1	[Health Code -	Patient Rates for FYs 2	020-2021, 2021	-2022, and 2	2022-2023]				
2									
3	Ordinance am	ending the Health Coc	le to set patien	t rates and	rates for ot	her services			
4	provided by th	e Department of Publ	ic Health, for F	iscal Years	(FYs) 2020-	-2021, 2021-			
5	2022, and 2022	2-2023.							
6 7	NOTE:	Unchanged Code tex Additions to Codes Deletions to Codes a	are in <u>single-und</u>	lerline italics	<u>Times New R</u>	<u>oman font</u> .			
8		Board amendment a	dditions are in	double-unde	erlined Arial				
9		Asterisks (* * * *)	Board amendment deletions are in strikethrough Arial font. Asterisks (* * * *) indicate the omission of unchanged Code subsections or parts of tables.						
10									
11	Be it ord	Be it ordained by the People of the City and County of San Francisco:							
12									
13	Section	1. The Health Code is I	nereby amende	d by revising	Section 12	8, to read as			
14	follows:								
15	SEC. 12	8. PATIENT RATES.							
16	The Boa	rd of Supervisors of the	City and Count	ty of San Fra	incisco does	s hereby			
17	determine and	fix the proper reasonab	le amounts to b	e charged to	persons for	[.] services			
18	furnished by the	e Department of Public	Health as follow	s, which rate	es shall be e	effective for			
19	services deliver	ed as of July 1, 2020, t	hrough June 30	, 2022 2023.					
20				-					
21					AMOUNT				
22	TYPE	OF SERVICE	UNIT	2020-21	2021-22	2022-23			
23		SAN FRANCI	SCO HEALTH	NETWORK					
24									
25									

1				AMOUNT			
2	TYPE OF SERVICE	UNIT	2020-21	2021-22	2022-23		
3		Special Price L					
4		Avenue, ZSFG	•				
5		by reference as if specifically set forth herein. Such rates subject to change by the Director of					
6	Supplies & Drugs	Health based of procurement c					
7		medications. T	hese Specia	I Price Lists	are		
8		posted on the Planning and I			th		
9		(www.oshpd.ca	•				
10	Zuckerberg San Francisco General	Hospital and T	rauma Cent	er (ZSFG)			
-		Special Price L Avenue, ZSFG					
11	Diagnostic Radiology	by reference a	s if specifica	lly set forth	herein.		
12	Clinical Lab	Such rates are subject to change by the Director of Health. <i>This <u>These</u></i> Special Price Lists are posted on the Office of Statewide Health					
13	Anatomic Pathology All Other Special Services						
14		Planning and [(www.oshpd.ca	•	website			
15	In-Patient Care						
16	Medical Surgical	Day	9,769	9,769	<u>9,769</u>		
17	Intensive Care	Day	22,460	22,460	<u>22,460</u>		
18	Intensive Care - Trauma	Day	22,460	22,460	<u>22,460</u>		
19	Coronary Care	Day	22,460	22,460	<u>22,460</u>		
20	Stepdown Units	Day	14,103	14,103	<u>14,103</u>		
21	Pediatrics	Day	9,343	9,343	<u>9,343</u>		
22	Obstetrics	Day	7,645	7,645	<u>7,645</u>		
23	Nursery						
24	New Born	Day	4,177	4,177	<u>4,177</u>		
25	Semi-Intensive Care	Day	14,901	14,901	<u>14,901</u>		

1			AMOUNT		
2	TYPE OF SERVICE	UNIT	2020-21	2021-22	2022-23
3	Intensive Care	Day	22,459	22,459	<u>22,459</u>
4	Labor/Delivery Hours of Stay	Hour	363	363	<u>363</u>
5	Psychiatric Inpatient	Day	7,645	7,645	<u>7,645</u>
6	Psychiatric Forensic Inpatient - 7L	Day	7,645	7,645	<u>7,645</u>
7	Security Unit - 7D	Day	7,645	7,645	<u>7,645</u>
	Skilled Nursing Facility	Day	3,059	3,059	<u>3,059</u>
8	Mental Rehab Unit	Day	2,528	2,528	<u>2,528</u>
9	Adult Residential Facility	Day	510	510	<u>510</u>
10	Respiratory Therapy				
11	O2 Therapy	per 24 hours	360	360	<u>360</u>
12	Surgical Services				
13	Minor Surgery I (Come & Go)	1st Hour	6,647	6,647	<u>6,647</u>
14 15	Minor Surgery I (Come & Go)	Add'l ½ Hour or portion	3,323	3,323	<u>3,323</u>
16	Minor Surgery II	1st Hour	7,256	7,256	<u>7,256</u>
17	Minor Surgery II	Add'l ½ Hour or portion	3,628	3,628	<u>3,628</u>
18	Major Surgery I	1st Hour	10,927	10,927	<u>10,927</u>
19 20	Major Surgery I	Add'l ½ Hour or portion	4,368	4,368	<u>4,368</u>
21	Major Surgery II	1st Hour	12,304	12,304	<u>12,304</u>
22	Major Surgery II	Add'l ½ Hour or portion	4,927	4,927	<u>4,927</u>
23	Major Surgery III	1st Hour	13,693	13,693	<u>13,693</u>
24 25	Major Surgery III	Add'l ½ Hour or portion	5,478	5,478	<u>5,478</u>

1			AMOUNT		
2	TYPE OF SERVICE	UNIT	2020-21	2021-22	2022-23
3	Surgery (3 Teams)	1st Hour	22,576	22,576	<u>22,576</u>
4	Surgery (3 Teams)	Add'l ½ Hour or portion	9,032	9,032	<u>9,032</u>
5	Major Trauma I	1st Hour	12,871	12,871	<u>12,871</u>
6 7	Major Trauma I	Add'l ½ Hour or portion	5,151	5,151	<u>5,151</u>
8	Recovery Room	1st Hour	4,232	4,232	<u>4,232</u>
9 10	Recovery Room	Each Add'l Hour or portion	2,116	2,116	<u>2,116</u>
11	Anesthesia	1st Hour	9,508	9,508	<u>9,508</u>
12	Anesthesia	Add'l ½ Hour or portion	4,746	4,746	<u>4,746</u>
13	Trauma Care				
14	Trauma Activation - 900	Visit	29,924	29,924	<u>29,924</u>
15	Trauma Activation - 911	Visit	17,602	17,602	<u>17,602</u>
16	Trauma Critical Care	1st 1-74 minutes	9,371	9,371	<u>9,371</u>
17 18	Trauma Critical Care	Each add'l 30 min. or portion	2,342	2,342	<u>2,342</u>
19	ED Level 5 Team Trauma	Visit	17,602	17,602	<u>17,602</u>
20	Emergency Clinic				
21	Level I	Room	556	556	<u>556</u>
22	Level II	Room	1,665	1,665	<u>1,665</u>
23	Level III	Room	3,563	3,563	<u>3,563</u>
24	Level IV	Room	5,869	5,869	<u>5,869</u>
24 25	Level V	Room	11,846	11,846	<u>11,846</u>

		AMOUNT		
TYPE OF SERVICE	UNIT	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)</u> Expanded Exam	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	452
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>

1			AMOUNT		
2	TYPE OF SERVICE	UNIT	2020-21	2021-22	2022-23
3	E/M Expanded Consult	Visit	602	602	<u>602</u>
4	E/M Detailed Consult	Visit	675	675	<u>675</u>
5	E/M Comprehensive Consult	Visit	891	891	<u>891</u>
	E/M Complex Consult	Visit	1,057	1,057	<u>1,057</u>
6	<u>Community</u> Primary Care				
7	Initial <u>Patient</u>				
8	<i>E/M Focused Exam</i>	Visit	437	437	
9	E/M Expanded Exam	Visit	542	<u>542</u> <u>621</u>	<u>621</u>
10	E/M Detailed Exam	Visit	788	788 <u>709</u>	<u>709</u>
11	E/M Comprehensive Exam	Visit	976	976 <u>949</u>	<u>949</u>
12	E/M Complex Exam	Visit	1,533	1,533 <u>1,185</u>	<u>1,185</u>
13	Established Patient				
14	E/M Brief Exam	Visit	223	223 <u>289</u>	<u>289</u>
15	E/M Focused Exam	Visit	332	332 <u>343</u>	<u>343</u>
16	E/M Expanded Exam	Visit	579	579 <u>452</u>	<u>452</u>
17	E/M Detailed Exam	Visit	753	753 <u>641</u>	<u>641</u>
18	E/M Comprehensive Exam	Visit	1,177	1,177 <u>1,000</u>	<u>1,000</u>
19 20	<u>Consultation</u>				
21	E/M Focused Consult	<u>Visit</u>	<u>327</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>
22	<u>E/M Detailed Consult</u>	<u>Visit</u>	<u>675</u>	<u>675</u>	<u>675</u>
23	<u>E/M Comprehensive Consult</u>	<u>Visit</u>	<u>891</u>	<u>891</u>	<u>891</u>
24	<u>E/M Complex Consult</u>	<u>Visit</u>	<u>1,057</u>	<u>1,057</u>	<u>1,057</u>
25	Dental Services				

1			AMOUNT		
2	TYPE OF SERVICE	UNIT	2020-21	2021-22	2022-23
3	Initial Complete Exam	Visit	185	185	<u>185</u>
4	Periodic Exam	Visit	185	185	<u>185</u>
5	Prophylaxis - Adult	Visit	256	256	<u>256</u>
	Prophylaxis - Child	Visit	243	243	<u>243</u>
6	Extract Single Tooth	Visit	368	368	<u>368</u>
7	One Surface, Permanent Tooth	Visit	296	296	<u>296</u>
8	Home Health Services				
9	Skilled Nursing	Visit	644	644	<u>644</u>
10	Home Health Aide Services	Visit	341	341	<u>341</u>
11	Medical Social Services	Visit	888	888	<u>888</u>
	Physical Therapy	Visit	706	706	<u>706</u>
12	Occupational Therapy	Visit	706	706	<u>706</u>
13	Speech Therapy	Visit	706	706	<u>706</u>
14	Laguna Honda Hospital				
15	In-Patient Care				
16	Regular Hospital Rates				
17 18	Acute	Day	7,047	7,047	<u>7,047</u>
19	Rehabilitation	Day	7,047	7,047	7 <u>7,047</u>
20	Skilled Nursing Facility	Day	1,508	1,508	<u>1,508</u>
21	All-Inclusive Rates				
22	Acute	Day	9,248	9,248	<u>9,248</u>
23			0.055	0.077	
24	Rehabilitation	Day	8,057	8,057	<u>8,057</u>
25	Skilled Nursing Facility	Day	1,756	1,756	6 <u>1,756</u>

		AMOU		NT	
TYPE OF SERVICE	UNIT	2020-21	2021-22	2022-23	
Initial Patient					
E/M Expanded Exam	<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>	
Established Patient					
<u> </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>					
E/M Focused Consult	<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>	
E/M Comprehensive Consult	<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 <u><i>Mental <u>Behavioral</u> Heal[.] Services</i></u>	th				
<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>	

		AMOUNT		
TYPE OF SERVICE	UNIT	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>3 212.66</u>
Socialization	Hour	118.07	123.98	<u>130.18</u>
Dutpatient 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	8.89
Medication Support	Minute	15.15	15.90	<u>16.70</u>
Crisis Intervention	Minute	14.45	15.18	<u>15.94</u>

25

			AMOUNT	
TYPE OF SERVICE	UNIT	2020-21	2021-22	2022-23
Community Substance Abuse-Use				
<u>Disorder (SUD)</u> Organized Delivery System (ODS)				
Services				
Case Management	Per 15 minutes	67.72	71.11	<u>74.6</u>
Physician Consultation	Per 15 minutes	59.10	62.06	6 <u>5.1</u>
Recovery Services	Per 15 minutes	67.72	71.11	<u>74.6</u>
Medication Assisted Treatment (MAT)/Medication Support	Per 15 minutes	237.75	249.64	<u>262.1</u>
Outpatient SUD Services				
MAT - Buprenorphine	Day	132.30	138.92	<u>145.8</u>
MAT - Disulfiram	Day	74.42	78.15	5 <u>82.0</u>
MAT - Naloxone	Kit	310.08	325.58	<u>341.8</u>
Ambulatory Level 1 Withdrawal Management	Day	284.24	298.45	5 <u>313.3</u>
Individual Counseling - Outpatient	Per 15 minutes	55.40	58.17	<u>61.0</u>
Group Counseling - Outpatient	Per 15 minutes	48.24	50.65	5 <u>53.1</u>
Opioid Replacement Therapy (OTP <u>)/Narcotic Treatment Program</u> (<u>NTP)</u>				
Methadone Dosing	Day	73.87	77.56	<u>81.4</u>
Individual Counseling - <i>ORT<u>NTP</u></i>	Per 10 minutes	73.87	77.56	8 <u>81.</u> 4
Group Counseling - <i>ORT<u>NTP</u></i>	Per 10 minutes	41.90	43.99) <u>46</u>

		AMOUNT		
TYPE OF SERVICE	UNIT	2020-21	2021-22	2022-23
SUD Intensive Outpatient Freatment				
Intensive Outpatient Treatment	Per 15 minutes	55.40	58.1	7 <u>61.0</u>
SUD Residential Treatment				
Level 3.2 Residential Withdrawal Management	Day	762.93	801.08	8 <u>841.1</u>
Level 3.1 Residential	Day	212.72	223.3	6 <u>234.5</u>
Level 3.3 Residential	Day	265.89	279.1	9 <u>293.1</u>
Level 3.5 Residential	Day	348.84	366.2	8 <u>384.5</u>
_				
		AMOUNT		
TYPE OF SERVICE	UNIT	2020-21	2021-22	2022-23
POPULATION HEALTH & PREVENTION				
POPULATION	HEALTH & PR	EVENTION		
	HEALTH & PR	EVENTION		
	HEALTH & PR Per Certificate	Rates Per	California Ho	ealth and
Vital Records	Per	Rates Per Safety Co Rates Per	California H	ealth and 103650 ealth and
/ital Records Birth Certificate	Per Certificate Per	Rates Per Safety Co Rates Per Safety Co Rates Per	California Ho ode Section California Ho	ealth and 103650 ealth and 103650 ealth and
Vital Records Birth Certificate Death Certificate Permit-Disposition of Human	Per Certificate Per Certificate	Rates Per Safety Co Rates Per Safety Co Rates Per Safety Co Rates Per	California Ho ode Section California Ho ode Section California Ho	ealth and 103650 ealth and 103650 ealth and 103650 ealth and
Vital Records Birth Certificate Death Certificate Permit-Disposition of Human Remains	Per Certificate Per Certificate Per Permit Per	Rates Per Safety Co Rates Per Safety Co Rates Per Safety Co Rates Per	California Ho ode Section California Ho ode Section California Ho ode Section California Ho	ealth and 103650 ealth and 103650 ealth and 103650 ealth and
Vital Records Birth Certificate Death Certificate Permit-Disposition of Human Remains Out-of-County Cross File Fee	Per Certificate Per Certificate Per Permit Per Certificate Per Letter	Rates Per Safety Co Rates Per Safety Co Rates Per Safety Co Rates Per Safety Co 15 Rates Per	California Ho ode Section California Ho ode Section California Ho ode Section California Ho ode Section	ealth and 103650 ealth and 103650 ealth and 103650 ealth and 103650 <u>1.</u> ealth and

1				AMOUNT	
2	TYPE OF SERVICE	UNIT	2020-21	2021-22	2022-23
3	After Hours Registration of Vital Event	Per Event	42	42	<u>42</u>
4	Reproduction of Documents	Per Page	2	2	<u>2</u>
5	Medical Marijuana				
6 7	Medical Marijuana ID	Card	100	100	<u>100</u>
8			AMOUNT		
9				2021-22	2022.22
10	TYPE OF SERVICE	UNIT	2020-21	2021-22	2022-23
11					
12	Vaccines				
13	Clinic Visits				
14	Travel Health Visit (THV1)	Per Visit	55	55	<u>55</u>
15 16	Travel Health Visit (THV2) – Under Age 18 with Parent THV1	Per Visit	55	55	<u>55</u>
17	Registered Nurse Visit – Off-Site Location	Per Visit	200	200	<u>200</u>
18 19 20 21 22 23 24 25	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	https://ww	2021-22 <i>cp.org/aitcpr</i> <i>w.sfcdcp.org</i> <i>rices-low-cos</i> <i>vaccines/).</i> AMOUNT	/aitc/aitc-	
		UNIT	https://ww	w.sfcdcp.org rices-low-cos vaccines/).	/aitc/aitc-	
		UNIT		rices-low-cos vaccines/).		
		UNIT				
		UNIT		AMOUNT		
		UNIT		AMOUNT		
		UNIT		AMOUNT		
Public H	lealth Laboratem.	•	2020-21	2021-22	2022-23	
	lealth Laboratory					
Lab Te	sting	Per Specimen	Rates Per the Medicare Outpatient Fee-For-Service Reimbursement Rate			
				AMOUNT		
	TYPE OF SERVICE	UNIT	2020-21	2021-22	2022-23	
San Fra	ncisco City Clinic		•			
Clinic \	/isit	Per Visit	25	25	<u>25</u>	

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.
7	
8	
9	APPROVED AS TO FORM:
10	DENNIS J. HERRERA, City Attorney
11	By: <u>/s/ Virginia Dario Elizondo</u> VIRGINIA DARIO ELIZONDO
12	Deputy City Attorney
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Tails

Ordinance

City Hall 1 Dr. Carlton B. Goodlett Place San Francisco, CA 94102-4689

File Number: 210646

Date Passed: July 27, 2021

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

June 16, 2021 Budget and Appropriations Committee - RECOMMENDED

July 13, 2021 Board of Supervisors - CONTINUED ON FIRST READING

Ayes: 11 - Chan, Haney, Mandelman, Mar, Melgar, Peskin, Preston, Ronen, Safai, Stefani and Walton

July 20, 2021 Board of Supervisors - PASSED ON FIRST READING

Ayes: 10 - Chan, Haney, Mandelman, Mar, Melgar, Peskin, Ronen, Safai, Stefani and Walton Noes: 1 - Preston

July 27, 2021 Board of Supervisors - FINALLY PASSED

Ayes: 10 - Chan, Haney, Mandelman, Mar, Melgar, Peskin, Ronen, Safai, Stefani and Walton Noes: 1 - Preston

File No. 210646

I hereby certify that the foregoing Ordinance was FINALLY PASSED on 7/27/2021 by the Board of Supervisors of the City and County of San Francisco.

Cr Chi A As

Angela Calvillo Clerk of the Board

London N. Breed Mayor

8/4/21

Date Approved