Dan Bernal President

Laurie Green, M.D. Vice President

Edward A. Chow, M.D. Commissioner

Susan Belinda Christian, J.D. Commissioner

Cecilia Chung Commissioner

Suzanne Giraudo ED.D Commissioner

Tessie M. Guillermo Commissioner

HEALTH COMMISSION CITY AND COUNTY OF SAN FRANCISCO

London N. Breed Mayor Department of Public Health



Grant Colfax, MD Director of Health Mark Morewitz, M.S.W. Executive Secretary

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MINUTES <u>HEALTH COMMISSION MEETING</u> Tuesday August 1, 2023 4:00 p.m. 101 Grove Street, Room 300 San Francisco, CA 94102 & via Webex

1) <u>CALL TO ORDER</u>

- Present: Commissioner Dan Bernal President Commissioner Laurie Green, MD, Vice President Commissioner Edward A. Chow M.D. Commissioner Suzanne Giraudo, Ph.D Commissioner Tessie Guillermo
- Excused: Commissioner Susan Belinda Christian, J.D. Commissioner Cecilia Chung

The meeting was called to order at 4:03pm.

2) APPROVAL OF THE MINUTES OF THE HEALTH COMMISSION MEETING OF JULY 18, 2023.

Public Comment:

Patrick Monette Shaw made verbal comments and submitted the following summary:

These minutes are misleading and deficient. Mr. Pickens commented extensively on 7/18/23 about LHH's Medical Director recruitment, reduced in these minuets to merely "a possible secondary employment [problem]." Pickens espoused 7/18/23 current SNF practice involves part-time employment and split up duties for Medical Directors. That's complete nonsense. Pickens lacks real Long-Term Care experience. LHH isn't a 100-bed "typical Nursing Home"; it's a uniquely complex 780-bed facility with a broad range of patient acuities. Idly comparing other SNF's won't enlighten Pickens about LHH's Medical Director position — which should be a full-time job, given all of LHH's regulatory problems requiring overdue, expert attention. LHH deserves a Board Certified Medical Director who must advocate as MD for patients, and compliance with complex Federal regulations, rather than seeking mindless, obedient toadies for the "Flow Project." Find someone with the background, credentials, and experience to handle this position. They'll be stepping into a fiery furnace.

3) GENERAL PUBLIC COMMENT

Patrick Monette Shaw made verbal comments and submitted the following summary:

During this Public Comment, I'm addressing an issue that is NOT on today's agenda Don't cut me off. During past Health Commission meetings, Roland Pickens stated some other section or division within SFDPH is conducting a study regarding expanding behavioral health beds in San Francisco. What SFDPH entity is conducting this study? Is that working group's meetings open to the public? If not, why not? Per Pickens' previous statements during Commission open session meeting, that work group is reportedly studying and considering whether to use space at Laguna Honda Hospital by placing separate cohorts of patients in LHH's two towers — traditional SNF patients in one Tower, and Behavioral health patients in the other Tower. Which Health Commission subcommittee "commissioned" this study, and which Commission subcommittee will it be presented to? Has that work group issued a report yet? That report should be issued before LHH applies for recertification from CMS.

Robert Reinhard, member of the San Francisco Black and Jewish Unity Coalition, submitted the following written comment:

The San Francisco Black and Jewish Unity Coalition applauds the Director's report announcement on July 18 of new community partnership grants to remove the disparity of overdose deaths affecting the City's Black population. Indeed our group asked for such an effort back in June when we presented remarks on several life expectancy gaps requiring emergency attention. Today we ask that DPH and the Commission to embed milestone evaluation and genuine health improvement metrics into implementation of the new grants to determine how best these actions will save lives or need adjustment to extend life. Thank you for your work and attention.

4) DIRECTOR'S REPORT

Naveena Bobba, Deputy Director of Health, presented the item.

SF'S RESPONSE TO COVID-19 SPREAD RESULTED IN LOWER LEVELS OF MORTALITY AND ILLNESS ACROSS ALL AGES AND ETHNICITIES, NEW STUDY SHOWS

A comprehensive program implementation study, conducted by DPH in partnership with researchers at the University of California, San Francisco (UCSF), has revealed San Francisco implemented one of the most intensive, inclusive and multipronged COVID-19 pandemic responses in the United States, resulting in San Francisco experiencing one of the lowest COVID-19 deaths among larger metropolitan cities overall and across all ages and ethnicities. The study, including lead author Darpun D. Sachdev, MD. and senior author Grant Colfax, MD recently <u>published in *Public Health Reports*</u>, a prominent academic journal, highlights crucial lessons learned including the importance of community responsiveness joint planning, and collective action to inform future pandemic response and advance healthy equity.

In March 2020, during the onset of the COVID-19 outbreak, San Francisco mounted an aggressive four-prong strategy to mitigate the spread of disease in the community and lower incidents of severe illness. The strategy included:

- Aggressive mitigation measures, such as asymptomatic testing of vulnerable populations, masking, and stay-at-home orders.
- Using a health equity lens to prioritize neighborhoods and populations disproportionately impacted, resulting in the accessibility of tests, vaccines, and financial support for these populations.
- Use of timely and adaptive data to determine policy, such as stay-at-home orders and booster recommendations.
- Partnerships and public trust through engaging and providing expansion funding to community-

based organizations (CBOs), holding regular press conferences by the San Francisco Mayor and the DPH Director of Health, launching a COVID-19 dashboard, maintaining consistent communications across Bay Area counties, and centralizing resources through partnerships with other hospitals.

The study mapped population health outcomes to these strategies, showing a strong correlation between pandemic response and lower rates of transmission, reduced number of hospital patients, and lower mortality.

As of 2022, San Francisco had the lowest number of COVID-19 deaths among large metropolitan cities in the United States, with 98 per 100,000 residents, compared to 229 COVID-19 deaths per 100,000 in the state of California and 301 per 100,000 in the entire US population. Though mortality rates remained low, the study notes that Zuckerberg San Francisco General Hospital was significantly impacted by COVID-19, stretching the limits of the hospital's resources and staff.

DPH remains committed to sustaining vital partnerships with communities to ensure COVID-19 resources, such as testing and vaccinations, remain available to those most in need even as the landscape shifts from an emergency response to long-term recovery.

LAGUNA HONDA HOSPITAL RECERTIFICATION

The 90-day Centers for Medicare & Medicaid Services (CMS) Monitoring Survey #3 took place in June, resulting in 33 findings. This is a significant improvement from the first 90-day monitoring survey which had 124 findings. Laguna Honda has made significant strides in making the changes necessary to be recertified in the Medicaid and Medicare programs.

As required by the settlement agreement, the CMS appointed Quality Improvement Expert (QIE) developed a Root Cause Analysis to address the findings in the June Monitoring Survey #3, as well as Root Cause Analyses for other non-monitoring-survey regulatory findings.

As a result of the Root Cause Analyses for the June Monitoring Survey #3 and other non-monitoring-survey regulatory findings, two proposed Action Plans were developed by LHH. The proposed Action Plan for Monitoring Survey #3 has approximately 290 milestones, while the proposed Action Plan for the non-monitoring-survey findings has approximately 85 milestones, many of which are underway.

The proposed Action Plans build on the improvement work that has happened so far, and continues to ensure that Laguna Honda achieves the highest quality of care for its residents through ongoing improvement work. We are awaiting CMS approval of the proposed Action Plans. Our goal is to have all Action Plan milestones completed by September 1 so that Laguna Honda is recertification ready.

CDPH HEALTH AT HOME RELICENSING SURVEY COMPLETION

DPH recently underwent a re-licensing survey of its Health at Home program. The survey, conducted over seven days, focused on assessing compliance with regulatory standards and the quality of patient care. We are proud to announce that the survey results were incredibly positive, reflecting our exceptional team's unwavering commitment and dedication.

After six years without a survey, due to the pandemic and other limiting circumstances within the California Department of Public Health (CDPH), we have achieved an outstanding milestone and had only three minor deficiencies, which surpasses our previous performance and demonstrates our dedication to delivering exceptional healthcare services.

Health at Home staff and leaders were commended for their ability to meet the needs of the patients even throughout the pandemic and for supporting patients who are uninsured and have limited resources. These remarkable results are a testament to every team member's hard work and collaborative spirit. Building on this success, we remain committed to continuous improvement and meeting the evolving needs of our patients and community.

DPH'S CENTER FOR LEARNING & INNOVATION (CLI) PRODUCES DOCUMENTARY, "HEART OF ACCESS" TO HIGHLIGHT THE COMMUNITY-DRIVEN COVID-19 EQUITY RESPONSE

Supported by the CDC Epidemiology and Laboratory Capacity (ELC) and Public Health Infrastructure grants, the Center for Learning & Innovation of DPH's Population Health Division partnered with OLU8 Film and Culture and AllThrive Education to produce and distribute a short documentary film describing the community, academic, and public health partnerships at the center of San Francisco's COVID-19 equity response. *The Heart of Access, San Francisco's Fight for Health Equity during the COVID-19 Pandemic* will premier in August and September at three community screenings hosted by the collaborating community-based organizations featured in the film. In addition, we are pleased to share the documentary was selected for screening at the American Public Health Association Public Health Film Festival in November. To watch the trailer, visit http://heartofaccessfilm.org/

UPCOMING TRAUMA INFORMED SYSTEMS TRAINING OPPORTUNITY

On August 15th, DPH staff are invited to attend a Mindfulness and Emotional Intelligence training:

Trauma Informed Systems Presents: Search Inside of yourself Leadership Institute Training

> August 15, 2023 9:00 A.M - 5:00 P.M. 25 Van Ness, Ste 610

Find out more by visiting: <u>my.siyli.org/j/ndQCm</u>

COVID-19 UPDATE

As of 7/27:

- San Francisco's 7-day rolling average of new COVID cases per day is 28.*
- Eighty-six percent of all SF residents have been vaccinated and 65% have received booster dose(s). Forty-one percent of residents have received a bivalent booster.

*We are temporarily pausing the distribution of hospitalization data while CDPH makes updates to the hospitalization data reporting stream. We plan to re-integrate this data once system updates are complete.

DPH in the News

Public Comment:

Patrick Monette Shaw made verbal comments and submitted the following summary:

The "*Director's Report*" Ms. Bobba just presented for Dr. Colfax stated in the written background file posted on-line, that the third "90-Day Monitoring Survey" and another non-monitoring-survey, both conducted during June, identified approximately 290 additional monitoring-survey milestones, plus 85 non-monitoring-survey milestones — for a total of 375 additional milestones **after** 5/13/2023. Those

Health Commission August 1, 2023 Page 4 new 375 milestones reportedly must be accomplished by 9/1/2023 — ostensibly in the now onemonth period between 8/1/2023 and 9/1/2023. This doesn't bode well for the recertification application being submitted to CMS in "the summer," as has vaguely been long promised. During this Commission's 6/20/2023 meeting, Mr. Pickens stated LHH initially had 320 "Action Plan" milestones, which mushroomed to over 520 milestones by the time all milestones were to be completed by 5/13/2023. Now, LHH is back up to having another 400 milestones to fix, and importantly demonstrate are being "sustained." Release "Root Casuse Analysis" Reports #5 and #6 now!

Dr. Teresa Palmer made verbal comments and submitted the following summary:

The huge shortage of Medi-Cal nursing home/SNF beds in SF makes all LHH beds indispensable. The people of San Francisco cannot afford any more needless deaths from evictions, and out of county transfers due to lack of beds in San Francisco must stop.

1.Since this report was published July 28, has CMS approved the Action Plan (essential to recertification)? If not, have there been any negotiations with CMS about revision of the Action Plan?
2. Has the State/CDPH made any information available about the August 31 July 31 eviction & closure plan (for Sept 19 2023) CMS has required it to create ?

3.Has CMS clarified any conditions under which the September 19 deadline to begin evictions and closure will be delayed? At the rate things are going, full recertification is unlikely by that date, and <u>the May 18 CMS letter</u> said there would be no more extensions of the deadline.

Carol Bettencourt submitted the following written public comment:

I am concerned, the huge shortage of Medi-Cal nursing home/SNF beds in SF makes all LHH beds indispensable. We cannot afford any more needless deaths from evictions, and out of county transfers due to lack of beds in San Francisco must stop. We are running out of time. Has CMS approve the Action Plan? If not, have there been any negotiations with CMS about revision of the Action Plan? Has CDPH made any information available about the August 31 eviction & closure plan CMS required it to create? Has CMS clarified any conditions under which the September 19 deadline to begin evictions and closure will be delayed? At the rate things are going, full recertification is unlikely by that date, and the May 18 CMS letter said there would be no more extensions of the deadline.

Commissioner Comments:

Commissioner Green stated that it is wonderful that an additional star has been awarded to ZSFG. She noted that stars are awarded based on data that is several years old.

Commissioner Bernal congratulated DPH staff involved in the "The Heart of Access" documentary.

5) <u>RESOLUTION PURSUANT TO SECTIONS 4.102 AND 4.110 OF THE CHARTER OF</u>

THE CITY AND COUNTY OF SAN FRANCISCO AUTHORIZING LAGUNA HONDA HOSPITAL AND REHABILITATION CENTER TO APPLY TO THE CENTERS FOR MEDICARE AND MEDICAID SERVICES MEDICARE AND/OR MEDICAID PROGRAMS FOR SKILLED NURSING FACILITY AND/OR NURSING FACILITY PROVIDER STATUS AND RECERTIFICATION AS A DISTINCT PART NURSING FACILITY AND/OR SKILLED NURSING FACILITY

Roland Pickens, MHA, FACHE, Director/CEO, San Francisco Health Network & Executive Sponsor, Laguna Honda Hospital Recertification Incident Command, presented the item.

Public Comment:

Patrick Monette Shaw submitted the following written comments regarding the May 16, 2023 minutes: The second to-last "Further Resolved" clause in this proposed Resolution #23-06 is concerning when it says the Commission approves of LHH applying to become recertified as a dual-certified distinct part SNF and NF. This Commission should explain publicly how "**dual-certified** distinct-part SNF and NF" may differ from a "distinct-part NF" or a "distinct-part SNF." LHH's State license is specifically for a 769-bed "Skilled nursing [facility]." Will LHH submit its application for recertification immediately after adoption of this Resolution today? Alternatively, will the application actually be submitted by 9/1/2023? Either way, this Commission should tell members of the public today what the planned date is that the application will actually be submitted. Is there a plan to split SNF care and NF care at LHH, or use LHH's beds for non-SNF/non-NF purposes? Despicably, you took this agenda item out of order, at the **start** of today's meeting, depriving other public commenters.

Dr. Teresa Palmer made verbal comments and submitted the following summary:

Is there ANY plan to jettison either SNF care or NF care at Laguna Honda? Is there a plan to use LHH beds for non SNF/NF purposes? There is a dire shortage of both types of beds (SNF/NF) in San Francisco, and the shortage of Medi-Cal NF beds is the most dire. The people of San Francisco cannot afford to lose any more SNF/NF beds and all LHH beds must be recertified for SNF/NF use. Will the submission of a recertification application by Sept 1 lead to a delay of the Sept 19 date when CMS dictates that deadly eviction and closure procedures must begin? When will Laguna Honda/SFDPH apply to CDPH/CMS for a waiver of the 120 bed cut (based on ratio of bedrooms to shared bathroom)? These beds are all badly needed by the people of San Francisco, and the architecture is modern and safe.

Carol Bettencourt submitted the following written public comment:

Is there ANY plan to jettison either SNF care or NF care at Laguna Honda? Is there a plan To use LHH beds for non-SNF/NF purposes? There is a dire shortage of both types of beds (SNF/NF) in San Francisco, and the shortage of Medi-Cal NF beds is the most dire. We cannot afford to lose any more SNF/NF beds and all LHH beds must be recertified for SNF/NF use. Will the submission of a recertification application by Sept 1 lead to a delay of the Sept 19 date when CMS dictates that eviction and closure procedures must begin? When will Laguna Honda/SFDPH apply to CDPH/CMS for a waiver of the 120 bed cut (based on ratio of bedrooms to shared bathroom)? These beds are all badly needed by the people of San Francisco, and the architecture is modern and safe.

Commissioner Comments:

Commissioner Guillermo is thankful to all LHH staff and leaders for getting to this point of readiness for recertification.

Commissioner Chow commended the LHH team for its performance on the last survey, which indicates more readiness for applying for recertification.

Commissioner Bernal noted that LHH staff and leaders have shown commitment to LHH residents through their hard work during the recertification process. He noted the Health Commission is grateful to all LHH staff, LHH leaders, Mr. Pickens, and Dr. Naveena Bobba.

Action Taken: The Health Commission unanimously approved the resolution. (See attachment.)

6) HEALTH INFORMATION TECHNOLOGY QUARTERLY REVIEW

Eric Raffin, DPH CIO, presented the item.

Commissioner Comments:

Commissioner Giraudo asked if there is a cost for institutions to participate in the data exchange framework. Mr. Raffin stated that if the DPH needs to connect to a different provider for exchange of services then there may be a participation fee. Commissioner Giraudo stated that she is concerned that this cost may be an impediment for some institutions. Commissioner Giraudo asked if HIPPA is an issue with the data exchange framework. Mr. Raffin stated that the frameworks' policies and procedures have been built on federal regulations aligned with HIPPA.

Commissioner Giraudo is concerned about adolescents with parents who may want access to their child's health record. Mr. Raffin stated that BHS has worked closed with the EPIC team to understand all the regulatory requirements.

Commissioner Giraudo stated that at her workplace, she needs a special access code to utilize the Care Every Where function and asked if EPIC will require an additional password for users to access the data exchange network. Mr. Raffin stated that the goal is to remove obstacles, including extra passwords. He noted that smaller organizations that do not have a budget to support their access to the data exchange framework may be able to access technical assistance funds, which will be made available in three rounds of state grants.

Commissioner Bernal asked if information on the data exchange framework is validated. Mr. Raffin stated that there are criteria in order for information to be posted on the framework and noted that he would send that information to the Commission through Mr. Morewitz.

Commissioner Guillermo asked how the data exchange framework allows for an individual to benefit or is it only meant for providers. Mr. Raffin stated that individuals can benefit through their My Chart tool in Epic. Their access to personal health information from smaller regional health care access organizations may not be accessible at this time; the DPH team continues to work on these access issues. Commissioner Guillermo encouraged the EPIC team to advocate at the state level for cost-effective access to health information.

Commissioner Guillermo asked if there is concern about recruiting for staff needed in the current hiring culture and economy. Mr. Raffin stated that the DPH is well positioned at this time. There is about 15-20% vacancy rate in DPH IT. There will be grant funds to health organization the DPH chooses which could cover additional issues with implementation. There is not a lot of extra costs or personnel needed to maintain the data exchange framework.

Commissioner Green asked for more information regarding how the data exchange framework and EPIC can assist in more robust population-level data. She also asked if EPIC already has a Behavioral Health module. Mr. Raffin stated that Contra Costa County has an EPIC behavioral health module, recently implemented. He noted that our systems are similar, the San Francisco DPH is larger. Regarding population health data, his role is to find as much relevant data and create a space for that data to be used for analysis by various DPH staff.

Commissioner Chow noted that some individuals may be concerned about government access to their personal health information and asked how the DPH will resolve this issue in regard the data exchange framework. Mr. Raffin stated that community advocates and attorneys will give input in the development of privacy processes and forms. He added that there are a number of statutes that protect information at the federal and state level.

Commissioner Chow asked how an individual can access their data from the data exchange framework. Mr. Raffin stated that the patient can request their data from their health care organization at any time.

Commissioner Chow noted that there is a challenge for EPIC to use Simple Chinese in its language selection because many people in the Chinese population cannot read it.

7) <u>FY22-23 DPH ANNUAL GIFT FUND REPORT</u>

Drew Murrell, DPH Controller, presented the item.

Commissioner Comments:

Commissioner Chow thanked Mr. Murrell for the extensive report. He asked if gifts to the LHH Gift fund are included in this report. Mr. Murrell stated that any gifts were less than \$25,000 are included on the report; he noted that gifts over \$25,000 are brought to the Health Commission through individual resolution throughout the year.

Commissioner Chow noted that some in-kind gifts over \$25,000 are included on the report. Mr. Murrell stated that Mayor Breed signed a waiver during the pandemic that in-kind gifts related to COVID-19 that were valued over \$25,000 could be accepted without Board of Supervision approval. Commissioner Chow suggested that the report should include a footnote with this information.

8) HEALTH CODE 38, ENHANCED VENTILATION RULES AND REGULATIONS

Jonathan Piakis, DPH Environmental Health Branch, presented the item.

Commissioner Comments:

Commissioner Green asked how climate change is being incorporated into future plans. Mr. Piakis stated that experts work with the DPH to consider climate change impacts and the plan is updated every 5 years. Commissioner Green is impressed that such a diverse group of stake holders are invited into the process.

Commissioner Guillermo thanked Mr. Piakis for the update and is appreciative of the many ways the DPH is protecting the health and wellbeing of San Franciscans.

Commissioner Chow asked how this information is being integrated and used by the Population Health Division. Dr. Bobba stated that there is much overlap of this work and data, with other DPH and Population Health Division functions. For example, during wildfires, these regulations help with recommendations for how to grade the air quality and mitigate harm.

9) FINANCE AND PLANNING COMMITTEE UPDATE

Commissioner Chow chaired the committee in the absence of Commissioner Chung. He noted that the Committee reviewed the Contracts Report and request for a new professional services agreement with HTL 587 and recommended that the full Health Commission approve both items. The committee also reviewed the the FY22-23 San Francisco Administrative Code, Chapter 67.24 Annual DPH Sole Source Waiver Usage Report, and the FY22-23 Administrative Code, Chapter 21.G Sole Source Grant Agreement Report, which included information about DPH sole source contracts utilized in the last year.

10) <u>CONSENT CALENDAR</u>

Action Taken: The Health Commission unanimously approved the following items:

- <u>August 2023 Contracts Report</u>
- <u>Request for approval of a New Professional Services Agreement</u> with HTL 587 to procure hotel rooms and related services to manage individuals who may have come in close contact with COVID-19 or communicable diseases, but do not have a medical need to be hospitalized. The total proposed contract amount is \$2,016,000 which includes a 12% contingency for the term of August 1, 2023 through May 31, 2024 (10 months) - with the option to extend.

11) JOINT CONFERENCE COMMITTEE AND OTHER COMMITTEE REPORT

Commissioner Edward A. Chow, MD, ZSFG JCC Chair, stated that at the July 25, 2023 ZSFG JCC meeting, the committee reviewed standard reports including the Regulatory Affairs Report, Human Resources Report, and

CEO Report. The committee also reviewed the robust presentation on ZSFG Access and Flow, which focused on increasing Med-Surg Occupancy. In closed session, the committee approved the Credentials Report and PIPS Minutes report.

12) OTHER BUSINESS:

This item was not discussed.

13) ADJOURNMENT

The meeting was adjourned at 6:21pm.

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Health Commission City and County of San Francisco Resolution <u>23-06</u>

RESOLUTION PURSUANT TO SECTIONS 4.102 AND 4.110 OF THE CHARTER OF THE CITY AND COUNTY OF SAN FRANCISCO AUTHORIZING LAGUNA HONDA HOSPITAL AND REHABILITATION CENTER TO APPLY TO THE CENTERS FOR MEDICARE AND MEDICAID SERVICES MEDICARE AND/OR MEDICAID PROGRAMS FOR SKILLED NURSING FACILITY AND/OR NURSING FACILITY PROVIDER STATUS AND RECERTIFICATION AS A DISTINCT PART NURSING FACILITY AND/OR SKILLED NURSING FACILITY

WHEREAS, Laguna Honda Hospital and Rehabilitation Center ("Laguna Honda") has operated as a public nursing facility for 156 years and is one of the largest public skilled nursing facilities in the country; it provides care for medically fragile patients, many of whom are economically disadvantaged and have nowhere else to go; and

WHEREAS, Laguna Honda is a licensed acute care hospital that was previously certified as a distinct part Skilled Nursing Facility ("SNF") and a Nursing Facility ("NF"), as those terms are defined by 42 C.F.R. § 488.301, and seeks to be recertified as a distinct part SNF in the Medicare program and as a distinct part NF in the Medicaid program; and

WHEREAS, Laguna Honda is required to be in substantial compliance with applicable federal participation requirements, including, without limitation, the regulatory requirements found at 42 C.F.R. Part 483, Subpart B, in order to receive federal funding; and

WHEREAS, the Centers for Medicare and Medicaid Services ("CMS") acts directly or through a State Survey Agency, to survey Laguna Honda Hospital periodically for compliance with the federal participation requirements; and

WHEREAS, the California Department of Public Health ("CDPH") is the State Survey Agency, as the term is defined by 42 C.F.R. § 488.1, that performs survey and review functions pursuant to an agreement with CMS and Sections 1864, 1819(g), and 1919(g) of the Social Security Act; and

WHEREAS, between October 14, 2021, and April 13, 2022, CDPH completed a series of surveys of Laguna Honda that concluded that Laguna Honda did not substantially comply with some of the applicable federal participation requirements which resulted, on April 14, 2022, in CMS terminating Laguna Honda's SNF/NF certifications in the Medicare and Medicaid Programs; and

WHEREAS, Laguna Honda entered into a Settlement Agreement with CMS and CDPH to fund necessary Medicare and Medicaid services to all of its residents, and continue payment to Laguna Honda through at least November 13, 2023, and the parties to the Settlement Agreement intend to extend the agreement through at least March 19, 2024, while Laguna Honda seeks recertification as a Medicare SNF and/or Medicaid NF; and

WHEREAS, Laguna Honda is currently making significant changes pursuant to the Settlement Agreement to improve the facility to address CDPH's stated survey deficiencies in order to seek recertification and new Medicare and/or Medicaid provider agreements for its distinct part SNF; and

WHEREAS, the Medicaid and Medicare recertification application process requires a new application which includes a resolution by Laguna Honda's governing board approving Laguna Honda's application for recertification as a Medicare SNF and/or Medicaid NF provider; and

WHEREAS, City Charter Section 4.110 charges the Health Commission, together with the Department of Public Health, with the management and control of the hospitals of the City, emergency medical services, and general

preservation, promotion and protection of the physical and mental health of inhabitants of the City, while Charter Section 4.102 sets forth the duties of City Commissions, including the requirement that Commissions deal with administrative matters solely through the department head or their designees; and

WHEREAS, the Health Commission is the governing body of Laguna Honda for applicable federal and state requirements for health facilities; and

WHEREAS, City Charter Section 4.126 and Administrative Code Section 2A.30 charge department heads with responsibility for the administration of their department and the Director of Health ("Director") is the department head of the Department of Public Health; and

WHEREAS, the Health Commission and the Director desire Laguna Honda to become recertified as a SNF under the Medicare Program and/or a NF under the Medicaid Program; and

RESOLVED, that the Health Commission and the Director approve of Laguna Honda's application to become recertified as a Medicaid NF, and be it

FURTHER RESOLVED, that the Health Commission and the Director approve of Laguna Honda's application to become recertified as a Medicare SNF, and be it

FURTHER RESOLVED, that the Health Commission and the Director approve of Laguna Honda's application to become recertified as a distinct part NF, distinct part SNF, or a distinct part dual-certified SNF and NF, and be it

FURTHER RESOLVED, that the Director shall report back to the Health Commission after the following events, as applicable: execution of a Medicaid provider agreement, execution of a Medicare provider agreement, and approval of Laguna Honda's distinct part status.

I hereby certify that the San Francisco Health Commission at its August 1, 2023 meeting adopted the foregoing resolution.

Mark Morewitz, MSW Health Commission Executive Secretary