

1 [Health Code - Patient Rates for FYs 2020-2021, 2021-2022, and 2022-2023]

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3 **Ordinance amending the Health Code to set patient rates and rates for other services**
 4 **provided by the Department of Public Health, for Fiscal Years (FYs) 2020-2021, 2021-**
 5 **2022, and 2022-2023.**

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

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

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

15 **SEC. 128. PATIENT RATES.**

16 The Board of Supervisors of the City and County of San Francisco does hereby
 17 determine and fix the proper reasonable amounts to be charged to persons for services
 18 furnished by the Department of Public Health as follows, which rates shall be effective for
 19 services delivered as of July 1, 2020, through June 30, ~~2022~~2023.

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TYPE OF SERVICE	UNIT	AMOUNT		
		2020-21	2021-22	2022-23
SAN FRANCISCO HEALTH NETWORK				

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TYPE OF SERVICE	UNIT	AMOUNT		
		2020-21	2021-22	2022-23
Supplies & Drugs	Special Price Lists located at 1001 Potrero Avenue, ZSFG, incorporated into this provision by reference as if specifically set forth herein. Such rates subject to change by the Director of Health based on increases or decreases to procurement cost of the individual supplies and medications. These Special Price Lists are posted on the Office of Statewide Health Planning and Development website (www.oshpd.ca.gov).			
Zuckerberg San Francisco General Hospital and Trauma Center (ZSFG)				
Diagnostic Radiology Clinical Lab Anatomic Pathology All Other Special Services	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 <i>These</i> Special Price Lists are posted on the Office of Statewide Health Planning and Development website (www.oshpd.ca.gov).			
In-Patient Care				
Medical Surgical	Day	9,769	9,769	<u>9,769</u>
Intensive Care	Day	22,460	22,460	<u>22,460</u>
Intensive Care - Trauma	Day	22,460	22,460	<u>22,460</u>
Coronary Care	Day	22,460	22,460	<u>22,460</u>
Stepdown Units	Day	14,103	14,103	<u>14,103</u>
Pediatrics	Day	9,343	9,343	<u>9,343</u>
Obstetrics	Day	7,645	7,645	<u>7,645</u>
Nursery				
New Born	Day	4,177	4,177	<u>4,177</u>
Semi-Intensive Care	Day	14,901	14,901	<u>14,901</u>

TYPE OF SERVICE	UNIT	AMOUNT		
		2020-21	2021-22	2022-23
Intensive Care	Day	22,459	22,459	<u>22,459</u>
Labor/Delivery Hours of Stay	Hour	363	363	<u>363</u>
Psychiatric Inpatient	Day	7,645	7,645	<u>7,645</u>
Psychiatric Forensic Inpatient - 7L	Day	7,645	7,645	<u>7,645</u>
Security Unit - 7D	Day	7,645	7,645	<u>7,645</u>
Skilled Nursing Facility	Day	3,059	3,059	<u>3,059</u>
Mental Rehab Unit	Day	2,528	2,528	<u>2,528</u>
Adult Residential Facility	Day	510	510	<u>510</u>
Respiratory Therapy				
O2 Therapy	per 24 hours	360	360	<u>360</u>
Surgical Services				
Minor Surgery I (Come & Go)	1st Hour	6,647	6,647	<u>6,647</u>
Minor Surgery I (Come & Go)	Add'l ½ Hour or portion	3,323	3,323	<u>3,323</u>
Minor Surgery II	1st Hour	7,256	7,256	<u>7,256</u>
Minor Surgery II	Add'l ½ Hour or portion	3,628	3,628	<u>3,628</u>
Major Surgery I	1st Hour	10,927	10,927	<u>10,927</u>
Major Surgery I	Add'l ½ Hour or portion	4,368	4,368	<u>4,368</u>
Major Surgery II	1st Hour	12,304	12,304	<u>12,304</u>
Major Surgery II	Add'l ½ Hour or portion	4,927	4,927	<u>4,927</u>
Major Surgery III	1st Hour	13,693	13,693	<u>13,693</u>
Major Surgery III	Add'l ½ Hour or portion	5,478	5,478	<u>5,478</u>

TYPE OF SERVICE	UNIT	AMOUNT		
		2020-21	2021-22	2022-23
Surgery (3 Teams)	1st Hour	22,576	22,576	<u>22,576</u>
Surgery (3 Teams)	Add'l ½ Hour or portion	9,032	9,032	<u>9,032</u>
Major Trauma I	1st Hour	12,871	12,871	<u>12,871</u>
Major Trauma I	Add'l ½ Hour or portion	5,151	5,151	<u>5,151</u>
Recovery Room	1st Hour	4,232	4,232	<u>4,232</u>
Recovery Room	Each Add'l Hour or portion	2,116	2,116	<u>2,116</u>
Anesthesia	1st Hour	9,508	9,508	<u>9,508</u>
Anesthesia	Add'l ½ Hour or portion	4,746	4,746	<u>4,746</u>
Trauma Care				
Trauma Activation - 900	Visit	29,924	29,924	<u>29,924</u>
Trauma Activation - 911	Visit	17,602	17,602	<u>17,602</u>
Trauma Critical Care	1st 1-74 minutes	9,371	9,371	<u>9,371</u>
Trauma Critical Care	Each add'l 30 min. or portion	2,342	2,342	<u>2,342</u>
ED Level 5 Team Trauma	Visit	17,602	17,602	<u>17,602</u>
Emergency Clinic				
Level I	Room	556	556	<u>556</u>
Level II	Room	1,665	1,665	<u>1,665</u>
Level III	Room	3,563	3,563	<u>3,563</u>
Level IV	Room	5,869	5,869	<u>5,869</u>
Level V	Room	11,846	11,846	<u>11,846</u>

TYPE OF SERVICE	UNIT	AMOUNT		
		2020-21	2021-22	2022-23
Resuscitation		8,208	8,208	<u>8,208</u>
Psychiatric Emergency Services				
Psych Crisis – Level 1 ER Room	Room	1,135	1,135	<u>1,135</u>
Psych Crisis – Level 2 ER Room	Room	2,637	2,637	<u>2,637</u>
Psych Crisis – Level 3 ER Room	Room	4,143	4,143	<u>4,143</u>
Psych Crisis – Level 4 ER Room	Room	5,648	5,648	<u>5,648</u>
Psych Crisis – Level 5 ER Room	Room	7,156	7,156	<u>7,156</u>
Psych Crisis – Level 6 ER Room	Room	8,662	8,662	<u>8,662</u>
Medication Svs/Min.	per minute	27	27	<u>27</u>
General Clinic				
Initial <u>Patient</u>				
–Evaluation & Management (E/M) Focused Exam	Visit	373	373	
<u>Evaluation & Management (E/M) Expanded Exam</u>	Visit	621	621	<u>621</u>
E/M Detailed Exam	Visit	709	709	<u>709</u>
E/M Comprehensive Exam	Visit	949	949	<u>949</u>
E/M Complex Exam	Visit	1,185	1,185	<u>1,185</u>
Established Patient				
E/M Brief Exam	Visit	289	289	<u>289</u>
E/M Focused Exam	Visit	343	343	<u>343</u>
E/M Expanded Exam	Visit	452	452	<u>452</u>
E/M Detailed Exam	Visit	641	641	<u>641</u>
E/M Comprehensive Exam	Visit	1,000	1,000	<u>1,000</u>
Consultation				
E/M Focused Consult	Visit	327	327	<u>327</u>

TYPE OF SERVICE	UNIT	AMOUNT		
		2020-21	2021-22	2022-23
E/M Expanded Consult	Visit	602	602	<u>602</u>
E/M Detailed Consult	Visit	675	675	<u>675</u>
E/M Comprehensive Consult	Visit	891	891	<u>891</u>
E/M Complex Consult	Visit	1,057	1,057	<u>1,057</u>
<u>Community Primary Care</u>				
<u>Initial Patient</u>				
<i>E/M Focused Exam</i>	<i>Visit</i>	<i>437</i>	<i>437</i>	
E/M Expanded Exam	Visit	542	542 <u>621</u>	<u>621</u>
E/M Detailed Exam	Visit	788	788 <u>709</u>	<u>709</u>
E/M Comprehensive Exam	Visit	976	976 <u>949</u>	<u>949</u>
E/M Complex Exam	Visit	1,533	1,533 <u>1,185</u>	<u>1,185</u>
<u>Established Patient</u>				
E/M Brief Exam	Visit	223	223 <u>289</u>	<u>289</u>
E/M Focused Exam	Visit	332	332 <u>343</u>	<u>343</u>
E/M Expanded Exam	Visit	579	579 <u>452</u>	<u>452</u>
E/M Detailed Exam	Visit	753	753 <u>641</u>	<u>641</u>
E/M Comprehensive Exam	Visit	1,177	1,177 <u>1,000</u>	<u>1,000</u>
<u>Consultation</u>				
<i>E/M Focused Consult</i>	<i>Visit</i>	<i>327</i>	<i>327</i>	<u>327</u>
<i>E/M Expanded Consult</i>	<i>Visit</i>	<i>602</i>	<i>602</i>	<u>602</u>
<i>E/M Detailed Consult</i>	<i>Visit</i>	<i>675</i>	<i>675</i>	<u>675</u>
<i>E/M Comprehensive Consult</i>	<i>Visit</i>	<i>891</i>	<i>891</i>	<u>891</u>
<i>E/M Complex Consult</i>	<i>Visit</i>	<i>1,057</i>	<i>1,057</i>	<u>1,057</u>
Dental Services				

1	2	3	4	5	6	7	AMOUNT		
							2020-21	2021-22	2022-23
8	9	10	11	12	13	14	15	16	17
18	19	20	21	22	23	24	25		
Initial Complete Exam	Visit	185	185	<u>185</u>					
Periodic Exam	Visit	185	185	<u>185</u>					
Prophylaxis - Adult	Visit	256	256	<u>256</u>					
Prophylaxis - Child	Visit	243	243	<u>243</u>					
Extract Single Tooth	Visit	368	368	<u>368</u>					
One Surface, Permanent Tooth	Visit	296	296	<u>296</u>					
Home Health Services									
Skilled Nursing	Visit	644	644	<u>644</u>					
Home Health Aide Services	Visit	341	341	<u>341</u>					
Medical Social Services	Visit	888	888	<u>888</u>					
Physical Therapy	Visit	706	706	<u>706</u>					
Occupational Therapy	Visit	706	706	<u>706</u>					
Speech Therapy	Visit	706	706	<u>706</u>					
Laguna Honda Hospital									
In-Patient Care									
Regular Hospital Rates									
Acute	Day	7,047	7,047	<u>7,047</u>					
Rehabilitation	Day	7,047	7,047	<u>7,047</u>					
Skilled Nursing Facility	Day	1,508	1,508	<u>1,508</u>					
All-Inclusive Rates									
Acute	Day	9,248	9,248	<u>9,248</u>					
Rehabilitation	Day	8,057	8,057	<u>8,057</u>					
Skilled Nursing Facility	Day	1,756	1,756	<u>1,756</u>					

TYPE OF SERVICE	UNIT	AMOUNT		
		2020-21	2021-22	2022-23
<u>Initial Patient</u>				
<u>E/M Expanded Exam</u>	<u>Visit</u>	<u>477</u>	<u>621</u>	<u>621</u>
<u>E/M Detailed Exam</u>	<u>Visit</u>	<u>592</u>	<u>709</u>	<u>709</u>
<u>E/M Comprehensive Exam</u>	<u>Visit</u>	<u>0</u>	<u>949</u>	<u>949</u>
<u>E/M Complex Exam</u>	<u>Visit</u>	<u>897</u>	<u>1,185</u>	<u>1,185</u>
<u>Established Patient</u>				
<u>E/M Brief Exam</u>	<u>Visit</u>	<u>308</u>	<u>289</u>	<u>289</u>
<u>E/M Focused Exam</u>	<u>Visit</u>	<u>372</u>	<u>343</u>	<u>343</u>
<u>E/M Expanded Exam</u>	<u>Visit</u>	<u>422</u>	<u>452</u>	<u>452</u>
<u>E/M Detailed Exam</u>	<u>Visit</u>	<u>526</u>	<u>641</u>	<u>641</u>
<u>E/M Comprehensive Exam</u>	<u>Visit</u>	<u>692</u>	<u>1,000</u>	<u>1,000</u>
<u>Consultation</u>				
<u>E/M Focused Consult</u>	<u>Visit</u>	<u>353</u>	<u>327</u>	<u>327</u>
<u>E/M Expanded Consult</u>	<u>Visit</u>	<u>602</u>	<u>602</u>	<u>602</u>
<u>E/M Detailed Consult</u>	<u>Visit</u>	<u>626</u>	<u>675</u>	<u>675</u>
<u>E/M Comprehensive Consult</u>	<u>Visit</u>	<u>719</u>	<u>891</u>	<u>891</u>
<u>E/M Complex Consult</u>	<u>Visit</u>	<u>897</u>	<u>1,057</u>	<u>1,057</u>
POPULATION HEALTH & PREVENTION				
Community <i>Mental</i> Behavioral Health Services				
<u>Mental Health</u>				
24-Hour Service				
Hospital Inpatient	Day	7,645	7,645	<u>7,645</u>
Skilled Nursing	Day	235.10	246.86	<u>259.20</u>

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TYPE OF SERVICE	UNIT	AMOUNT		
		2020-21	2021-22	2022-23
Adult Crisis Residential	Day	480.94	504.99	<u>530.24</u>
Adult Residential	Day	234.59	246.32	<u>258.64</u>
Therapeutic Foster Care (TFC)	Day	232.93	244.57	<u>256.80</u>
Service Model				
Day Services				
Day Rehabilitation	Day	207.24	217.60	<u>228.48</u>
Day Rehabilitation	Half Day	132.77	139.41	<u>146.38</u>
Day Treatment Intensive	Day	319.67	335.65	<u>352.43</u>
Day Treatment Intensive	Half Day	227.59	238.97	<u>250.92</u>
Day Treatment Intensive (Children)	Day	431.55	453.13	<u>475.79</u>
Day Treatment Intensive (Children)	Half Day	307.25	322.61	<u>338.74</u>
Crisis Stabilization	Hour	192.89	202.53	<u>212.66</u>
Socialization	Hour	118.07	123.98	<u>130.18</u>
Outpatient Services				
Case Management Brokerage	Minute	6.29	6.61	<u>6.94</u>
Mental Health Services	Minute	8.06	8.47	<u>8.89</u>
Therapeutic Behavioral Services	Minute	8.06	8.47	<u>8.89</u>
Medication Support	Minute	15.15	15.90	<u>16.70</u>
Crisis Intervention	Minute	14.45	15.18	<u>15.94</u>

TYPE OF SERVICE	UNIT	AMOUNT		
		2020-21	2021-22	2022-23
<u>Community Substance Abuse-Use Disorder (SUD)</u>				
Organized Delivery System (ODS) Services				
Case Management	Per 15 minutes	67.72	71.11	<u>74.67</u>
Physician Consultation	Per 15 minutes	59.10	62.06	<u>65.16</u>
Recovery Services	Per 15 minutes	67.72	71.11	<u>74.67</u>
Medication Assisted Treatment (MAT)/Medication Support	Per 15 minutes	237.75	249.64	<u>262.12</u>
Outpatient SUD Services				
MAT - Buprenorphine	Day	132.30	138.92	<u>145.87</u>
MAT - Disulfiram	Day	74.42	78.15	<u>82.06</u>
MAT - Naloxone	Kit	310.08	325.58	<u>341.86</u>
Ambulatory Level 1 Withdrawal Management	Day	284.24	298.45	<u>313.37</u>
Individual Counseling - Outpatient	Per 15 minutes	55.40	58.17	<u>61.08</u>
Group Counseling - Outpatient	Per 15 minutes	48.24	50.65	<u>53.18</u>
<u>Opioid Replacement Therapy (OTP)/Narcotic Treatment Program (NTP)</u>				
Methadone Dosing	Day	73.87	77.56	<u>81.44</u>
Individual Counseling - ORT NTP	Per 10 minutes	73.87	77.56	<u>81.44</u>
Group Counseling - ORT NTP	Per 10 minutes	41.90	43.99	<u>46.19</u>

TYPE OF SERVICE	UNIT	AMOUNT		
		2020-21	2021-22	2022-23
SUD Intensive Outpatient Treatment				
Intensive Outpatient Treatment	Per 15 minutes	55.40	58.17	<u>61.08</u>
SUD Residential Treatment				
Level 3.2 Residential Withdrawal Management	Day	762.93	801.08	<u>841.13</u>
Level 3.1 Residential	Day	212.72	223.36	<u>234.53</u>
Level 3.3 Residential	Day	265.89	279.19	<u>293.15</u>
Level 3.5 Residential	Day	348.84	366.28	<u>384.59</u>

TYPE OF SERVICE	UNIT	AMOUNT		
		2020-21	2021-22	2022-23
POPULATION HEALTH & PREVENTION				
Vital Records				
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	15	15	<u>15</u>
Expedited Registration of Vital Event	Per Event	Rates Per California Health and Safety Code Section 103650		
Expedited Documents	Per Delivery	30	30	<u>30</u>

TYPE OF SERVICE	UNIT	AMOUNT		
		2020-21	2021-22	2022-23
After Hours Registration of Vital Event	Per Event	42	42	<u>42</u>
Reproduction of Documents	Per Page	2	2	<u>2</u>
Medical Marijuana				
Medical Marijuana ID	Card	100	100	<u>100</u>

TYPE OF SERVICE	UNIT	AMOUNT		
		2020-21	2021-22	2022-23
Adult Immunization Clinic				
Vaccines				
Clinic Visits				
Travel Health Visit (THV1)	Per Visit	55	55	<u>55</u>
Travel Health Visit (THV2) – Under Age 18 with Parent THV1	Per Visit	55	55	<u>55</u>
Registered Nurse Visit – Off-Site Location	Per Visit	200	200	<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		

TYPE OF SERVICE	UNIT	AMOUNT		
		2020-21	2021-22	2022-23
		www.sfcdcp.org/aitcprices.html https://www.sfcdcp.org/aitc/aitc-regular-prices-low-cost-or-free-vaccines/		

TYPE OF SERVICE	UNIT	AMOUNT		
		2020-21	2021-22	2022-23
Public Health Laboratory				
Lab Testing	Per Specimen	Rates Per the Medicare Outpatient Fee-For-Service Reimbursement Rate		

TYPE OF SERVICE	UNIT	AMOUNT		
		2020-21	2021-22	2022-23
San Francisco City Clinic				
Clinic Visit	Per Visit	25	25	<u>25</u>

Section 2. 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 it, or the Board of Supervisors overrides the Mayor's veto of the ordinance.

1 Section 3. Scope of Ordinance. In enacting this ordinance, the Board of Supervisors
2 intends to amend only those words, phrases, paragraphs, subsections, sections, articles,
3 numbers, punctuation marks, charts, diagrams, or any other constituent parts of the Municipal
4 Code that are explicitly shown in this ordinance as additions, deletions, Board amendment
5 additions, and Board amendment deletions in accordance with the "Note" that appears under
6 the official title of the ordinance.

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8
9 APPROVED AS TO FORM:
10 DENNIS J. HERRERA, City Attorney

11 By: /s/ Virginia Dario Elizondo
12 VIRGINIA DARIO ELIZONDO
13 Deputy City Attorney

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