645</u>	<u>8,180</u>	<u>7,645</u>
<i>AIDS Unit - 5A</i>	<i>Day</i>	<i>7,212</i>	<i>7,645</i>	<i>8,180</i>	
Security Unit - 7D	Day	<u>7,212</u>	<u>7,645</u>	<u>8,180</u>	<u>7,645</u>
Skilled Nursing Facility	Day	<u>2,886</u>	<u>3,059</u>	<u>3,273</u>	<u>3,059</u>
Mental Rehab Unit	Day	<u>2,385</u>	<u>2,528</u>	<u>2,705</u>	<u>2,528</u>
Adult Residential Facility	Day	<u>482</u>	<u>510</u>	<u>546</u>	<u>510</u>
<b>Respiratory Therapy</b>					
O <sub>2</sub> Therapy	per 24 hours	<u>942</u>	<u>998</u>	<u>1,068</u>	<u>360</u>
<b>Surgical Services</b>					
Minor Surgery I (Come & Go)	1st Hour	<u>4,824</u>	<u>5,113</u>	<u>5,471</u>	<u>6,647</u>
Minor Surgery I (Come & Go)	Add'l ½ Hour <i>or</i> <i>portion</i>	<u>2,458</u>	<u>2,605</u>	<u>2,787</u>	<u>3,323</u>
Minor Surgery II	1st Hour	<u>5,266</u>	<u>5,582</u>	<u>5,972</u>	<u>7,256</u>
Minor Surgery II	Add'l ½ Hour <i>or</i> <i>portion</i>	<u>2,627</u>	<u>2,785</u>	<u>2,980</u>	<u>3,628</u>
Major Surgery I	1st Hour	<u>7,929</u>	<u>8,405</u>	<u>8,993</u>	<u>10,927</u>
Major Surgery I	Add'l ½ Hour <i>or</i> <i>portion</i>	<u>3,170</u>	<u>3,360</u>	<u>3,595</u>	<u>4,368</u>
Major Surgery II	1st Hour	<u>8,929</u>	<u>9,465</u>	<u>10,127</u>	<u>12,304</u>
Major Surgery II	Add'l ½ Hour <i>or</i> <i>portion</i>	<u>3,575</u>	<u>3,790</u>	<u>4,055</u>	<u>4,927</u>
Major Surgery III	1st Hour	<u>9,937</u>	<u>10,533</u>	<u>11,270</u>	

	TYPE OF SERVICE	UNIT	AMOUNT			
			2017-18	2018-19	2019-20	2020-21
					<u>13,693</u>	<u>13,693</u>
	Major Surgery III	Add'l ½ Hour <u>or</u> <u>portion</u>	3,975	4,214	4,509 <u>5,478</u>	<u>5,478</u>
	<i>Extraordinary Surgery</i>	<i>1st Hour</i>	<i>10,905</i>	<i>11,559</i>	<i>12,369</i>	
	<i>Extraordinary Surgery</i>	<i>Add'l ½ Hour</i>	<i>4,362</i>	<i>4,624</i>	<i>4,948</i>	
	<i>Surgery (2 Teams)</i>	<i>1st Hour</i>	<i>14,736</i>	<i>15,620</i>	<i>16,714</i>	
	<i>Surgery (2 Teams)</i>	<i>Add'l ½ Hour</i>	<i>5,893</i>	<i>6,247</i>	<i>6,684</i>	
	Surgery (3 Teams)	1st Hour	16,383	17,366	18,582 <u>22,576</u>	<u>22,576</u>
	Surgery (3 Teams)	Add'l ½ Hour <u>or</u> <u>portion</u>	6,554	6,948	7,434 <u>9,032</u>	<u>9,032</u>
	<i>Major Trauma III</i>	<i>1st Hour</i>	<i>12,913</i>	<i>13,687</i>	<i>14,646</i>	
	<i>Major Trauma III</i>	<i>Add'l ½ Hour</i>	<i>5,166</i>	<i>5,476</i>	<i>5,859</i>	
	<i>Major Trauma II</i>	<i>1st Hour</i>	<i>12,278</i>	<i>13,015</i>	<i>13,926</i>	
	<i>Major Trauma II</i>	<i>Add'l ½ Hour</i>	<i>4,914</i>	<i>5,208</i>	<i>5,573</i>	
	Major Trauma I	1st Hour	9,341	9,901	10,594 <u>12,871</u>	<u>12,871</u>
	Major Trauma I	Add'l ½ Hour <u>or</u> <u>portion</u>	3,738	3,962	4,240 <u>5,151</u>	<u>5,151</u>
	Recovery Room	1st Hour	3,072	3,256	3,484 <u>4,232</u>	<u>4,232</u>
	<i>Recovery Room</i>	<i>2nd Add'l Hour</i>	<i>2,458</i>	<i>2,605</i>	<i>2,787</i>	
	Recovery Room	Each Add'l Hour <u>or</u> <u>portion</u>	1,843	1,954	2,091 <u>2,116</u>	<u>2,116</u>
	Anesthesia	1st Hour	6,900	7,314	7,826 <u>9,508</u>	<u>9,508</u>

TYPE OF SERVICE	UNIT	AMOUNT			
		<u>2017-18</u>	<u>2018-19</u>	<u>2019-20</u>	<u>2020-21</u>
Anesthesia	Add'l ½ Hour <u>or</u> <u>portion</u>	<del>3,444</del>	<del>3,651</del>	<del>3,906</del> <u>4,746</u>	<u>4,746</u>
<b>Trauma Care</b>					
Trauma Activation - 900	Visit	<del>28,230</del>	<del>29,924</del>	<del>32,018</del> <u>29,924</u>	<u>29,924</u>
Trauma Activation - 911	Visit	<del>16,606</del>	<del>17,602</del>	<del>18,834</del> <u>17,602</u>	<u>17,602</u>
Trauma Critical Care	1st 1-74 minutes	8,841	9,371	<del>10,027</del> <u>9,371</u>	<u>9,371</u>
Trauma Critical Care	Each add'l 30 min <u>or</u> <u>portion</u>	2,210	2,342	<del>2,506</del> <u>2,342</u>	<u>2,342</u>
ED Level 5 Team Trauma	Visit	<del>16,606</del>	<del>17,602</del>	<del>18,834</del> <u>17,602</u>	<u>17,602</u>
<b>Emergency Clinic</b>					
Level I	Room	<del>525</del>	<del>556</del>	<del>595</del> <u>556</u>	<u>556</u>
Level II	Room	<del>1,571</del>	<del>1,665</del>	<del>1,782</del> <u>1,665</u>	<u>1,665</u>
Level III	Room	<del>3,361</del>	<del>3,563</del>	<del>3,812</del> <u>3,563</u>	<u>3,563</u>
Level IV	Room	<del>5,536</del>	<del>5,869</del>	<del>6,279</del> <u>5,869</u>	<u>5,869</u>
Level V	Room	<del>11,176</del>	<del>11,846</del>	<del>12,675</del> <u>11,846</u>	<u>11,846</u>
Resuscitation		<del>7,743</del>	<del>8,208</del>	<del>8,782</del> <u>8,208</u>	<u>8,208</u>
<b>Psychiatric Emergency Services</b>					
Psych Crisis – Level 1 ER Room	Room	<del>1,071</del>	<del>1,135</del>	<del>1,214</del> <u>1,135</u>	<u>1,135</u>
Psych Crisis – Level 2 ER Room	Room	<del>2,488</del>	<del>2,637</del>	<del>2,822</del> <u>2,637</u>	<u>2,637</u>

TYPE OF SERVICE	UNIT	AMOUNT			
		<u>2017-18</u>	<u>2018-19</u>	<u>2019-20</u>	<u>2020-21</u>
Psych Crisis – Level 3 ER Room	Room	<u>3,908</u>	<u>4,143</u>	<u>4,433</u>	<u>4,143</u>
Psych Crisis – Level 4 ER Room	Room	<u>5,328</u>	<u>5,648</u>	<u>6,043</u>	<u>5,648</u>
Psych Crisis – Level 5 ER Room	Room	<u>6,751</u>	<u>7,156</u>	<u>7,657</u>	<u>7,156</u>
Psych Crisis – Level 6 ER Room	Room	<u>8,172</u>	<u>8,662</u>	<u>9,268</u>	<u>8,662</u>
Medication Svs/Min.	per minute	<u>26</u>	<u>27</u>	<u>29</u>	<u>27</u>
<b>General Clinic</b>					
Initial					
<u>Evaluation &amp; Management (E/M)</u> Focused Exam	Visit	<u>352</u>	<u>373</u>	<u>399</u>	<u>373</u>
E/M Expanded Exam	Visit	<u>586</u>	<u>621</u>	<u>665</u>	<u>621</u>
E/M Detailed Exam	Visit	<u>669</u>	<u>709</u>	<u>759</u>	<u>709</u>
E/M Comprehensive Exam	Visit	<u>895</u>	<u>949</u>	<u>1,015</u>	<u>949</u>
E/M Complex Exam	Visit	<u>1,118</u>	<u>1,185</u>	<u>1,268</u>	<u>1,185</u>
Established Patient					
E/M Brief Exam	Visit	<u>272</u>	<u>289</u>	<u>309</u>	<u>289</u>
E/M Focused Exam	Visit	<u>324</u>	<u>343</u>	<u>367</u>	<u>343</u>
E/M Expanded Exam	Visit	<u>427</u>	<u>452</u>	<u>484</u>	<u>452</u>
E/M Detailed Exam	Visit	<u>604</u>	<u>641</u>	<u>686</u>	<u>641</u>

TYPE OF SERVICE	UNIT	AMOUNT			
		<i>2017-18</i>	<i>2018-19</i>	<i>2019-20</i> <i>20-21</i>	<i>2021-22</i>
E/M Comprehensive Exam	Visit	<i>943</i>	<i>1,000</i>	<i>1,070</i> <i>1,000</i>	<i>1,000</i>
Consultation					
E/M Focused Consult	Visit	<i>309</i>	<i>327</i>	<i>350</i> <i>327</i>	<i>327</i>
<i>E/M Expanded Consult</i>	<i>Visit</i>				<i>602</i>
E/M Detailed Consult	Visit	<i>637</i>	<i>675</i>	<i>723</i> <i>675</i>	<i>675</i>
<i>E/M Expanded Consult</i>	<i>Visit</i>				<i>891</i>
<i>E/M Complex Consult</i>	<i>Visit</i>				<i>1,057</i>
<b>Primary Care</b>					
Initial					
E/M Focused Exam	Visit	<i>385</i>	<i>408</i>	<i>437</i>	<i>437</i>
E/M Expanded Exam	Visit	<i>478</i>	<i>507</i>	<i>542</i>	<i>542</i>
E/M Detailed Exam	Visit	<i>694</i>	<i>736</i>	<i>788</i>	<i>788</i>
E/M Comprehensive Exam	Visit	<i>860</i>	<i>912</i>	<i>976</i>	<i>976</i>
E/M Complex Exam	Visit	<i>1,352</i>	<i>1,433</i>	<i>1,533</i>	<i>1,533</i>
Established Patient					
E/M Brief Exam	Visit	<i>196</i>	<i>208</i>	<i>223</i>	<i>223</i>
E/M Focused Exam	Visit	<i>292</i>	<i>310</i>	<i>332</i>	<i>332</i>
E/M Expanded Exam	Visit	<i>511</i>	<i>541</i>	<i>579</i>	<i>579</i>

TYPE OF SERVICE	UNIT	AMOUNT			
		<i>2017-18</i>	<i>2018-19</i>	<i>2019-20</i>	<i>2020-21</i>
E/M Detailed Exam	Visit	<i>664</i>	<i>704</i>	753	<u>753</u>
E/M Comprehensive Exam	Visit	<i>1,038</i>	<i>1,100</i>	1,177	<u>1,177</u>
<b>Dental Services</b>					
Initial Complete Exam	Visit	<i>163</i>	<i>173</i>	185	<u>185</u>
Periodic Exam	Visit	<i>163</i>	<i>173</i>	185	<u>185</u>
Prophylaxis - Adult	Visit	<i>226</i>	<i>239</i>	256	<u>256</u>
Prophylaxis - Child	Visit	<i>214</i>	<i>227</i>	243	<u>243</u>
Extract Single Tooth	Visit	<i>325</i>	<i>344</i>	368	<u>368</u>
One Surface, Permanent Tooth	Visit	<i>261</i>	<i>277</i>	296	<u>296</u>
<b>Home Health Services</b>					
Skilled Nursing	Visit	<i>568</i>	<i>602</i>	644	<u>644</u>
Home Health Aide Services	Visit	<i>301</i>	<i>319</i>	341	<u>341</u>
Medical Social Services	Visit	<i>783</i>	<i>830</i>	888	<u>888</u>
Physical Therapy	Visit	<i>622</i>	<i>660</i>	706	<u>706</u>
Occupational Therapy	Visit	<i>622</i>	<i>660</i>	706	<u>706</u>
Speech Therapy	Visit	<i>622</i>	<i>660</i>	706	<u>706</u>



TYPE OF SERVICE	UNIT	AMOUNT			
		<i>2017-18</i>	<i>2018-19</i>	<i>2019-20</i>	<i>2020-21</i>
<b>Laguna Honda Hospital</b>					
<b>In-Patient Care</b>					
Regular Hospital Rates					
Acute	Day	<i>6,213</i>	<i>6,586</i>	<i>7,047</i>	<u>7,047</u>
Rehabilitation	Day	<i>6,213</i>	<i>6,586</i>	<i>7,047</i>	<u>7,047</u>
Skilled Nursing Facility	Day	<i>1,329</i>	<i>1,409</i>	<i>1,508</i>	<u>1,508</u>
All-Inclusive Rates					
Acute	<i>Day Per Diem Per Diem</i>	<i>8,154</i>	<i>8,643</i>	<i>9,248</i>	<u>9,248</u>
Rehabilitation	<i>Day Per Diem</i>	<i>7,103</i>	<i>7,530</i>	<i>8,057</i>	<u>8,057</u>
Skilled Nursing Facility	Day	<i>1,549</i>	<i>1,642</i>	<i>1,757</i>	<u>1,756</u>
<b>POPULATION HEALTH &amp; PREVENTION</b>					
<b>Community Mental Health Services</b>					
24-Hour Service					
Hospital Inpatient	Day	<i>7,212</i>	<i>7,645</i>	<i>8,180</i>	<u>7,645</u>
Skilled Nursing	Day	<i>2,385</i>	<i>2,528</i>	<i>2,705</i>	<u>235.10</u>
Adult Crisis Residential	Day	<i>518</i>	<i>555</i>	<i>593</i>	<u>480.94</u>
Adult Residential	Day	<i>283</i>	<i>325</i>	<i>374</i>	<u>234.59</u>
Therapeutic Foster Care (TFC) Service Model	Day		<i>175</i>	<i>201</i>	<u>232.93</u>
Day Services					
Day Rehabilitation	<i>Full Day</i>	<i>273</i>	<i>342</i>	<i>427</i>	<u>207.24</u>
Day Rehabilitation	<i>Half Day</i>	<i>175</i>	<i>219</i>	<i>273</i>	<u>132.77</u>
Day Treatment Intensive	<i>Full Day</i>	<i>453</i>	<i>566</i>	<i>708</i>	<u>319.67</u>

	TYPE OF SERVICE	UNIT	AMOUNT			
			<u>2017-18</u>	<u>2018-19</u>	<u>2019-20</u>	<u>2020-21</u>
1						
2	Day Treatment Intensive	Half Day	<u>300</u>	<u>375</u>	<u>469</u>	<u>227.59</u>
3						<u>238.97</u>
4	Day Treatment Intensive (Children)	<del>Full</del> Day	<u>609</u>	<u>762</u>	<u>952</u>	<u>431.55</u>
5						<u>453.13</u>
6	Day Treatment Intensive (Children)	Half Day	<u>438</u>	<u>547</u>	<u>684</u>	<u>307.25</u>
7						<u>322.61</u>
8	Crisis Stabilization	Hour	<u>434</u>	<u>543</u>	<u>679</u>	<u>192.89</u>
9						<u>202.53</u>
10	Socialization	Hour	<u>103</u>	<u>129</u>	<u>161</u>	<u>118.07</u>
11						<u>123.98</u>
12	Outpatient Services					
13	Case Management Brokerage	Minute	<u>10.09</u>	<u>14.63</u>	<u>18.2</u>	<u>96.29</u>
14						<u>6.61</u>
15	Mental Health Services	Minute	<u>13.35</u>	<u>19.36</u>	<u>24.2</u>	<u>208.06</u>
16						<u>8.47</u>
17	Therapeutic Behavioral Services	Minute	<u>13.35</u>	<u>19.36</u>	<u>24.2</u>	<u>208.06</u>
18						<u>8.47</u>
19	Medication Support	Minute	<u>26.49</u>	<u>38.41</u>	<u>48.0</u>	<u>215.15</u>
20						<u>15.90</u>
21	Crisis Intervention	Minute	<u>19.13</u>	<u>27.74</u>	<u>34.6</u>	<u>714.45</u>
22						<u>15.18</u>
23	<b>Community Substance Abuse</b>					
24	Organized Delivery System (ODS) Services					
25	Case Management	Per 15 minutes	<u>49.14</u>	<u>61.42</u>	<u>64.4</u>	<u>967.72</u>
26						<u>71.11</u>
27	Physician Consultation	Per 15 minutes	<u>42.89</u>	<u>53.61</u>	<u>56.2</u>	<u>959.10</u>
28						<u>62.06</u>
29	Recovery Services	Per 15 minutes	<u>49.14</u>	<u>61.42</u>	<u>64.4</u>	<u>967.72</u>
30						<u>71.11</u>
31	Medication Assisted Treatment / Medication Support	Per 15 minutes	<u>172.50</u>	<u>215.65</u>	<u>226.43</u>	<u>237.75</u>
32						<u>249.64</u>

TYPE OF SERVICE	UNIT	AMOUNT			
		<u>2017-18</u>	<u>2018-19</u>	<u>2019-20</u> <u>2020-21</u>	<u>2021-22</u>
Outpatient SUD Services					
MAT - Buprenorphine	Day	<del>104</del>	<del>120</del>	<del>126</del> <u>132.30</u>	<u>138.92</u>
MAT - Disulfiram	Day		<del>67.50</del>	<del>70.88</del> <u>74.42</u>	<u>78.15</u>
MAT - Naloxone	Kit		<del>281.25</del>	<del>295.31</del> <u>310.08</u>	<u>325.58</u>
Ambulatory Level 1 Withdrawal Management	Day	<del>206.25</del>	<del>257.81</del>	<del>270.70</del> <u>284.24</u>	<u>298.45</u>
Individual Counseling - Outpatient	Per 15 minutes	<del>40.20</del>	<del>50.25</del>	<del>52.76</del> <u>55.40</u>	<u>58.17</u>
Group Counseling - Outpatient	Per 15 minutes	<del>35</del>	<del>43.75</del>	<del>45.94</del> <u>48.24</u>	<u>50.65</u>
Opioid Replacement Therapy (OTP)					
Methadone Dosing	Day	<del>58</del>	<del>67</del>	<del>70.35</del> <u>73.87</u>	<u>77.56</u>
Individual Counseling - ORT	Per 10 minutes	<del>58</del>	<del>67</del>	<del>70.35</del> <u>73.87</u>	<u>77.56</u>
Group Counseling - ORT	Per 10 minutes	<del>33</del>	<del>38</del>	<del>39.90</del> <u>41.90</u>	<u>43.99</u>
SUD Intensive Outpatient Treatment					
Intensive Outpatient Treatment	Per 15 minutes	<del>40.20</del>	<del>50.25</del>	<del>52.76</del> <u>55.40</u>	<u>58.17</u>
SUD Residential Treatment					
Level 3.2 Residential	Day	<del>553.60</del>	<del>692.00</del>	<del>726.60</del> <u>762.93</u>	<u>801.08</u>

TYPE OF SERVICE	UNIT	AMOUNT				
		<i>2017-18</i>	<i>2018-19</i>	<i>2019-20</i>	<i>2020-21</i>	<i>2021-22</i>
Withdrawal Management						
Level 3.1 Residential	Day	<i>154.35</i>	<i>192.94</i>	<i>202.59</i>	<i>212.72</i>	<i>223.36</i>
Level 3.3 Residential	Day	<i>192.94</i>	<i>241.17</i>	<i>253.23</i>	<i>265.89</i>	<i>279.19</i>
Level 3.5 Residential	Day	<i>253.13</i>	<i>316.41</i>	<i>332.23</i>	<i>348.84</i>	<i>366.28</i>
<b>POPULATION HEALTH &amp; PREVENTION</b>						
<b>Vital Records</b>						
Birth Certificate	Per Certificate	Rates Per California Health and Safety Code Section 103650				
Death Certificate	Per Certificate	Rates Per California Health and Safety Code Section 103650				
Permit-Disposition of Human Remains	Per Permit	Rates Per California Health and Safety Code Section 103650				
Out-of-County Cross File Fee	Per Certificate	Rates Per California Health and Safety Code Section 103650				
Letter of Non-Contagious Disease	Per Letter	<i>15</i>	<i>15</i>	15	<i>15</i>	
Expedited Registration of Vital Event	Per Event	Rates Per California Health and Safety Code Section 103650				
Expedited Documents	Per Delivery	<i>30</i>	<i>30</i>	30	<i>30</i>	
After Hours Registration of Vital Event	Per Event	<i>42</i>	<i>42</i>	42	<i>42</i>	
Reproduction of Documents	Per Page	<i>2</i>	<i>2</i>	2	<i>2</i>	
Medical Marijuana						
Medical Marijuana ID	Card	<i>100</i>	<i>100</i>	100	<i>100</i>	

TYPE OF SERVICE	UNIT	AMOUNT			
		<i>2017-18</i>	<i>2018-19</i>	<i>2019-20</i>	<i>2020-21</i>
<i>—Medical Marijuana ID (Medi-Cal Beneficiaries)</i>	<i>Card</i>	<i>50</i>	<i>50</i>	<i>50</i>	
<b>ADULT IMMUNIZATION CLINIC</b>					
Vaccines					
Clinic Visits					
Travel Health Visit (THV1)	Per Visit	<i>55</i>	<i>55</i>	<i>55</i>	<u>55</u>
Travel Health Visit (THV2) – Under Age 18 with Parent THV1	Per Visit	<i>55</i>	<i>55</i>	<i>55</i>	<u>55</u>
Registered Nurse Visit – Off-Site Location	Per Visit	<i>200</i>	<i>200</i>	<i>200</i>	<u>200</u>
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 not subject to change except by amendment to this provision. This Special Price List is posted on the San Francisco Department of Public Health Communicable Disease and Control Prevention website ( <a href="http://www.sfdcp.org/aitcprices.html">www.sfdcp.org/aitcprices.html</a> ).			
<b>PUBLIC HEALTH LABORATORY</b>					
Lab Testing	Per Specimen	Rates Per the Medicare Outpatient Fee-For-Service Reimbursement Rate			
<b>SAN FRANCISCO CITY CLINIC</b>					
Clinic Visit	Per Visit	<i>25</i>	<i>25</i>	<i>25</i>	<u>25</u>

1 Section 2. Special price lists referenced in Section 128 of the Health Code are  
2 available on request at the Office of the Clerk of the Board of Supervisors in Board File No.  
3 200844, ~~or~~ and at 101 Grove Street, Room 308.  
4

5 Section 3. Effective Date. This ordinance shall become effective 30 days after  
6 enactment. Enactment occurs when the Mayor signs the ordinance, the Mayor returns the  
7 ordinance unsigned or does not sign the ordinance within ten days of receiving it, or the Board  
8 of Supervisors overrides the Mayor's veto of the ordinance.  
9

10 Section 4. Scope of Ordinance. In enacting this ordinance, the Board of Supervisors  
11 intends to amend only those words, phrases, paragraphs, subsections, sections, articles,  
12 numbers, punctuation marks, charts, diagrams, or any other constituent parts of the Municipal  
13 Code that are explicitly shown in this ordinance as additions, deletions, Board amendment  
14 additions, and Board amendment deletions in accordance with the "Note" that appears under  
15 the official title of the ordinance.  
16

17 APPROVED AS TO FORM:  
18 DENNIS J. HERRERA, City Attorney

19 By: /s/ Virginia Dario Elizondo  
20 VIRGINIA DARIO ELIZONDO  
21 Deputy City Attorney

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