

1 [Health Code - ~~Subacute~~Skilled Nursing Care Transfer Reporting Requirements]

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3 **Ordinance amending the Health Code to require general acute care hospitals and**
4 **hospital-based skilled nursing facilities in the City to report annually to the Department**
5 **of Public Health the number of, and certain demographic information regarding,**
6 **patients transferred to a health facility outside of the City to receive ~~subacute~~-skilled**
7 **nursing care and patients who qualify for ~~subacute~~-skilled nursing care but are not**
8 **transferred to a health facility outside of the City.**

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

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

17 Section 1. Article 3 of the Health Code is hereby amended by adding Sections 140
18 through 140.3, to read as follows:

19 **SEC. 140. FINDINGS.**

20 *San Francisco has a shortage of subacute skilled nursing care beds in the City, which often*
21 *necessitates transferring patients from general acute care hospitals in the City to subacute skilled*
22 *nursing care facilities outside of the City. Some City residents who receive subacute skilled nursing*
23 *care at facilities outside of the City, and their families, face hardships associated with traveling to, and*
24 *receiving care at, these facilities. As the City strives to increase the number of subacute skilled nursing*
25 *care beds in San Francisco, it is necessary to understand the full scope of the need for both subacute*
and general skilled nursing care beds based on the number of patients who qualify for either subacute

1 or general skilled nursing care in an acute care hospital or hospital-based skilled nursing facility
2 and are either transferred outside of the City or remain in the City in an acute care hospital or
3 hospital-based skilled nursing facility. Accordingly, Section 140.2 requires public and private
4 general acute care hospitals and hospital-based skilled nursing facilities in the City to report the
5 number of and aggregated demographic information regarding qualified subacute and general skilled
6 nursing care patients to the Department of Public Health.

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8 **SEC. 140.1. DEFINITIONS.**

9 For purposes of Sections 140 through 140.3 the following terms have the following meanings:

10 “City” means the City and County of San Francisco.

11 “Department” means the Department of Public Health.

12 “Director” means the Director of Health or the Director’s designee.

13 “Subacute Out-of-County Health Facility” means a health facility located outside of the City,
14 whether public or private, and licensed as a general acute care hospital or skilled nursing
15 facility, as those two terms are defined by Section 1250 of the California Health and Safety
16 Code, as amended from time to time, and providing Skilled Nursing Care under Section
17 14132.25 of the California Welfare and Institutions Code, as amended from time to time, to
18 provide Subacute Care.

19 “Hospital Reporting Health Facility” means every health facility in the City, whether public or
20 private, licensed as a general acute care hospital or hospital-based skilled nursing facility, as those
21 two terms are defined by Section 1250(a) of the California Health and Safety Code, as amended from
22 time to time.

23 “Subacute Skilled Nursing Care” means general skilled nursing care consisting of including
24 but not limited to adult subacute care as defined by Section 14132.25 of the California Welfare
25 and Institutions Code, as amended from time to time, which is a level of care designed for patients

1 who have an acute illness, injury, or exacerbation of a disease process, and pediatric subacute care,
2 which is a level of care for patients under 21 years of age who use a medical technology that
3 compensates for the loss of a vital bodily function.

4
5 **SEC. 140.2. REPORTING TO THE DEPARTMENT OF PUBLIC HEALTH.**

6 (a) Reporting Health FacilitiesHospitals owned by the City or private entities shall disclose
7 to the Department the following information in the form of a report to be submitted annually to the
8 Department by January 31 for the preceding calendar year, except that the submission deadline for
9 calendar year 2021 shall be ~~October 1, 2022~~April 30, 2022. The Department shall request such
10 information from Reporting Health FacilitiesHospitals owned by non-City public entities. The report
11 shall present patient information in aggregate, de-identified form consistent with state and federal laws
12 governing the confidentiality of medical information.

13 (1) The total number of patients who were City residents and the total number of
14 patients who were not City residents, transferred by the Reporting Health FacilityHospital to an
15 SubacuteOut-of-County Health Facility for the purpose of receiving SubacuteSkilled Nursing
16 Care.

17 (2) The total number of patients who were City residents and the total number of
18 patients who were not City residents, who qualified for SubacuteSkilled Nursing Care while admitted
19 to the Reporting Health FacilityHospital but were not transferred by the Reporting Health
20 FacilityHospital to an SubacuteOut-of-County Health Facility.

21 (3) The following aggregate demographic information for each category of patient: age,
22 race/ethnicity, gender (as well as sexual orientation and gender identity, if normally collected by the
23 Reporting Health FacilityHospital), patient's insurance provider (by way of example but not
24 limitation, Medi-Cal, Medicare, or the specific private insurance provider), and housing status (by way
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1 of example but not limitation, people experiencing homelessness, marginally housed, or permanently
2 housed).

3 (b) The Director may issue rules or guidelines regarding the information required by this
4 Section 140.2 including the format by which ~~Reporting Health Facilities~~Hospitals will transmit the
5 report.

6 (c) The Department shall ~~make~~annually submit a ~~written~~report on an annual basis to the
7 Health Commission based on the annual reports submitted by the ~~Reporting Health~~
8 ~~Facilities~~Hospitals to the Department. The Department's report to the Health Commission shall
9 include not only statistical information but also such future plans and/or recommendations, as the
10 Department deems appropriate, for provision of ~~Subacute~~Skilled Nursing Care in the City.

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12 **SEC. 140.3. PROMOTION OF THE GENERAL WELFARE.**

13 In enacting and implementing Sections 140–140.2, the City is assuming an undertaking only to
14 promote the general welfare. It is not assuming, nor is it imposing on its officers and employees, an
15 obligation for breach of which it is liable in money damages to any person who claims that such breach
16 proximately caused injury.

1 Section 2. Effective Date. This ordinance shall become effective 30 days after
2 enactment. Enactment occurs when the Mayor signs the ordinance, the Mayor returns the
3 ordinance unsigned or does not sign the ordinance within ten days of receiving it, or the Board
4 of Supervisors overrides the Mayor's veto of the ordinance.

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7 APPROVED AS TO FORM:
8 DAVID CHIU, City Attorney

9 By: /s/ Henry L. Lifton
10 HENRY L. LIFTON
Deputy City Attorney

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