



**ORDER OF THE HEALTH OFFICER No. C19-15d**

**ORDER OF THE HEALTH OFFICER  
OF THE CITY AND COUNTY OF SAN FRANCISCO REQUIRING CERTAIN  
HEALTHCARE FACILITIES WITHIN THE CITY TO OFFER AND CONDUCT SARS-  
CoV-2 TESTING**

DATE OF ORDER: August 19, 2021

**Please read this Order carefully. Violation of or failure to comply with this Order is a misdemeanor punishable by fine, imprisonment, or both. (California Health and Safety Code § 120295, *et seq.*; California Penal Code §§ 69, 148(a)(1); and San Francisco Administrative Code § 7.17(b).)**

Summary: San Francisco is currently experiencing a surge in new COVID-19 cases and an increase in hospitalizations, mostly among people who are not fully vaccinated, due to the highly contagious Delta variant. Future surges may occur due to other variants. In some instances, individuals who are fully vaccinated have been infected by breakthrough infections and are showing symptoms, though nearly no fully-vaccinated individuals have required hospitalization. Most COVID-19 infections are caused by people who have no symptoms of illness. The best way to address the current surge and future surges or variants is for everyone who is eligible to get fully vaccinated as soon as possible, to continue to wear a well-fitting mask when indoors in most settings if required to do so, to show proof of vaccination as required by entities and businesses or by another order of the Health Officer, and to quarantine or isolate after potential exposure to COVID-19 or onset of symptoms as required by the Health Officer's directive. An essential part of addressing this surge and future variants is ongoing access of the public to accurate and prompt diagnostic testing by providers of healthcare. The ongoing importance of testing, in addition to the wide availability of effective COVID-19 vaccines, requires that providers of healthcare in the City, and especially larger providers of such care such as hospitals and large medical groups, increase and maintain the availability of testing for their patients.

Accordingly, this Order has three key requirements.

First, it requires each Healthcare Facility, as that term is defined by the Order, in the City to conduct Testing for SARS-CoV-2 by the next calendar day (or the next business day in some situations) in order to support rapid diagnosis of those who have an infection and must isolate in order to protect the community, the return to in-person learning, and the economy. Only larger facilities or those with the ability to conduct tests as outlined by this Order are required to meet these testing requirements, including: acute care hospitals; any facility, clinic, or office that is owned by an entity that owns an acute care hospital; and large practice or "medical groups" that have more than 100 licensed healthcare professionals.

Second, each Healthcare Facility that is subject to the testing requirement of the Order must take the following steps to ensure that it is quickly ramping up and maintaining testing. It must submit a plan to the Health Officer through the San Francisco Department of Public Health ("DPH") no later than August 27, 2021, outlining how it will meet the Order's testing



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requirements. It must thereafter submit to DPH every two weeks a testing access report that describes the percentage of the Healthcare Facility's patients that receive a test within 24 hours (or the next business day for an office or clinic that is not open seven days a week) and the percentage of patients that receive their test results within 48 hours of sample collection. For both reporting requirements, Healthcare Facilities are strongly urged to achieve 24-hour testing and 48-hour test result turnaround for 90 percent of all patients that receive Testing. The Health Officer may revise the information required to be provided in the testing access report and, for facilities that are providing sufficient Testing access, scale back or eliminate the reporting requirement. And any Healthcare Facility that is unable to routinely meet the 90 percent threshold goals must notify the Health Officer via email of the reasons for the delays in testing and what steps they are taking to address any delays.

Third, such Healthcare Facilities must notify patients through websites or online patient portals, and also when feasible through signs in patient care areas, of the availability of such Testing, and are required to report test results as required by law. Healthcare Facilities must also reach out to all patients to provide information on how and where to get tested, to note that there is no co-pay for testing, and to provide other listed information. If patients believe that Healthcare Facilities are not meeting their obligations under this Order, they can report concerns via the Healthcare Facility's own call center, complaint line, ombudsperson, or help desk.

This Order goes into effect immediately on issuance, and its requirements are operative at 12:01 a.m. on August 27, 2021. Healthcare Facilities are urged to comply with the new requirements before that date. The Order will remain in effect, without a specific expiration date, for so long as the threat of the pandemic continues, or until this Order is otherwise extended, rescinded, superseded, or amended in writing by the Health Officer.

**UNDER THE AUTHORITY OF CALIFORNIA HEALTH AND SAFETY CODE  
SECTIONS 101040, 101085, AND 120175, THE HEALTH OFFICER OF THE CITY AND  
COUNTY OF SAN FRANCISCO ORDERS:**

1. Intent. The intent of this Order is to ensure that people have access to and receive Testing, as defined in Section 9 below, within the City and County of San Francisco (the "City") in order to effectively prevent and control the spread of COVID-19 in our community. Expansion of Testing is essential because it helps identify people who have SARS-CoV-2 (the virus that causes COVID-19), ensures those people receive appropriate care, protects vulnerable populations, contains the spread of COVID-19 through case investigation and contact tracing, facilitates better understanding of the spread of the disease (including any new variants) in the City, ultimately prevents serious illness and death, and supports the ongoing operation of both key essential services like skilled nursing facilities and primary and secondary education as well as the broader economy. As of the effective date and time of this Order listed in Section 14 below, each Healthcare Facility as defined in Section 9 is required to follow the provisions of this Order. This Order is based on evidence of continued community transmission of SARS-CoV-2 within the City as well as scientific evidence and best practices to prevent transmission of COVID-19, including as new variants arise. The Health Officer will continue to monitor data regarding the evolving scientific understanding of the risks



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posed by COVID-19, including the impact of vaccination, and may amend or rescind this Order based on analysis of that data and knowledge.

2. Testing Requirements for Healthcare Facilities. Each Healthcare Facility in the City must provide Testing to people who seek care—whether in-person or by remote methods such as telephone, video encounter, or electronic message—through the Healthcare Facility. For all Testing, each Healthcare Facility is encouraged to provide access to the testing without the need for an in-person clinical visit whenever appropriate. By way of example, patients who seek to be tested and who have no symptoms or who have mild symptoms after being a close contact could be scheduled for a test directly via website, telephone, or other consultation mechanism without first requiring a telehealth visit or interaction with a provider via a patient portal for a provider’s referral.

By way of clarification, no Healthcare Facility is required by this Order to offer testing to someone in a non-emergency context when that person is not already a patient of the Healthcare Facility unless the office or clinic routinely accepts walk-in or new patients or provides urgent or emergency care and the person seeking care fits the standard criteria for being seen by that office or clinic.

3. High-Priority Testing Recommendations for Healthcare Facilities and Other Healthcare Providers. Separate from any Testing required by Section 2 of this Order, each Healthcare Facility in the City and all providers of healthcare in the City who are authorized by law to order Testing are strongly encouraged, upon patient request, to provide or order Testing. Each such provider of healthcare should order or provide Testing whenever capacity allows and take all reasonable steps to obtain necessary testing-related supplies. This Order does not require any individual healthcare provider that is not part of a Healthcare Facility to collect specimens for Testing.
4. Testing Timeframes. For any patient described in Section 2 above, the Healthcare Facility that is providing care to the patient must provide the Testing either on the same day the patient presents for care or the following calendar day. In the event a patient described in Section 2 presents for care via telehealth or other remote methods, the Healthcare Facility must conduct or otherwise cause to be provided Testing no later than the end of the calendar day following the remote visit.

For any Healthcare Facility-associated office or clinic that is not open seven days a week, this Section 4 does not require that testing be provided by that office or clinic on any day that the office or clinic is closed in relation to tests that are required to be provided by the next day. In such instances, the testing may be provided on the next business day so long as each of the following conditions is met: 1) the patient is given a time on the next business day when they can receive a test from the office or clinic or an affiliated facility; and 2) the patient is provided information on who to contact in the event of an emergency or if symptoms worsen before the test is performed. This Order recommends that each office or clinic that is not open seven days a week and that has other affiliated offices or clinics that are open on weekends or evenings accommodate testing for any patient on the next calendar day when possible if testing is required by this Order.



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The Healthcare Facility providing Testing under this Section 4 must make all reasonable efforts to conduct the testing within the listed timeframe, and if the context is such that the Healthcare Facility is unable to routinely meet the 90 percent threshold goals described in Section 8, the Healthcare Facility, but not each individual provider, must within 48 hours notify the Health Officer via email (sent to [sfprephcc@sfdph.org](mailto:sfprephcc@sfdph.org) with “Health Officer Order No. C19-15” in the subject) of the reasons for the delays in testing and what steps it has taken to resolve the delays.

5. Billing and Financial Responsibilities. The billing and financial responsibilities of Healthcare Facilities are guided by their own arrangements or contracts with the insurance plan or payor they contract with (if any) and with the labs they use. This Order does not alter those arrangements or contracts.
6. Patient Notification Requirements. Healthcare Facilities must publicize information to patients through their standard communication channels and methods as to how patients can access Testing. Healthcare Facilities that have a public- or patient-facing website or other information portal must post information on that website or through that portal about how patients can access Testing from the Healthcare Facility and how to report violations of this Order as outlined in Section 15 below. Each Healthcare Facility should also, when feasible, conspicuously post a notice detailing for patients the availability of Testing in areas visible to all patients, such as in patient waiting areas and exam or treatment rooms, in order to ensure that patients understand they may access Testing.

Healthcare Facilities must also provide patients receiving Testing with information regarding best isolation or quarantine practices upon a positive test result to ensure symptomatic individuals isolate until clinical interpretation of diagnostic results rules out COVID-19 and to ensure close contacts quarantine for 14 days regardless of diagnostic result. Information that may be used for this purpose, including a description of exceptions to this 14-day quarantine requirement and translated versions of the information, is available online at [www.sfdcp.org/i&q](http://www.sfdcp.org/i&q).

Healthcare Facilities must also send out a new notice to patients via its standard patient communication methods (patient portal, mail, email, and/or text message) advising patients of the following: that all patients are entitled to receive COVID-19 testing; how and where to be tested; that there are no co-pay requirements for Testing consistent with state and federal laws and rules; how to report violations of this Order as outlined in Section 15 below; and other testing-related information including the times of testing operations, the required timeframes for scheduling tests, and how to schedule a test. This new notice must be sent out no later than August 27, 2021.

Healthcare Facilities and all other providers of healthcare in the City are strongly encouraged to provide information and notices in the patient’s preferred language.

All other providers of healthcare in the City are strongly encouraged to follow these patient notification requirements in relation to Testing of patients.



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7. Compliance with Reporting Requirements. Healthcare Facilities in the City must, as applicable, continue to comply with the reporting requirements regarding testing results required or requested by the Health Officer and any reporting required by state and federal law.
8. Healthcare Facility Initial Plan and Routine Testing Capacity Reporting. Each Healthcare Facility must do each of the following.

First, no later than August 27, 2021, the Healthcare Facility must provide to the Health Officer by email (sent to [sfprephcc@sfdph.org](mailto:sfprephcc@sfdph.org) with “Health Officer Order No. C19-15 Initial Plan” in the subject) a written plan outlining how it will ramp up and maintain Testing in order to meet the requirements of this Order. The initial plan must include a list of the total amount of Testing (the number of tests) conducted by the Healthcare Facility in the preceding two weeks, the percentage of patients that receive a test within 24 hours (or the next business day for an office or clinic that is not open seven days a week) and the percentage of patients that receive their test results within 48 hours of sample collection, and an estimate of its capacity to conduct additional Testing. The initial plan must also include a sample of the notices required under Section 6 above.

Second, on an ongoing basis every two weeks after providing the initial plan, the Healthcare Facility must provide to the Health Officer by email (sent to [sfprephcc@sfdph.org](mailto:sfprephcc@sfdph.org) with “Health Officer Order No. C19-15 Testing Report” in the subject) a report outlining Testing access, including the percentage of patients that receive a test within 24 hours (or the next business day for an office or clinic that is not open seven days a week) and the percentage of patients that receive their test results within 48 hours of sample collection. For both reporting requirements, Healthcare Facilities are strongly urged to achieve 24-hour testing and 48-hour turnaround for 90 percent of all patients that receive Testing. For facilities that are providing sufficient Testing access, the Health Officer may scale back or eliminate the reporting requirement.

Each Healthcare Facility must also provide any information requested by the Health Officer or DPH in relation to Testing.

9. Definitions: For the purposes of this Order, the following initially capitalized terms have the meanings given below:
  - (a) “Testing” means the use of a diagnostic test to detect SARS-CoV-2 using a test that is approved or has emergency use authorization for diagnosis by the United States Food and Drug Administration, including “molecular” or nucleic acid amplification tests—such as polymerase chain reaction (“PCR”) or loop-mediated amplification (“LAMP”) testing—or antigen tests. All processing of tests must be conducted by a lab that meets the requirements to perform testing classified as high complexity under the Clinical Laboratory Improvement Amendments (“CLIA”) of Section 353 of the Public Health Service Act (including but not limited to having a CLIA waiver to perform such tests). Any lab that processes tests must also submit all results (not just positive results) via the State of



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California's California Reportable Disease Information Exchange ("CalREDIE") system as required by California law or any replacement to that system adopted by the State of California.

- (b) "Healthcare Facility" means any facility located in the City that provides healthcare and that is any of the following:
- i. An acute care hospital, including but not limited to an emergency room, any inpatient units, and any on-site ambulatory care clinics;
  - ii. A clinic, office, or urgent care facility that is owned, directly or indirectly, by any entity (non-profit, religious, governmental, for-profit, or otherwise) that also owns and operates an acute care hospital, regardless of where that acute care hospital is located; or
  - iii. Part of a practice or "medical group" of affiliated physicians and other healthcare providers where the overall group has at least 100 licensed healthcare providers (such as doctors, registered nurses, physicians assistants, or others), regardless of where those healthcare providers are located.

Note that any other clinic, office, or other care facility not already listed in subsections (i) through (iii) above that provides healthcare and that either (A) already administers diagnostic testing to patients and can be reimbursed for that testing under California regulations or (B) already orders diagnostic testing to be performed by another entity is strongly encouraged to offer Testing as outlined in this Order.

- (c) "COVID-19 Symptom" means a symptom consistent with SARS-CoV-2 infection, as listed the guidance issued by the CDC and available online at [www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/symptoms.html](http://www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/symptoms.html).

10. Continuing Severe Health and Safety Risk Posed by COVID-19. This Order is issued based on the need for increased testing to detect COVID-19 and SARS-CoV-2 infections within the City. Due to the outbreak of the COVID-19 virus in the general public, which is a pandemic according to the World Health Organization, there is a public health emergency throughout the City. Adequate Testing is essential to detect both symptomatic and asymptomatic transmission of the virus, provide appropriate treatment for infected patients, be able to identify cases and isolate them, identify contacts of cases and quarantine them, thereby slow virus transmission as much as possible in order to protect the most vulnerable, prevent infections and serious illness and death, prevent the healthcare system from being overwhelmed, and support the return and ongoing operation of key essential services like skilled nursing facilities and primary and secondary education. Testing is also an essential tool in the City's mitigation efforts in order to understand the prevalence and spread of the disease in the City. One proven way to slow transmission is to identify sources of infection and isolate or quarantine close



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contacts of those sources before further outbreak occurs. Conducting broader testing provides greater opportunity to react to positive cases quickly enough to stop uncontrollable transmission. Broad testing also increases the availability of invaluable data used to better understand and combat COVID-19 and the virus that causes it.

11. COVID-19 Health Indicators. The City will continue to make publicly available on its website updated data on COVID-19 case rates, hospitalizations and vaccination rates. That information can be found online at [sf.gov/resource/2021/covid-19-data-and-reports](https://sf.gov/resource/2021/covid-19-data-and-reports). The Health Officer will monitor this data, along with other data and scientific evidence, in determining whether to modify or rescind this Order, as further described in Section 1 above.
12. Incorporation of State and Local Emergency Proclamations and Federal and State Health Orders. The Health Officer is issuing this Order in accordance with, and incorporates by reference, the emergency proclamations and other federal, state, and local orders and other pandemic-related orders described below in this Section. But this Order also functions independent of those emergency proclamations and other actions, and if any State, federal, or local emergency declaration, or any State or federal order or other guidance, is repealed, this Order remains in full effect in accordance with its terms.
  - (a) State and Local Emergency Proclamations. This Order is issued in accordance with, and incorporates by reference, the March 4, 2020 Proclamation of a State of Emergency issued by the Governor, the February 25, 2020 Proclamation by the Mayor Declaring the Existence of a Local Emergency, and the March 6, 2020 Declaration of Local Health Emergency Regarding Novel Coronavirus 2019 (COVID-19) issued by the Health Officer, as each of them have been and may be supplemented.
  - (b) State Health Orders. This Order is also issued in light of the various Orders of the State of California, including, but not limited to, those of the State's Public Health Officer, the California Department of Public Health, and Cal/OSHA. The State has expressly acknowledged that local health officers have authority to establish and implement public health measures within their respective jurisdictions that are more restrictive than those implemented by the State Public Health Officer.
13. Obligation to Follow Health Officer Orders and Directives and Mandatory State Guidance.

In addition to complying with all provisions of this Order, all individuals and entities must also follow any applicable orders and directives issued by the Health Officer (available online at [www.sfdph.org/healthorders](https://www.sfdph.org/healthorders) and [www.sfdph.org/directives](https://www.sfdph.org/directives)) and any applicable mandatory guidance issued by the State Health Officer or California Department of Public Health. To the extent that provisions in the orders or directives of the Health Officer and the mandatory guidance of the State conflict, the more restrictive provisions (*i.e.*, the more protective of public health) apply.



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14. Effective Date. This Order becomes effective immediately on issuance, and its requirements are operative at 12:01 a.m. on August 27, 2021. Healthcare Facilities are urged to comply with the new requirements before that date. The Order will continue to be in effect until it is extended, rescinded, superseded, or amended in writing by the Health Officer.
15. Reporting Violations. Any person who believes this Order is being violated may contact the Healthcare Facility's help desk, complaint line, ombudsperson, or call center to provide information about the alleged violation. Each Healthcare Facility that is required to conduct Testing under this Order must track and respond to violations reported through its help desk, complaint line, ombudsperson, or call center and must investigate and respond to such complaints. The Health Officer may request from the Healthcare Facility an accounting of complaints and responses.
16. Copies. The City must promptly provide copies of this Order as follows: (1) by posting on the Department of Public Health website at [www.sfdph.org/healthorders](http://www.sfdph.org/healthorders); (2) by posting at City Hall, located at 1 Dr. Carlton B. Goodlett Pl., San Francisco, CA 94102; and (3) by providing to any member of the public requesting a copy. In addition, the owner, manager, or operator of any facility, business, or entity that is likely to be impacted by this Order is strongly encouraged to post a copy of this Order onsite and must provide a copy to any member of the public asking for a copy.
17. Severability. If any provision of this Order or its application to any person or circumstance is held to be invalid, then the remainder of the Order, including the application of such part or provision to other people or circumstances, shall not be affected and shall continue in full force and effect. To this end, the provisions of this Order are severable.
18. Interpretation. All provisions of this Order must be interpreted to effectuate the intent of this Order as described in Section 1 above. The summary at the beginning of this Order as well as the headings and subheadings of sections contained in this Order are for convenience only and may not be used to interpret this Order. In the event of any inconsistency between the summary, headings, or subheadings and the text of this Order, the text will control. Certain initially capitalized terms used in this Order have the meanings given them in Section 9 above.

**IT IS SO ORDERED:**

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Susan Philip, MD, MPH,  
Health Officer of the  
City and County of San Francisco

Date: August 19, 2021