Ordinance amending the Administrative Code to extend the Board of Supervisors’
delegation of authority under Charter, Section 9.118, to the Department of Public Health
to approve managed care contracts to include contracts ending on December 31, 2028;
and to exclude from the requirement of Controller review those managed care
contracts that are based on rates set by the California Department Health Care Services
or on actual healthcare delivery costs.

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

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

Section 1. The Administrative Code is hereby amended by revising Chapter 21A,
Section 21A.3, to read as follows:

(b) Acting under Charter Section 9.118, the Board of Supervisors authorizes the
Director of Health to enter into contracts anticipated to generate over $1 million in
reimbursements or revenue to the City to provide health care services at DPH facilities,
including, but not limited to, primary care, specialty services, hospital services, and behavioral
health services. These contracts may include fee-for-service arrangements, fully capitated
arrangements where DPH receives fixed monthly payments per individual and is financially
responsible for managing health care costs of its patients, or a hybrid of the two. The term of
any such contracts shall terminate no later than December 31, 2025 and shall be subject to the review and approval of the Controller for consistency with the terms of this Section 21A.3. The DPH annual budget shall show the revenues from the contracts as capitation rates or patient fees (collectively, "Rates of Reimbursement"). To be eligible for approval under this Section 21A.3, the contract shall terminate no later than December 31, 2028, and shall be subject to the review and approval of the Controller for consistency with the terms of this Section 21A.3. Notwithstanding the foregoing, the following contracts shall not require Controller review under this subsection (b): (1) contracts for the provision of services to Medi-Cal members, the rates of which are set by the California Department Health Care Services ("DHCS"); and 2) contracts for the provision of services to members of SFHP, such as Healthy Workers Health Maintenance Organization, the rates of which are determined by the actual costs of medical, mental health, and pharmacy services, plus the latest cost inflator as published by the Centers for Medicare & Medicaid.

(c) **Establishing Rates of Reimbursement.**

(1) Rates of Reimbursement for health services in contracts entered into under this Section 21A.3 shall be equal to or higher than either (A) Fee for Service: the California Department Health Care Services ("DHCS") published Medi-Cal fee for service rates, selected and adjusted as needed to align with the pending contract specifications; or (B) Capitated Rates: the average of per-member-per month rates for Medi-Cal managed care for Aid Codes Family and Medi-Cal Expansion, or successor provisions, set by DHCS as authorized by federal and state law.

(2) For the purposes of determining whether the Capitation Rates in contracts are equal to, or exceed the minima specified in subsection (c)(1) of this Section 21A.3, in addition to the gross capitation rates specified by DHCS, the Controller shall consider net payments the City will receive for health services provided by DPH after removing benefit carve outs, capitation splits, and/or administrative fees and other amounts that state law
allows the San Francisco Health Authority SFHP or other provider to withhold, as applicable. For either Fee for Service or Capitated Rate contracts, the Controller has the option of utilizing other relevant comparison rates or benchmarks which may be obtained via outside healthcare expertise, or through additional research by the Office of the Controller.

* * * *

(e) The Director of Health shall provide quarterly reports between September 1, 2015 and December 1, 2025, 2028 to the Health Commission of the contracts approved under this Section 21A.3, and the aggregate amount of reimbursement and revenue generated. The Director of Health shall provide annual reports, no later than September 1, 2015, September 1, 2016, September 1, 2017, September 1, 2018, September 1, 2019, September 1, 2020, September 1, 2021, September 1, 2022, September 1, 2023, September 1, 2024, September 1, 2025, and September 1, 2026, September 1, 2027, and September 2028, to the Mayor and the Board of Supervisors, identifying the contracts approved and the aggregate amount of reimbursement and revenue generated.

Section 2. Effective Date. This ordinance shall become effective 30 days after enactment. Enactment occurs when the Mayor signs the ordinance, the Mayor returns the ordinance unsigned or does not sign the ordinance within ten days of receiving it, or the Board of Supervisors overrides the Mayor’s veto of the ordinance.
Section 3. Scope of Ordinance. In enacting this ordinance, the Board of Supervisors intends to amend only those words, phrases, paragraphs, subsections, sections, articles, numbers, punctuation marks, charts, diagrams, or any other constituent parts of the Municipal Code that are explicitly shown in this ordinance as additions, deletions, Board amendment additions, and Board amendment deletions in accordance with the "Note" that appears under the official title of the ordinance.

APPROVED AS TO FORM:
DAVID CHIU, City Attorney

By: /s/ Virginia Dario Elizondo
VIRGINIA DARIO ELIZONDO
Deputy City Attorney
Ordinance amending the Administrative Code to extend the Board of Supervisors' delegation of authority under Charter, Section 9.118, to the Department of Public Health to approve managed care contracts to include contracts ending on December 31, 2028, and to exclude from the requirement of Controller review those managed care contracts that are based on rates set by the California Department Health Care Services or on actual healthcare delivery costs.

June 15, 2023 Budget and Appropriations Committee - RECOMMENDED

July 11, 2023 Board of Supervisors - CONTINUED ON FIRST READING
Ayes: 10 - Chan, Dorsey, Engardio, Mandelman, Melgar, Peskin, Preston, Safai, Stefani and Walton
Excused: 1 - Ronen

July 18, 2023 Board of Supervisors - PASSED ON FIRST READING
Ayes: 10 - Chan, Dorsey, Engardio, Mandelman, Melgar, Peskin, Ronen, Safai, Stefani and Walton
Noes: 1 - Preston

July 25, 2023 Board of Supervisors - FINALLY PASSED
Ayes: 10 - Chan, Dorsey, Engardio, Mandelman, Melgar, Peskin, Ronen, Safai, Stefani and Walton
Noes: 1 - Preston
I hereby certify that the foregoing Ordinance was FINALLY PASSED on 7/25/2023 by the Board of Supervisors of the City and County of San Francisco.

Angela Calvillo
Clerk of the Board

London N. Breed
Mayor

7/28/23
Date Approved