

File No. 1100635

Committee Item No. 7

Board Item No. 10

### COMMITTEE/BOARD OF SUPERVISORS

#### AGENDA PACKET CONTENTS LIST

Committee: Budget & Finance Committee

Date June 17, 2016

Board of Supervisors Meeting

Date July 26 2016

#### Cmte Board

- |                                     |                                     |  |
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| <input type="checkbox"/>            | <input type="checkbox"/>            | Motion                                       |
| <input type="checkbox"/>            | <input type="checkbox"/>            | Resolution                                   |
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | Ordinance                                    |
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | Legislative Digest                           |
| <input type="checkbox"/>            | <input type="checkbox"/>            | Budget and Legislative Analyst Report        |
| <input type="checkbox"/>            | <input type="checkbox"/>            | Youth Commission Report                      |
| <input type="checkbox"/>            | <input type="checkbox"/>            | Introduction Form                            |
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | Department/Agency Cover Letter and/or Report |
| <input type="checkbox"/>            | <input type="checkbox"/>            | MOU  |
| <input type="checkbox"/>            | <input type="checkbox"/>            | Grant Information Form                       |
| <input type="checkbox"/>            | <input type="checkbox"/>            | Grant Budget                                 |
| <input type="checkbox"/>            | <input type="checkbox"/>            | Subcontract Budget                           |
| <input type="checkbox"/>            | <input type="checkbox"/>            | Contract/Agreement                           |
| <input type="checkbox"/>            | <input type="checkbox"/>            | Form 126 – Ethics Commission                 |
| <input type="checkbox"/>            | <input type="checkbox"/>            | Award Letter                                 |
| <input type="checkbox"/>            | <input type="checkbox"/>            | Application                                  |
| <input type="checkbox"/>            | <input type="checkbox"/>            | Public Correspondence                        |

#### OTHER (Use back side if additional space is needed)

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Completed by: Linda Wong Date June 10, 2016  
 Completed by: Linda Wong Date 7/6/16

1 [Health Code - Patient Rates - FYs 2016-2017 and 2017-2018]

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, 2016, through June 30, 2018.**

5

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.

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

14

15 Section 1. The Health Code is hereby amended by revising

16 Section 128, to read as follows:

17 **SEC. 128. PATIENT RATES.**

18 The Board of Supervisors of the City and County of San Francisco does hereby  
19 determine and fix the proper reasonable amounts to be charged to persons for services  
20 furnished by the Department of Public Health as follows, which rates shall be effective for  
21 services delivered as of ~~July 1, 2015 through June 30, 2017~~ July 1, 2016 through June 30, 2018.

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TYPE OF SERVICE	UNIT	AMOUNT		
		2015-16	2016-17	2017-18
<i>COMMUNITY HEALTH SAN FRANCISCO HEALTH NETWORK</i>				
<i>Zuckerberg San Francisco General Hospital and Trauma Center (ZSFG)</i>				
Supplies & Drugs				<p>Special Price Lists located at 1001 Potrero Street Avenue, SFGHZSFG, incorporated into this provision by reference as if specifically set forth herein, and <del>are</del> not subject to change except by amendment to this provision. <u>Such rates shall be increased 6% effective July 1, 2017, rounded to the nearest dollar. 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>).</u></p>
<i>Surgical Supplies</i>				
<i>Pharmacy (IP)</i>				
<i>Medical Supplies</i>				
<i>Diagnostic Radiology</i>				

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TYPE OF SERVICE	UNIT	AMOUNT		
		<del>2015-16</del>	2016-17	2017-18
<i>Clinical Lab</i>				
<i>Anatomic Pathology</i>				
<i>All Other Special Services</i>				
<b>In-Patient Care</b>				
Medical Surgical	Day	<u>8,126</u>	<del>8,938</del> <u>8,695</u>	<u>9,216</u>
Intensive Care	Day	<u>16,244</u>	<del>17,869</del> <u>17,381</u>	<u>18,424</u>
Intensive Care – Trauma	Day	<u>16,244</u>	<del>17,869</del> <u>17,381</u>	<u>18,424</u>
Coronary Care	Day	<u>16,244</u>	<del>17,869</del> <u>17,381</u>	<u>18,424</u>
Stepdown Units	Day	<u>11,730</u>	<del>12,903</del> <u>12,551</u>	<u>13,305</u>
Pediatrics	Day	<u>7,771</u>	<del>8,549</del> <u>8,315</u>	<u>8,814</u>
Obstetrics	Day	<u>6,359</u>	<del>6,994</del> <u>6,804</u>	<u>7,212</u>
Nursery				
New Born	Day	<u>3,247</u>	<del>3,572</del> <u>3,475</u>	<u>3,683</u>
Observation/Well Baby	Day	<u>5,650</u>	<del>6,215</del> <u>6,045</u>	<u>6,408</u>
Semi-Intensive Care	Day	<u>10,826</u>	<del>11,908</del> <u>11,583</u>	<u>12,278</u>
Intensive Care	Day	<u>16,244</u>	<del>17,869</del> <u>17,381</u>	<u>18,424</u>
Labor/Delivery - 6G	Day	<u>5,650</u>	<del>6,215</del> <u>6,046</u>	<u>6,408</u>
Labor/Delivery Hours of Stay	Hour	<u>283</u>	<del>311</del> <u>302</u>	<u>320</u>
Psychiatric Inpatient	Day	<u>6,359</u>	<del>6,994</del> <u>6,804</u>	<u>7,212</u>
Psychiatric Forensic Inpatient - 7L	Day	<u>6,359</u>	<del>6,994</del> <u>6,804</u>	<u>7,212</u>

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TYPE OF SERVICE	UNIT	AMOUNT		
		<del>2015-16</del>	2016-17	2017-18
AIDS Unit - 5A	Day	<del>6,359</del>	<del>6,994</del> <u>6,804</u>	<u>7,212</u>
Security Unit - 7D	Day	<del>6,359</del>	<del>6,994</del> <u>6,804</u>	<u>7,212</u>
Skilled Nursing Facility	Day	<del>2,545</del>	<del>2,799</del> <u>2,723</u>	<u>2,886</u>
Mental Rehab Unit	Day	<del>2,102</del>	<del>2,313</del> <u>2,250</u>	<u>2,385</u>
Adult Residential Facility	Day	<del>425</del>	<del>467</del> <u>454</u>	<u>482</u>
<b>Respiratory Therapy</b>				
O2 Therapy	per 24 hours	<del>830</del>	<del>913</del> <u>888</u>	<u>942</u>
<b>Surgical Services</b>				
Minor Surgery I (Come & Go)	1st Hour	<del>4,253</del>	<del>4,679</del> <u>4,551</u>	<u>4,824</u>
Minor Surgery I (Come & Go)	Ea. Add'l 1/2 Hr.	<del>2,167</del>	<del>2,384</del> <u>2,319</u>	<u>2,458</u>
Minor Surgery II	1st Hour	<del>4,643</del>	<del>5,107</del> <u>4,968</u>	<u>5,266</u>
Minor Surgery II	Ea. Add'l 1/2 Hr. 7,480	<del>2,316</del>	<del>2,548</del> <u>2,478</u>	<u>2,627</u>
Major Surgery I	1st Hour	<del>6,991</del>	<del>7,690</del> <u>7,480</u>	<u>7,929</u>
Major Surgery I	Add'l 1/2 Hour	<del>2,795</del>	<del>3,074</del> <u>2,991</u>	<u>3,170</u>
Major Surgery II	1st Hour	<del>7,872</del>	<del>8,660</del> <u>8,424</u>	<u>8,929</u>
Major Surgery II	Add'l 1/2 Hour	<del>3,152</del>	<del>3,467</del> <u>3,373</u>	<u>3,575</u>
Major Surgery III	1st Hour	<del>8,761</del>	<del>9,637</del> <u>9,374</u>	<u>9,937</u>

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TYPE OF SERVICE	UNIT	AMOUNT		
		<del>2015-16</del>	2016-17	2017-18
Major Surgery III	Add'l 1/2 Hour	<del>3,505</del>	3,856 <u>3,750</u>	<u>3,975</u>
Extraordinary Surgery	1st Hour	<del>9,615</del>	10,576 <u>10,288</u>	<u>10,905</u>
Extraordinary Surgery	Add'l 1/2 Hour	<del>3,846</del>	4,231 <u>4,115</u>	<u>4,362</u>
Surgery (2 Teams)	1st Hour	<del>12,992</del>	14,292 <u>13,902</u>	<u>14,736</u>
Surgery (2 Teams)	Add'l 1/2 Hour	<del>5,196</del>	5,716 <u>5,560</u>	<u>5,893</u>
Surgery (3 Teams)	1st Hour	<del>14,445</del>	15,889 <u>15,456</u>	<u>16,383</u>
Surgery (3 Teams)	Add'l 1/2 Hour	<del>5,779</del>	6,357 <u>6,183</u>	<u>6,554</u>
Major Trauma III	1st Hour	<del>11,385</del>	12,523 <u>12,182</u>	<u>12,913</u>
Major Trauma III	Add'l 1/2 Hour	<del>4,555</del>	5,010 <u>4,874</u>	<u>5,166</u>
Major Trauma II	1st Hour	<del>10,826</del>	11,908 <u>11,583</u>	<u>12,278</u>
Major Trauma II	Add'l 1/2 Hour	<del>4,332</del>	4,765 <u>4,636</u>	<u>4,914</u>
Major Trauma I	1st Hour	<del>8,236</del>	9,059 <u>8,812</u>	<u>9,341</u>
Major Trauma I	Add'l 1/2 Hour	<del>3,296</del>	3,625 <u>3,526</u>	<u>3,738</u>
Recovery Room	1st Hour	<del>2,709</del>	2,979 <u>2,898</u>	<u>3,072</u>
Recovery Room	2nd Add'l Hour	<del>2,167</del>	2,384 <u>2,319</u>	<u>2,458</u>
Recovery Room	Each Add'l Hour	<del>1,625</del>	1,788 <u>1,739</u>	<u>1,843</u>
Anesthesia	1st Hour	<del>6,083</del>	6,692 <u>6,509</u>	<u>6,900</u>

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TYPE OF SERVICE	UNIT	AMOUNT		
		2015-16	2016-17	2017-18
Anesthesia	Add'l 1/2 Hour	3,037	3,340 3,249	3,444
<b>Trauma Care</b>				
Trauma Activation -900	Visit	24,890	27,379 26,632	28,230
Trauma Activation – 911	Visit	14,641	16,105 15,666	16,606
Trauma Critical Care	1st 30-74 Minutes	7,795	8,574 8,340	8,841
Trauma Critical Care	Each Add'l. 30 Min.	1,948	2,143 2,084	2,210
ED Level 5 Team Trauma	Visit	14,641	16,105 15,666	16,606
<b>Emergency Clinic</b>				
Level I	Room	463	509 495	525
Level II	Room	1,385	1,524 1,482	1,571
Level III	Room	2,963	3,260 3,171	3,361
Level IV	Room	4,881	5,369 5,223	5,536
Level V	Room	9,853	10,839 10,543	11,176
Resuscitation		6,827	7,510 7,305	7,743
<b>Psychiatric Emergency Services</b>				
Psych Crisis – Level 1 ER Room	Room	952	1,047 1,010	1,071
Psych Crisis – Level 2 ER Room	Room	2,212	2,433 2,347	2,488
Psych Crisis – Level 3 ER Room	Room	3,475	3,823 3,687	3,908

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TYPE OF SERVICE	UNIT	AMOUNT		
		2015-16	2016-17	2017-18
Psych Crisis – Level 4 ER Room	Room	4,737	5,211 5,027	5,328
Psych Crisis – Level 5 ER Room	Room	6,001	6,602 6,369	6,751
Psych Crisis – Level 6 ER Room	Room	7,265	7,991 7,709	8,172
Medication Svs/Min.	per minute	23	25 24	26
<b>General Clinic</b>				
Initial				
E/M Focused Exam	Visit	310	341 332	352
E/M Expanded Exam	Visit	517	569 553	586
E/M Detailed Exam	Visit	590	649 631	669
E/M Comprehensive Exam	Visit	789	868 844	895
E/M Complex Exam	Visit	985	1,084 1,054	1,118
Established Patient				
E/M Brief Exam	Visit	240	264 257	272
E/M Focused Exam	Visit	285	314 305	324
E/M Expanded Exam	Visit	376	414 403	427
E/M Detailed Exam	Visit	533	586 570	604
E/M Comprehensive Exam	Visit	832	915 890	943
Consultation				
E/M Focused Consult	Visit	272	300 291	309
E/M Detailed Consult	Visit	562	618 601	637
<b>Primary Care</b>				
Initial				



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TYPE OF SERVICE	UNIT	AMOUNT		
		<i>2015-16</i>	<i>2016-17</i>	<i>2017-18</i>
E/M Focused Exam	Visit	<i>340</i>	<i>374 363</i>	<i>385</i>
E/M Expanded Exam	Visit	<i>422</i>	<i>464 451</i>	<i>478</i>
E/M Detailed Exam	Visit	<i>612</i>	<i>673 655</i>	<i>694</i>
E/M Comprehensive Exam	Visit	<i>758</i>	<i>834 811</i>	<i>860</i>
E/M Complex Exam	Visit	<i>1,192</i>	<i>1,311 1,275</i>	<i>1,352</i>
<b>Established Patient</b>				
E/M Brief Exam	Visit	<i>173</i>	<i>190 185</i>	<i>196</i>
E/M Focused Exam	Visit	<i>258</i>	<i>283 276</i>	<i>292</i>
E/M Expanded Exam	Visit	<i>450</i>	<i>495 482</i>	<i>511</i>
E/M Detailed Exam	Visit	<i>586</i>	<i>644 627</i>	<i>664</i>
E/M Comprehensive Exam	Visit	<i>915</i>	<i>1,007 979</i>	<i>1,038</i>
<b>Dental Services</b>				
Initial Complete Exam	Visit	<i>144</i>	<i>158 154</i>	<i>163</i>
Periodic Exam	Visit	<i>144</i>	<i>158 154</i>	<i>163</i>
Prophylaxis – Adult	Visit	<i>199</i>	<i>219 213</i>	<i>226</i>
Prophylaxis – Child	Visit	<i>189</i>	<i>208 202</i>	<i>214</i>
Extract Single Tooth	Visit	<i>286</i>	<i>315 306</i>	<i>325</i>
One Surface, Permanent Tooth	Visit	<i>230</i>	<i>253 246</i>	<i>261</i>
<b>Home Health Services</b>				
Skilled Nursing	Visit	<i>536</i>	<i>590 536</i>	<i>568</i>
Home Health Aide Services	Visit	<i>284</i>	<i>312 284</i>	<i>301</i>

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TYPE OF SERVICE	UNIT	AMOUNT		
		<del>2015-16</del>	2016-17	2017-18
Medical Social Services	Visit	<del>739</del>	813 <del>739</del>	<u>783</u>
Physical Therapy	Visit	<del>587</del>	616 <del>587</del>	<u>622</u>
Occupational Therapy	Visit	<del>587</del>	616 <del>587</del>	<u>622</u>
Speech Therapy	Visit	<del>587</del>	619 <del>587</del>	<u>622</u>
<b>Laguna Honda Hospital</b>				
<b>In-Patient Care</b>				
<b>Regular Hospital Rates</b>				
Acute	Day	<del>5,478</del>	6,026 <del>5,861</del>	<u>6,213</u>
Rehabilitation	Day	<del>5,478</del>	6,026 <del>5,861</del>	<u>6,213</u>
Skilled Nursing Facility	Day	<del>1,172</del>	1,289 <del>1,254</del>	<u>1,329</u>
<b>All Inclusive Rates</b>				
Acute	Per Diem	<del>7,189</del>	7,908 <del>7,692</del>	<u>8,154</u>
Rehabilitation	Per Diem	<del>6,263</del>	7,202 <del>6,701</del>	<u>7,103</u>
Skilled Nursing Facility	Day	<del>1,365</del>	1,502 <del>1,461</del>	<u>1,549</u>
<b>POPULATION HEALTH &amp; PREVENTION</b>				
<b>Community Mental Health Services</b>				
<b>24-Hour Service</b>				
Hospital Inpatient	Day	<del>6,359</del>	6,994 <del>6,804</del>	<u>7,212</u>

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TYPE OF SERVICE	UNIT	AMOUNT		
		<del>2015-16</del>	2016-17	2017-18
Skilled Nursing	Day	<del>2,102</del>	<del>2,313</del> <u>2,250</u>	<u>2,385</u>
Psychiatric Health Facility (PHF)	Day	<del>815</del>	<del>831</del> <u>872</u>	<u>924</u>
Adult Crisis Residential	Day	<del>457</del>	<del>466</del> <u>489</u>	<u>518</u>
Adult Residential	Day	<del>230</del>	<del>235</del> <u>246</u>	<u>261</u>
Day Services				
Day Rehabilitation	Full Day	<del>175</del>	<del>210</del> <u>219</u>	<u>273</u>
Day Rehabilitation	Half Day	<del>112</del>	<del>134</del> <u>140</u>	<u>175</u>
Day Treatment Intensive	Full Day	<del>290</del>	<del>348</del> <u>363</u>	<u>453</u>
Day Treatment Intensive	Half Day	<del>192</del>	<del>230</del> <u>240</u>	<u>300</u>
Day Treatment Intensive (Children)	Full Day	<del>390</del>	<del>468</del> <u>488</u>	<u>609</u>
Day Treatment Intensive (Children)	Half Day	<del>280</del>	<del>336</del> <u>350</u>	<u>438</u>
Crisis Stabilization	Hour	<del>278</del>	<del>334</del> <u>348</u>	<u>434</u>
Socialization	Hour	<del>66</del>	<del>79</del> <u>83</u>	<u>103</u>
Outpatient Services				
Case Management Brokerage	Minute	<del>4.80</del>	<del>5.76</del> <u>6.96</u>	<u>10.09</u>
Mental Health Services	Minute	<del>6.35</del>	<del>7.62</del> <u>9.21</u>	<u>13.35</u>
Therapeutic Behavioral Services	Minute	<del>6.35</del>	<del>7.62</del> <u>9.21</u>	<u>13.35</u>
Medication Support	Minute	<del>12.60</del>	<del>15.12</del> <u>18.27</u>	<u>26.49</u>
Crisis Intervention	Minute	<del>9.10</del>	<del>10.92</del> <u>13.20</u>	<u>19.13</u>
<i>Other Services</i>		<i>Special Price List located at 1380 Howard Street, Community Behavioral</i>		

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TYPE OF SERVICE	UNIT	AMOUNT		
		2015-16	2016-17	2017-18
		<i>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</i>		
<b>Community Substance Abuse</b>				
Residential Services				
Residential – Detoxification	Day	<del>155</del>	<del>163</del> <u>186</u>	<u>214</u>
Residential – Basic	Day	<del>160</del>	<del>168</del> <u>192</u>	<u>221</u>
Residential – Family	Day	<del>231</del>	<del>243</del> <u>277</u>	<u>319</u>
Residential - Medical Support	Day	<del>340</del>	<del>357</del> <u>408</u>	<u>469</u>
Recovery Home	Day	<del>121</del>	<del>127</del> <u>145</u>	<u>167</u>
Therapeutic Community	Day	<del>139</del>	<del>146</del> <u>166</u>	<u>191</u>
Non-Residential Services				
Intensive Outpatient Treatment/Day Care Rehabilitative	Per Visit	<del>168</del>	<del>176</del> <u>202</u>	<u>232</u>
Outpatient - Individual Counseling	Per Visit	<del>180</del>	<del>189</del> <u>216</u>	<u>248</u>
Outpatient - Group Counseling	Per Visit	<del>93</del>	<del>98</del> <u>112</u>	<u>129</u>
Secondary Prevention Services				
Prevention/Intervention	Hour	<del>82</del>	<del>86</del> <u>98</u>	<u>113</u>

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TYPE OF SERVICE	UNIT	AMOUNT		
		<i>2015-16</i>	<b>2016-17</b>	<b>2017-18</b>
<b>Narcotic Treatment Programs (NTP)</b>				
Methadone Dosing	Day	<i>42</i>	<u>4450</u>	<u>58</u>
Buprenorphine	Day	<i>76</i>	<u>79 91</u>	<u>104</u>
Narcotic Treatment Program – Individual Counseling	Per 10 minutes	<i>42</i>	<u>4450</u>	<u>58</u>
Narcotic Treatment Program – Group Counseling	Per 10 minutes	<i>24</i>	<u>25 29</u>	<u>33</u>
NTP – Detoxification	Day	<i>20</i>	<u>21 24</u>	<u>28</u>
<b>POPULATION HEALTH &amp; PREVENTION</b>				
<b>Vital Records</b>				
Birth Certificate	Per Certificate	Rates Per State of California, Health and Safety Code, Section 103650		
Death Certificate	Per Certificate	Rates Per State of California, Health and Safety Code, Section 103650		
Permit - Disposition of Human Remains	Per Permit	Rates Per State of California, Health and Safety Code, Section 103650		
Out-of-County Cross File	Per Certificate	Rates Per State of California, Health and Safety Code, Section 103650		
Letter of Non-Contagious Disease	Per Letter	<i>10</i>	15	<u>15</u>

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TYPE OF SERVICE	UNIT	AMOUNT		
		<del>2015-16</del>	2016-17	2017-18
Expedited Registration of Vital Event	Per Event	Rates Per State of California, Health and Safety Code, Section 103650		
Expedited Documents	Per Delivery	<del>30</del>	30	<u>30</u>
After Hours Registration of Vital Event	Per Event	<del>42</del>	42	<u>42</u>
Reproduction of Documents	Per Page	<del>2</del>	2	<u>2</u>
Medical Marijuana				
Medical Marijuana ID	Card	<del>120</del>	120	<u>120</u>
Medical Marijuana ID (Medi-Cal Beneficiaries)	Card	<del>60</del>	60	<u>60</u>
<b>ADULT IMMUNIZATION CLINIC</b>				
Clinic Visits				
Travel Health Visit (THV1)	Per Visit	<del>50</del>	55	<u>57</u>
Travel Health Visit (THV2) – Under Age 18 with Parent THV1	Per Visit	<del>50</del>	55	<u>57</u>
Registered Nurse Visit – Off-Site Location	Per Visit	<del>172</del>	190	<u>198</u>

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TYPE OF SERVICE	UNIT	AMOUNT		
		2015-16	2016-17	2017-18
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 to this provision. <u>This Special Price List is posted on the San Francisco Department of Public Health Communicable Disease and Control Prevention website (www.sfdcp.org/aiteprices.html).</u>		
<b><u>PUBLIC HEALTH LABORATORY</u></b>				
<u>Lab Testing</u>	<u>Per Specimen</u>	<u>Rates Per the Medicare Outpatient Fee-For-Service Reimbursement Rate</u>		
<b><u>SAN FRANCISCO CITY CLINIC</u></b>				
<u>Clinic Visit</u>	<u>Per Visit</u>		<u>25</u>	<u>25</u>

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

3           ~~Section 3~~ Section 2. Effective Date. This ordinance shall become effective 30 days after  
4 enactment. Enactment occurs when the Mayor signs the ordinance, the Mayor returns the  
5 ordinance unsigned or does not sign the ordinance within ten days of receiving of it, or the  
6 Board of Supervisors overrides the Mayor's veto of the ordinance. As stated in Section 128 of  
7 the Health Code, the rates specified therein shall apply starting July 1, 2015~~6~~.

8           ~~Section 4~~ Section 3. Scope of Ordinance. In enacting this ordinance, the Board of  
9 Supervisors intends to amend only those words, phrases, paragraphs, subsections, sections,  
10 articles, numbers, punctuation marks, charts, diagrams, or any other constituent parts of the  
11 municipal code that are explicitly shown in this ordinance as additions, deletions, Board  
12 amendment additions, and Board amendment deletions in accordance with the "Note" that  
13 appears under the official title of the ordinance.

14  
15 APPROVED AS TO FORM:  
DENNIS J. HERRERA, City Attorney

16 By:   
17 KATHLEEN MURPHY  
18 Deputy City Attorney

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**LEGISLATIVE DIGEST**

[Health Code - Patient Rates - FYs 2016-2017 and 2017-2018]

**Ordinance amending the Health Code to set patient rates and other services provided by the Department of Public Health, effective July 1, 2016, through June 30, 2018.**

Existing Law

San Francisco Health Code Section 128 sets forth the amounts to be charged for patient care and other services provided by the Department of Public Health.

Amendments to Current Law

This amendment increases the amounts to be charged for patient care and other services provided by the Department of Public Health.

Background Information

Consistent with the health care industry, the Department of Public Health reviews the rates charged for patient care and other services each year. This amendment will increase the rates for hospital services by 7% effective July 1, 2016 and an additional 6% effective July 1, 2017. Other rates are increased based on increases in actual costs.

OFFICE OF THE MAYOR  
SAN FRANCISCO



EDWIN M. LEE

TO: Angela Calvillo, Clerk of the Board of Supervisors  
FROM: Mayor Edwin M. Lee *EW*  
RE: Health Code - Patient Rates 2016-2018  
DATE: May 31, 2016

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Attached for introduction to the Board of Supervisors is an ordinance amending the Health Code to set patient rates and other services provided by the Department of Public Health, effective July 1, 2016.

I respectfully request a waiver of the 30-day hold and that this item be calendared in Budget & Finance Committee on June 17, 2016.

Should you have any questions, please contact Nicole Elliott (415) 554-7940.

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BOARD OF SUPERVISORS  
SAN FRANCISCO  
2016 MAY 31 PM 1:30  
BY *EW*