

1 [Patient Rates]

2

3 Ordinance amending Article 3 of the San Francisco Health Code by amending  
 4 Section 128 to set patient rates for services furnished by the Department of Public  
 5 Health, effective July 1, 2002.

6

7 Note: Additions are single-underline italics Times New Roman;  
 8 Deletions are ~~strikethrough italics Times New Roman~~.  
 Board amendment additions are double underlined.  
 Board amendment deletions are ~~strikethrough normal~~.

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

10 Section 1. Article 3 of the San Francisco Health Code is hereby amended by  
 11 amending Section 128, to read as follows:

12 Sec. 128 PATIENT RATES. The Board of Supervisors of the City and County of San  
 13 Francisco does hereby determine and fix the proper reasonable amounts to be charged to  
 14 persons for services furnished by ~~City and County institutions~~ the Department of Public Health  
 15 as follows, which rates shall be effective for services delivered as of ~~January 1, 2001~~ July 1,  
 16 2002.

17

| 18 TYPE OF SERVICE | UNIT | AMOUNT |
|--------------------|------|--------|
|--------------------|------|--------|

19 COMMUNITY HEALTH NETWORK

20

21 San Francisco General Hospital

22 Surgical Supplies Special Price List23 Pharmacy (IP) Special Price List24 Medical Supplies Special Price List25 Diagnostic Radiolog Special Price List

1 Clinical Lab

Special Price List

2 Anatomic Pathology

Special Price List

3  
4 In-Patient Care

|    |                                     |      |                  |              |
|----|-------------------------------------|------|------------------|--------------|
| 5  | Medical Surgical                    | Day  | <del>1,650</del> | <u>2,250</u> |
| 6  | Intensive Care                      | Day  | <del>3,650</del> | <u>4,500</u> |
| 7  | Intensive Care – Trauma             | Day  | <del>3,650</del> | <u>4,500</u> |
| 8  | Coronary Care                       | Day  | <del>3,650</del> | <u>4,500</u> |
| 9  | Chest-Pulmonary                     | Day  | <del>3,250</del> | <u>3,750</u> |
| 10 | Stepdown Units                      | Day  | <del>2,450</del> | <u>3,250</u> |
| 11 | Pediatrics                          | Day  | <del>1,650</del> | <u>2,250</u> |
| 12 | Obstetrics                          | Day  | <del>1,650</del> | <u>2,250</u> |
| 13 | Nursery                             |      |                  |              |
| 14 | New Born                            | Day  | <del>950</del>   | <u>1,150</u> |
| 15 | Observation/Well Baby               | Day  | <del>1,650</del> | <u>2,000</u> |
| 16 | Semi-Intensive Care                 | Day  | <del>2,450</del> | <u>3,000</u> |
| 17 | Intensive Care                      | Day  | <del>2,650</del> | <u>4,500</u> |
| 18 | Labor/Delivery - 6G                 | Day  | <del>1,650</del> | <u>1,775</u> |
| 19 | Labor/Delivery Hours of Stay        | Hour | <del>90</del>    | <u>100</u>   |
| 20 | Psychiatric Inpatient               | Day  | <del>1,650</del> | <u>2,250</u> |
| 21 | Psychiatric Forensic Inpatient - 7L | Day  | <del>1,650</del> | <u>2,250</u> |
| 22 | AIDS Unit - 5A                      | Day  | <del>1,650</del> | <u>2,250</u> |
| 23 | Security Unit - 7D                  | Day  | <del>1,650</del> | <u>2,250</u> |
| 24 | Skilled Nursing Facility            | Day  | <del>600</del>   | <u>900</u>   |
| 25 | Mental Health Rehab. SNF            | Day  | <del>600</del>   | <u>900</u>   |

1  
2  
3  
4  
5  
6  
7  
8  
9  
10  
11  
12  
13  
14  
15  
16  
17  
18  
19  
20  
21  
22  
23  
24  
25

Respiratory Therapy

O2 Therapy 10

Surgical Services

|                                   |                   |                  |              |
|-----------------------------------|-------------------|------------------|--------------|
| Minor Surgery Pre-Op Holding Room | Room              | <del>490</del>   | <u>210</u>   |
| Minor Surgery I (Come & Go)       | 1/4 Hour          | <del>275</del>   | <u>300</u>   |
|                                   | 1/2 Hour          | <del>540</del>   | <u>595</u>   |
|                                   | 3/4 Hour          | <del>815</del>   | <u>900</u>   |
|                                   | Full 1 Hour       | <del>1,070</del> | <u>1,175</u> |
|                                   | Ea. Add'l 1/4 Hr. | <del>275</del>   | <u>300</u>   |
| Minor Surgery II                  | 1st Hour          | <del>1,170</del> | <u>1,285</u> |
|                                   | Ea. Add'l 1/2 Hr. | <del>585</del>   | <u>640</u>   |
| Major Surgery Pre-Op Holding      | Room              | <del>490</del>   | <u>210</u>   |
| Major Surgery I                   | 1st Hour          | <del>1,760</del> | <u>1,935</u> |
|                                   | Add'l 1/2 Hour    | <del>645</del>   | <u>675</u>   |
| Major Surgery II                  | 1st Hour          | <del>1,980</del> | <u>2,175</u> |
|                                   | Add'l 1/2 Hour    | <del>685</del>   | <u>755</u>   |
| Major Surgery III                 | 1st Hour          | <del>2,200</del> | <u>2,420</u> |
|                                   | Add'l 1/2 Hour    | <del>815</del>   | <u>895</u>   |
| Extraordinary Surgery             | 1st Hour          | <del>2,420</del> | <u>2,660</u> |
|                                   | Add'l 1/2 Hour    | <del>890</del>   | <u>980</u>   |
| Surgery (2 Teams)                 | Procedure         | <del>3,410</del> | <u>3,750</u> |
|                                   | Add'l 1/2 Hour    | <del>1,265</del> | <u>1,280</u> |
| Surgery (3 Teams)                 | Procedure         | <del>4,400</del> | <u>4,840</u> |

|    |                                 |                      |                  |                           |
|----|---------------------------------|----------------------|------------------|---------------------------|
| 1  |                                 | Add'l 1/2 Hour       | <del>1,430</del> | <u>1,575</u>              |
| 2  | Major Trauma III                | First Hour           | <del>3,470</del> | <u>3,815</u>              |
| 3  |                                 | Subsequent Hours     | <del>1,285</del> | <u>1,415</u>              |
| 4  | Major Trauma II                 | First Hour           | <del>2,725</del> | <u>3,000</u>              |
| 5  |                                 | Subsequent Hours     | <del>870</del>   | <u>960</u>                |
| 6  | Major Trauma I                  | First Hour           | <del>2,070</del> | <u>2,275</u>              |
| 7  |                                 | Subsequent Hours     | <del>725</del>   | <u>800</u>                |
| 8  | Recovery Room                   | 1st Hour             | <del>680</del>   | <u>750</u>                |
| 9  |                                 | 2nd Add'l Hour       | <del>165</del>   | <u>180</u>                |
| 10 |                                 | 3rd Add'l Hour       | <del>100</del>   | <u>110</u>                |
| 11 | Anesthesia                      | First 1/2 Hour       | <del>540</del>   | <u>595</u>                |
| 12 |                                 | Add'l Minute         | <del>25</del>    | <u>28</u>                 |
| 13 | Laser Treatment                 | Procedure            | <del>1,760</del> | <u>1,940</u>              |
| 14 | <u>Women's Options</u>          | <u>Procedure</u>     |                  | <u>Special Price List</u> |
| 15 | <del>Therapeutic Abortion</del> | <del>Procedure</del> | <del>280</del>   | <del>310</del>            |
| 16 | Trauma Care                     |                      |                  |                           |
| 17 | Admitted/Expired                | Day                  | <del>4,725</del> | <u>5,000</u>              |
| 18 | Treated & Released              | Day                  | <del>2,940</del> | <u>3,115</u>              |
| 19 | Consultation                    | Day                  | <del>790</del>   | <u>835</u>                |
| 20 | Pediatric - Admitted/Expired    | Day                  | <del>1,725</del> | <u>5,000</u>              |
| 21 | Pediatric - Treated & Released  | Day                  | <del>2,940</del> | <u>3,115</u>              |
| 22 | Pediatric - Consultation        | Day                  | <del>790</del>   | <u>840</u>                |
| 23 |                                 |                      |                  |                           |
| 24 | Emergency Clinic                |                      |                  |                           |
| 25 | Level I                         | Room                 | <del>110</del>   | <u>115</u>                |

|    |                                |       |                  |              |
|----|--------------------------------|-------|------------------|--------------|
| 1  | Level II                       | Room  | <del>145</del>   | <u>152</u>   |
| 2  | Level III                      | Room  | <del>465</del>   | <u>490</u>   |
| 3  | Level IV                       | Room  | <del>890</del>   | <u>945</u>   |
| 4  | Level V                        | Room  | <del>1,330</del> | <u>1,410</u> |
| 5  | Level VI                       | Room  | <del>2,695</del> | <u>2,850</u> |
| 6  | Resuscitation                  |       | <del>1,870</del> | <u>1,975</u> |
| 7  |                                |       |                  |              |
| 8  | Psychiatric Emergency Services |       |                  |              |
| 9  | Crisis Intervention – PES      |       | <del>380</del>   | <u>410</u>   |
| 10 | Crisis Stabilization – PES     |       | <del>85</del>    | <u>90</u>    |
| 11 |                                |       |                  |              |
| 12 | General Clinic                 |       |                  |              |
| 13 | Initial                        |       |                  |              |
| 14 | E/M Focused Exam               | Visit | <del>100</del>   | <u>110</u>   |
| 15 | E/M Expanded Exam              | Visit | <del>175</del>   | <u>190</u>   |
| 16 | E/M Detailed Exam              | Visit | <del>200</del>   | <u>215</u>   |
| 17 | E/M Comprehensive Exam         | Visit | <del>275</del>   | <u>290</u>   |
| 18 | E/M Complex Exam               | Visit | <del>340</del>   | <u>360</u>   |
| 19 | Targeted Case Management       | Visit | <del>275</del>   | <u>300</u>   |
| 20 | Established Patient            |       |                  |              |
| 21 | E/M Brief Exam                 | Visit | <del>65</del>    | <u>70</u>    |
| 22 | E/M Focused Exam               | Visit | <del>90</del>    | <u>100</u>   |
| 23 | E/M Expanded Exam              | Visit | <del>120</del>   | <u>130</u>   |
| 24 | E/M Detailed Exam              | Visit | <del>175</del>   | <u>185</u>   |
| 25 | E/M Comprehensive Exam         | Visit | <del>275</del>   | <u>290</u>   |

|    |                                      |       |                |            |
|----|--------------------------------------|-------|----------------|------------|
| 1  | Consultation                         |       |                |            |
| 2  | E/M Focused Consult                  | Visit | <del>90</del>  | <u>95</u>  |
| 3  | E/M Expanded Consult                 | Visit | <del>145</del> | <u>155</u> |
| 4  | E/M Detailed Consult                 | Visit | <del>145</del> | <u>155</u> |
| 5  | E/M Comprehensive Consult            | Visit | <del>190</del> | <u>205</u> |
| 6  | E/M Complex Consult                  | Visit | <del>285</del> | <u>300</u> |
| 7  | Use of Exam Room – <i>Brief Exam</i> | Room  | <del>50</del>  | <u>65</u>  |
| 8  |                                      |       |                |            |
| 9  | Primary Care                         |       |                |            |
| 10 | Initial                              |       |                |            |
| 11 | E/M Focused Exam                     | Visit | <del>100</del> | <u>110</u> |
| 12 | E/M Expanded Exam                    | Visit | <del>130</del> | <u>140</u> |
| 13 | E/M Detailed Exam                    | Visit | <del>190</del> | <u>205</u> |
| 14 | E/M Comprehensive Exam               | Visit | <del>240</del> | <u>255</u> |
| 15 | E/M Complex Exam                     | Visit | <del>375</del> | <u>400</u> |
| 16 | Targeted Case Management             | Visit | <del>200</del> | <u>215</u> |
| 17 | Established Patient                  |       |                |            |
| 18 | E/M Brief Exam                       | Visit | <del>50</del>  | <u>55</u>  |
| 19 | E/M Focused Exam                     | Visit | <del>75</del>  | <u>80</u>  |
| 20 | E/M Expanded Exam                    | Visit | <del>120</del> | <u>130</u> |
| 21 | E/M Detailed Exam                    | Visit | <del>185</del> | <u>205</u> |
| 22 | E/M Comprehensive Exam               | Visit | <del>220</del> | <u>240</u> |
| 23 |                                      |       |                |            |
| 24 | Dental Services                      |       |                |            |
| 25 | Initial Complete Exam                | Visit | <del>45</del>  | <u>50</u>  |

|    |                              |          |                  |             |
|----|------------------------------|----------|------------------|-------------|
| 1  | Periodic Exam                | Visit    | <del>45</del>    | <u>50</u>   |
| 2  | Prophylaxis - Adult          | Visit    | <del>60</del>    | <u>65</u>   |
| 3  | Prophylaxis - Child          | Visit    | <del>55</del>    | <u>60</u>   |
| 4  | Extract Single Tooth         | Visit    | <del>90</del>    | <u>100</u>  |
| 5  | One Surface, Permanent Tooth | Visit    | <del>75</del>    | <u>80</u>   |
| 6  |                              |          |                  |             |
| 7  | Home Health Services         |          |                  |             |
| 8  | Skilled Nursing              | Visit    | 153              |             |
| 9  | Home Health Aide Services    | Visit    | 79               |             |
| 10 | Medical Social Services      | Visit    | 213              |             |
| 11 | Physical Therapy             | Visit    | 175              |             |
| 12 | Occupational Therapy         | Visit    | 175              |             |
| 13 | Speech Therapy               | Visit    | 177              |             |
| 14 |                              |          |                  |             |
| 15 | Laguna Honda Hospital        |          |                  |             |
| 16 | Regular Hospital Rates       |          |                  |             |
| 17 | Acute                        | Day      | <del>1,050</del> | <u>1490</u> |
| 18 | Rehabilitation               | Day      | <del>1,050</del> | <u>1490</u> |
| 19 | Skilled Nursing Facility     | Day      | 360              |             |
| 20 | All Inclusive Rates          |          |                  |             |
| 21 | Acute                        | Per Diem | <del>1,320</del> | <u>1760</u> |
| 22 | Rehabilitation               | Per Diem | <del>1,320</del> | <u>1760</u> |
| 23 | Skilled Nursing Facility     | Day      | 420              |             |
| 24 |                              |          |                  |             |
| 25 |                              |          |                  |             |

|    |                                  |           |                  |              |
|----|----------------------------------|-----------|------------------|--------------|
| 1  | POPULATION HEALTH & PREVENTION   |           |                  |              |
| 2  |                                  |           |                  |              |
| 3  | Community Mental Health Services |           |                  |              |
| 4  | 24-Hour Service                  |           |                  |              |
| 5  | Inpatient                        | 24 Hours  | <del>1,650</del> | <u>1,775</u> |
| 6  | Skilled Nursing                  | 24 Hours  | <del>415</del>   | <u>450</u>   |
| 7  | Crisis Residential               | 24 Hours  | 260              |              |
| 8  | Residential                      | 24 Hours  | 130              |              |
| 9  | Day Services                     |           |                  |              |
| 10 | Rehabilitation                   | Full Day  | 110              |              |
| 11 | Intensive                        | Full Day  | 190              |              |
| 12 | Intensive (children)             | Half Day  | 200              |              |
| 13 | Crisis Socialization             | Hour      | 75               |              |
| 14 | Crisis Stabilization             | Hour      | <del>85</del>    | <u>90</u>    |
| 15 | Socialization                    | Hour      | 30               |              |
| 16 | Outpatient Services              |           |                  |              |
| 17 | Case Management Brokerage        | Hour      | 105              |              |
| 18 | Mental Health Services           | Hour      | 150              |              |
| 19 | Medication Support               | Half Hour | 130              |              |
| 20 | Crisis Intervention              | Hour      | 240              |              |
| 21 |                                  |           |                  |              |
| 22 | Community Substance Abuse        |           |                  |              |
| 23 | Residential - Detoxification     | 24 Hours  | <del>85</del>    | <u>92</u>    |
| 24 | Residential - Basic              | 24 Hours  | <del>84</del>    | <u>88</u>    |
| 25 | Residential - Family             | 24 Hours  | <del>146</del>   | <u>147</u>   |



|   |                               |              |                |            |
|---|-------------------------------|--------------|----------------|------------|
| 1 | Residential - Medical Support | 24 Hours     | <del>207</del> | <u>217</u> |
| 2 | Recovery Home                 | 24 Hours     | <del>70</del>  | <u>74</u>  |
| 3 | Therapeutic Community         | 24 Hours     | <del>80</del>  | <u>84</u>  |
| 4 | Outpatient (include Detox)    | Per Contract | <del>108</del> | <u>113</u> |
| 5 | Methadone Treatment           | Hour         | <del>26</del>  | <u>27</u>  |
| 6 | Naltrexone Treatment          | Per Contract | <del>45</del>  | <u>47</u>  |
| 7 | Prevention/Intervention       | Hour         | <del>52</del>  | <u>55</u>  |
| 8 | Day Care - Habilitative       | Per Contract | <del>112</del> | <u>118</u> |

9

10 Records and Statistics

|    |   |                  |                               |                  |
|----|---|------------------|-------------------------------|------------------|
| 11 | Birth Record  |                  | Rates Per State of California |                  |
| 12 | Death Record  |                  | Rates Per State of California |                  |
| 13 | Permit - Disposition of Human Remains                       |                  | Rates Per State of California |                  |
| 14 | Passport Application  | Per Application  | 15                            |                  |
| 15 | Passport Photo  | Per 2 Photos     | 15                            |                  |
| 16 | Apostille Walk-thru   |                  |                               |                  |
| 17 | Same Day – Initial Request per Client                       | Per Apostille    | 40                            |                  |
| 18 | Same Day _ Add'l Request per Client                         | Per Apostille    | 20                            |                  |
| 19 | Out-of-Country Certificate                                  | Per Certificate  |                               | Market Rate + 10 |
| 20 | Certificate Embossing                                       | Per Embossing    | 5                             |                  |
| 21 | Death Certificate FAX Filing Fee – Mortuary (Under Contact) |                  |                               |                  |
| 22 | Per Reviewed Submission                                     | Per Submission   | <del>4</del>                  | <u>5</u>         |
| 23 | Per Accepted Certificate                                    | Per Certificate  | <del>7</del>                  |                  |
| 24 | Contract Change Order                                       | Per Change Order | 95                            |                  |
| 25 | National Adoption Resources Booklet                         | Per Booklet      | 2                             |                  |

|   |   |                  |           |           |
|---|---|------------------|-----------|-----------|
| 1 | Letter of Non-Contagious Disease                  | Per Letter       | 7         |           |
| 2 | Document / Certificate Will-Call                  | Per Document     | 5         |           |
| 3 | <u>Search of Historical Records (Pre 4/17/06)</u> | <u>Per Book</u>  | <u>15</u> | <u>15</u> |
| 4 | <u>Expedited Registration of Vital Events</u>     | <u>Per Event</u> | <u>40</u> | <u>40</u> |

5

6 Department of Public Health

7

|    |   |                 |   |                   |
|----|---|-----------------|---|-------------------|
| 8  | Electronic / Internet Transaction Fee   | Per Transaction | 5 |                   |
| 9  | Telephone / FAX Transaction Fee         | Per Transaction | 5 |                   |
| 10 | Expedited Delivery of Documents         |                 |   |                   |
| 11 | Regular Delivery - U.S. & International | Per Delivery    |   | Market Rate + \$5 |
| 12 | Same Day - Greater Bay Area             | Per Delivery    |   | Market Rate + \$5 |

13

14 Adult Immunization Clinic

15

|    |                |               |           |                    |
|----|----------------|---------------|-----------|--------------------|
| 16 | Vaccines       |               |           |                    |
| 17 | Hepatitis A    | Per Injection | 42        |                    |
| 18 | Hepatitis B    | Per Injection | 50        |                    |
| 19 | Influenza      | Per Injection | <u>15</u> | <u>16</u>          |
| 20 | Other Vaccines | Per Injection |           | Special Price List |

21

22 APPROVED AS TO FORM:

23 DENNIS J. HERRERA, City Attorney

24

25 By:   
 ANN ALPERS  
 Deputy City Attorney



# City and County of San Francisco

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

## Tails Ordinance

---

**File Number:** 021073

**Date Passed:**

Ordinance amending Article 3 of the San Francisco Health Code by amending Section 128 to set patient rates for services furnished by the Department of Public Health, effective July 1, 2002.

---

July 1, 2002 Board of Supervisors — PASSED, ON FIRST READING

Ayes: 11 - Ammiano, Daly, Gonzalez, Hall, Leno, Maxwell, McGoldrick,  
Newsom, Peskin, Sandoval, Yee

July 8, 2002 Board of Supervisors — FINALLY PASSED

Ayes: 11 - Ammiano, Daly, Gonzalez, Hall, Leno, Maxwell, McGoldrick,  
Newsom, Peskin, Sandoval, Yee

