



City and County of San Francisco  
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## San Francisco Department of Public Health

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# Skilled Nursing Care Transfer Reporting

San Francisco Ordinance 077-22 | Calendar Year 2024

## Executive Summary

San Francisco Ordinance 077-22 requires general acute care hospitals and hospital-based skilled nursing facilities in the City to annually report to the Department of Public Health (DPH) the number of, and certain demographic information regarding, (1) patients transferred to a health facility outside of the City to receive skilled nursing care or subacute skilled nursing care and (2) patients who qualify for skilled nursing care or subacute skilled nursing care but are not transferred to a health facility outside of the City, i.e., remain in the City in an acute care hospital or hospital-based skilled nursing facility.

The 2024 report revealed findings that are consistent with the findings from the prior three years' data reports. San Francisco reporting health facilities reported more than 7,000 discharges to skilled nursing facilities, in- and out-of-county, of which, over 5,500 were San Francisco residents. There were fewer than 30 discharges out of county for subacute skilled nursing care.

**Acknowledging data limitations**, the summary findings from the 2024 report are below.

- Of reporting hospitals, the majority of hospital encounters who were transferred to a SNF were adults over the age of 65.
- The population of hospital encounters transferred to a SNF (in-county and out-of-county) was racially and ethnically diverse.
- Medicare was the most common payor type amongst encounters transferred to a SNF (in-county and out-of-county).
- Most San Francisco residents were transferred to a SNF located in San Francisco.
  - Of total discharges, more than 75% of San Francisco residents were discharged to a SNF located in San Francisco.
  - Of San Francisco residents who were discharged out of county, approximately 50% of encounters were transferred less than 15 miles from the reporting health facility, and over 80% of out-of-county San Francisco resident discharges were placed in SNFs within 30 miles of the reporting health facility address.
  - All told, more than 95% of SF residents were discharged to a SNF location in SF or within 30 miles of San Francisco.<sup>1</sup>

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<sup>1</sup> This excludes CPMC data. CPMC cannot differentiate between San Francisco residents and non-residents discharges for out-of-county discharges.

## Introduction

In May 2022, the San Francisco Board of Supervisors passed [Ordinance 077-22](#) (the Ordinance) which amended the Health Code to require general acute care hospitals and hospital-based skilled nursing facilities in the City to annually report to the Department of Public Health (DPH) the number of, and certain demographic information regarding, (1) patients transferred to a health facility outside of the City to receive skilled nursing care or subacute skilled nursing care and (2) patients who qualify for skilled nursing care or subacute skilled nursing care but are not transferred to a health facility outside of the City. The purpose of the Ordinance is to understand the full scope of the need for both subacute skilled nursing and general skilled nursing care beds in San Francisco by collecting data on the number of patients who qualify for either subacute skilled nursing or general skilled nursing care in an acute care hospital or hospital-based skilled nursing facility and are either transferred outside of the City or remain in the City in an acute care hospital or hospital-based skilled nursing facility.

- **Skilled Nursing Care** is nursing or therapy care for patients who are medically stable and have a need that must be performed by skilled, licensed professionals daily.
- **Subacute skilled nursing care** is a level of care needed for patients who require ongoing specialized care, such as tracheotomy care, complex wound management, intravenous tube feeding, and/or ventilator care after an acute hospitalization.

The Ordinance also requires the DPH to provide an annual report to the Health Commission based on the reports submitted by the Reporting Health Facilities. The following report provides an analysis of the data submitted to DPH for calendar year 2024.

## Data Report Requirements

Reporting health facilities are required to annually submit a data report to DPH by January 31<sup>st</sup> of each year for the preceding calendar year. The specific requirements can be found in Appendix A. Data Report Requirements. DPH issued guidelines regarding the information collected by each reporting health facility and provided a data report template.

## Reporting Health Facilities

The Ordinance applies to San Francisco health facilities that are licensed as general acute care hospitals or hospital-based skilled nursing facilities, as defined by Section 1250 of the California Health and Safety Code<sup>2</sup>. The Ordinance does not apply to Freestanding skilled nursing facilities. The following is a list of the licensed facilities in San Francisco that are required to report:

- Chinese Hospital
- Kaiser Foundation Hospital (Kaiser)
- Laguna Honda Hospital and Rehabilitation Center (LHH)
- University of California, San Francisco Medical Center (UCSF) – Mount Zion, Mission Bay, Parnassus
- California Pacific Medical Center (CPMC) – Van Ness, Mission Bernal, Davies
- Zuckerberg San Francisco General Hospital and Trauma Center (ZSFG)
- UCSF Health St. Mary's Hospital and UCSF Health Saint Francis Hospital

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<sup>2</sup> Chapter 2. Health Facilities, Division 2. Licensing Provisions, Health and Safety Code – HSC

- Kentfield Hospital San Francisco
- Jewish Home and Rehab Center

## Section 1. Transfers (Discharges) for Skilled Nursing Care

Skilled nursing care is nursing or therapy care that can only be safely and effectively performed by, or under the supervision of professionals or technical personnel. It is a level of care for patients who are medically stable and have a need that must be performed by skilled, licensed professionals daily.

The legislation requires each reporting health facility to report **the number of patients, transferred by the reporting health facility to an out-of-county health facility for the purpose of receiving skilled nursing care**. A summary table of skilled nursing transfers<sup>3</sup> by each reporting health facility is provided below. As reporting health facilities utilize disparate record systems to collect this information, **data should not be compared between reporting health facilities**. A summary of methodologies used by each hospital is also included in Table 1, and detailed methodologies for each reporting health facility can be found in [Appendix B. Reporting Hospital Data & Methodologies](#).

**Table 1. Hospital Discharges to Skilled Nursing Facilities (2024)**

*Due to differences in methodologies and data reporting systems, data should not be compared between hospitals.*

Hospital	Total	SF Resident		Non-SF Resident		Methodology
		In-County	Out-of-County	In-County	Out-of-County	
Chinese Hospital	246	175	59	<10 <sup>2</sup>	<10 <sup>2</sup>	Discharge data and accepting facility address.
Kaiser SF	629	204	351	<10 <sup>2</sup>	67	Discharge data and accepting facility address.
UCSF	2,214	982	248	186	798	Discharge and referral platform data.
UCSF Health St. Mary's & Saint Francis	999	791	129	38	41	Referral data, discharge data, and accepting facility address.
CPMC <sup>1</sup>	2,241	1,973		268		Discharge data.
ZSFG	691	528	88	35	40	Discharge data and accepting facility address.
Kentfield SF	97	<10 <sup>2</sup>	21	0	72	Discharge data and accepting facility address.
LHH	0	0	0	0	0	Discharge data.
Jewish Home	<10	<10 <sup>2</sup>	<10 <sup>2</sup>	0	<10 <sup>2</sup>	Discharge data and accepting facility address.

*Data Notes: (1) CPMC provided data for in-county discharges and out-of-county discharges together.*

*(2) Data values of less than ten (i.e., 1-9) are suppressed, as indicated by the text "<10".*

The legislation also requires each facility to report the **number of patients who qualified for skilled nursing care while admitted to the reporting health facility but were not transferred to a skilled nursing facility**. This information continues to be a challenge for reporting health facilities to assess. Reporting health facilities track different data and may or may not have data

<sup>3</sup> Throughout the report "hospital discharges to skilled nursing facilities" is used to represent transfers to skilled nursing facilities.

systems (i.e., robust referral systems) to estimate this population. Additionally, patient clinical presentation may change throughout their course of care in a hospital. A patient who may have qualified for skilled nursing one day may not need that level of care the next. Health facilities also do not standardly collect whether there is intent to send a patient to another level of care but there was limited bed availability.

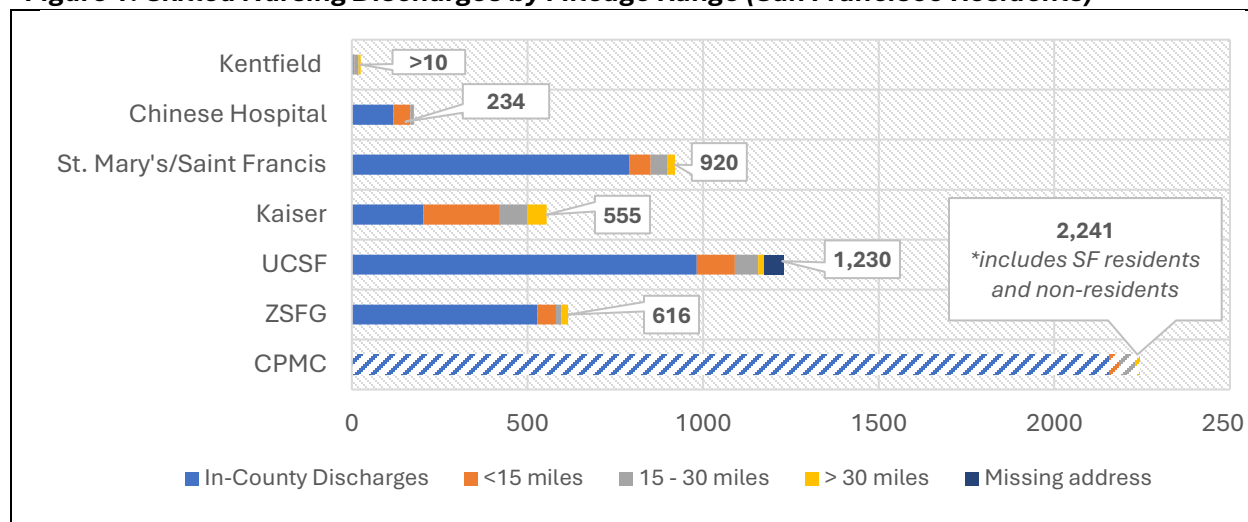
Where available, this data is provided by reporting health facility in [Appendix B. Reporting Hospital Data & Methodologies](#).

### Out-of-County Skilled Nursing Transfers by Distance

Reporting health facilities were asked to provide a list of the out-of-county SNFs where San Francisco residents were transferred and how many patients were transferred to each facility. With this data, DPH staff analyzed the estimated distance traveled for San Francisco residents.

Figure 1. shows all hospital skilled nursing discharges by distance for San Francisco residents. The figure includes both in-county and out-of-county discharges. Data for Jewish Home has been omitted from the figure as it had fewer than ten total skilled nursing discharges. Laguna Honda has been omitted as it did not have any skilled nursing discharges. As evidenced by the figure, for most hospitals, apart from Kaiser and Kentfield, **the majority of San Francisco resident skilled nursing discharges are placed in a SNF located in San Francisco**. Kaiser reports that its higher number of out of county discharges is due to having many contracted SNFs in South San Francisco (San Mateo County), where a Kaiser physician can follow their patients.

**Figure 1. Skilled Nursing Discharges by Mileage Range (San Francisco Residents)**



*Data notes: (1) Kentfield: the total number of SF resident discharges has been suppressed in order to mask the number of SF resident discharges to in-county SNFs, which is less than 10.*

*(2) CPMC cannot determine the residency status of out-of-county discharges and in-county discharges, therefore CPMC's data includes both San Francisco resident discharges and non-resident discharges.*

*(3) Out-of-county SNF addresses were missing for approximately 2% of San Francisco resident out-of-county discharges.*

**This data does not examine nor provide insight to why a patient was placed in a particular facility. While this data does show an estimated distance to out-of-county placements, it does not show us whether these facilities were selected because of patient and family preference or because of bed availability.**

- **Of San Francisco residents who were placed in a SNF out-of-county, approximately 54% were placed in SNFs less than 15 miles from the reporting health facility address.**
- **Approximately 81% of out-of-county San Francisco resident discharges were placed in SNFs within 30 miles of the reporting health facility address.**

## Section 2. Transfers (Discharges) to Subacute Skilled Nursing Care

Subacute skilled nursing care is needed for patients who require ongoing specialized care, such as tracheostomy care, complex wound management, intravenous tube feeding, and/or ventilator care after an acute hospitalization. The California Department of Health Care Services (DHCS) defines adult and pediatric subacute skilled nursing care as a level of care designed for patients who have an acute illness, injury, or exacerbation of a disease process, who use a medical technology that compensates for the loss of a vital bodily function. For further details about subacute skilled nursing qualifications, see [Appendix C. Qualifications for Subacute Skilled Nursing](#).

A few data notes about the subacute skilled nursing data presented below:

- Subacute skilled nursing is not a standardly defined patient discharge status code present in all electronic health record (EHR) systems. Therefore, hospitals have unique approaches for quantifying the patients who were discharged/transferred to a facility to receive subacute skilled nursing care.
- Population estimates provided by many of the reporting health facilities were less than ten. To protect patient privacy, any values that may be potentially identifiable have been suppressed, as noted by the text “<10”.
- There are no accepting subacute SNFs in San Francisco County, therefore all discharges for subacute skilled nursing care are out-of-county transfers.

The legislation requires each facility to report **the number of patients, transferred by the reporting health facility to an out-of-county health facility for the purpose of receiving subacute skilled nursing care**. A summary table of subacute skilled nursing transfers by each reporting health facility is provided below. As reporting health facilities utilize disparate record systems to collect this information, **data should not be compared between reporting health facilities**.

**Table 2. Hospital Discharges to Subacute Skilled Nursing Facilities (2024)***Due to differences in methodologies and data reporting systems, data should not be compared between hospitals.*

Hospital	SF Resident	Non-SF Resident	Methodology
	Out-of-County	Out-of-County	
Chinese Hospital	0	0	Manual review of medical charts.
Kaiser SF	<10 <sup>1</sup>	<10 <sup>1</sup>	Subacute skilled nursing discharge data.
UCSF	<10 <sup>1</sup>	<10 <sup>1</sup>	Subacute skilled nursing discharge data.
UCSF Health St. Mary's and Saint Francis	<10 <sup>1</sup>	<10 <sup>1</sup>	SNF discharge data and Medi-Cal certified subacute skilled nursing providers list.
CPMC	<10 <sup>1</sup>	0	Manual tracking of subacute skilled nursing discharges.
ZSFG	0	0	SNF discharge data, Medi-Cal certified subacute skilled nursing providers list, manual review of medical charts.

*Data Note: (1) Data values of less than ten (i.e., 1-9) are suppressed, as indicated by the text "<10".**(2) Data for Kentfield is not shown as they do not have a mechanism to collect data for a patient discharged for subacute care.*

The legislation also requires each facility to report **the number of patients who qualified for subacute skilled nursing care while admitted to the reporting health facility but were not transferred to a subacute SNF**. This information continues to be a challenge for reporting health facilities to assess. Reporting health facilities track different data and may or may not have tools (i.e., robust referral systems) at their disposal to estimate this population. Regardless, patient clinical presentation may change throughout their course of care in a hospital. And as mentioned above, health facilities do not standardly collect whether there is intent to send a patient to another level of care but there was limited bed availability.

Where available, this data is provided by reporting health facility in [Appendix B. Reporting Hospital Data & Methodologies](#).

### Out-of-County Subacute Skilled Nursing Discharges by Distance

For the 2024 calendar year data report, DPH staff also analyzed the distance for out-of-county subacute skilled nursing discharges. As there are no in-county subacute SNFs currently admitting patients, the analysis does not include a comparison to in-county placements.

As many reporting health facilities reported fewer than ten subacute skilled nursing discharges in total, distance data findings are described. Subacute skilled nursing discharges with missing address information accounted for approximately 6% of all San Francisco resident subacute skilled nursing discharges.

**Of the discharges with address information, approximately 30% of San Francisco resident subacute skilled nursing discharges were placed in a subacute SNF within 15 miles of the reporting health facility while 66% were placed within a facility within 30 miles of the reporting health facility.**

**This data does not examine nor provide insight to why a patient was placed in a particular facility. While this data does estimate the distance to out-of-county subacute SNF placements, it does not show the reasons why these facilities were selected.**

## Report Limitations & Considerations

As with the prior report, reporting health facilities continued to use disparate record systems to collect the information required by the Ordinance. **Due to the distinct hospital electronic health record (EHR) management and referral systems utilized by reporting health facilities, there was not a common methodology employed to collect the required data.** This report is constrained to the facilities' variable methodologies and does not provide a comparative or aggregate analysis. Below is a list of summary data limitations to be considered while reviewing this report. These limitations were included in the previous report and remain true for this year's report.

- Some facilities cannot differentiate between in-county and out-of-county discharges to skilled nursing facilities.
- Subacute skilled nursing care is not a standardly defined patient discharge status code, and the methods utilized to estimate subacute skilled nursing discharges likely include discharges for general skilled nursing care.
- Not all health facilities have access to data from referral systems, nor do all facilities have referral data that can be combined with medical records for discharge information.
- Hospital discharge records may be incomplete for some subacute skilled nursing and SNF discharges.
- Not all hospitals are able to report discharge facility address. Several discharge facilities have generic names or may have the same name, and without address information, these facilities could not be mapped.
- As reporting health facilities report data in aggregate, DPH staff did not have the residential address of each SNF discharge for the distance analysis. SNF discharges were assigned the address of the reporting health facility, and distance estimates were calculated from the reporting health facility to the discharge skilled nursing facility using Google Maps.

Detailed methodologies utilized by reporting health facilities are available in [Appendix B](#).

### Data Notes

Data reported by hospitals and present throughout this report is encounter data, i.e., data has not been de-duplicated. To protect patient privacy, values that are potentially identifiable have been suppressed in this report, specifically:

- Data values of less than ten (i.e., 1-9) are suppressed, as indicated by the text "<10".
- For demographic categories, data values of less than ten (i.e., 0-9) are suppressed, as indicated by the text "<10". In some instances, values of greater than ten may be suppressed in order to mask an adjacent value that is less than ten in the same sub-category. Those values are indicated by the text ">10".

## Plans for the Provision of Subacute and Skilled Nursing Care in San Francisco

As mentioned in prior reports, in 2022 DPH released a Request for Proposal/Request for Qualifications for subacute skilled nursing and SNF beds for hospital overflow. Chinese Hospital

was awarded a contract for these services and currently provides skilled nursing level of care to accommodate overflow patients from ZSFG. DPH has been working closely with Chinese Hospital to achieve SNF and subacute licensure and certification for a 23-bed unit.

Since the prior report, in August 2024, CDPH conducted a five-day D/P SNF Medicare/Medi-Cal certification survey and life safety survey, upon which Chinese Hospital received initial Medicare/Medi-Cal certification. In January 2025, Chinese Hospital received CMS approval as a Medicare part A provider, and this May received notice of DHCS's approval to bill Medi-Cal. Chinese Hospital is now able to bill both Medicare and Medi-Cal for the dedicated 23-bed unit. Chinese Hospital's next step is to go through licensing and certification to provide subacute care services.

## Appendix A. Data Report Requirements

Requirements of each calendar year data report are as follows:

1. The total number of patients who were City residents and the total number of patients who were not City residents, transferred by the Reporting Health Facility to an Out-of-County<sup>4</sup> Health Facility for the purpose of receiving Skilled Nursing Care<sup>5</sup>.
2. The total number of patients who were City residents and the total number of patients who were not City residents, who qualified for Skilled Nursing Care while admitted to the Reporting Health Facility but were not transferred by the Reporting Health Facility to an Out-of-County Health Facility.
3. The following aggregate demographic information for each of the above categories of patient:
  - a. Age
  - b. Race/ethnicity
  - c. Gender (as well as sexual orientation and gender identity, if normally collected by the reporting health facility)
  - d. Patient Insurance Provider (by way of example but not limitation, Medi-Cal, Medicare, or the specific private insurance provider)
  - e. Housing Status (by way of example, but not limitation, people experiencing homelessness, marginally housed, or permanently housed)

**Note:** For the sub-groups within each demographic category, DPH utilized the SFDPH ethnicity data collection guidelines<sup>6</sup>, the SFDPH gender identity data collection guidelines<sup>7</sup>, the SFDPH sexual orientation data collection guidelines<sup>8</sup>, and the SFDPH Annual Report payor type categories.

## Appendix B. Reporting Hospital Data & Methodologies

In order to protect patient privacy, values that are potentially identifiable have been suppressed in the following tables. Specifically, data values of less than ten (i.e., 1-9) are suppressed, as indicated by the text "<10". For demographic categories, data values of less than ten (i.e., 1-9) are suppressed, as indicated by the text "<10". In some instances, values of greater than ten may be suppressed in order to mask an adjacent value that is less than ten in the same sub-category. Those values are indicated by the text ">10".

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<sup>4</sup> **Out-of-County Health Facility:** a licensed health facility located outside of the City of San Francisco and providing Skilled Nursing Care.

<sup>5</sup> **Skilled Nursing Care:** general skilled nursing care including but not limited to adult subacute care as defined by [Section 14132.25 of the California Welfare and Institution Code](#).

<sup>6</sup> [SFDPH Ethnicity Data Collection Guidelines](#)

<sup>7</sup> [SFDPH Gender Identity Collection Guidelines](#)

<sup>8</sup> [SFDPH Sexual Orientation Data Collection Guidelines](#)

## Chinese Hospital

Chinese Hospital utilized discharge data to report encounters transferred to SNFs. To identify the number of patients transferred to an out-of-county facility to receive subacute skilled nursing care, Chinese Hospital manually reviewed the medical chart for each patient that was transferred to a SNF. To capture the number of encounters who qualified for skilled nursing or subacute care but were not discharged to that level of care, Chinese Hospital utilized lower level of care data.

Chinese Hospital	Discharges to In-County SNFs		Discharges to Out-of-County SNFs		Qualified for SNF Discharge		Discharges Out-of-County to Subacute		Qualified for Subacute Discharge	
	SF Res.	Non-SF Res.	SF Res.	Non-SF Res.	SF Res.	Non-SF Res.	SF Res.	Non-SF Res.	SF Res.	Non-SF Res.
<b>Total Encounters</b>	175	<10	59	<10	<10		0		0	
<b>Encounters by Age</b>										
<19	14		<10							
19 - 64										
65+	161		>10							
<b>Encounters by Race &amp; Ethnicity</b>										
African American/Black	<10		<10							
Asian	158		57							
Native Hawaiian or Other Pacific										
Native American										
Latine/x										
White	<10									
Multi-Ethnic	<10									
Other (add/edit as needed)	<10		<10							
Missing Race & Ethnicity	10									
<b>Encounters by Gender Identity</b>										
Male	73		24							
Female	102		35							
Trans Male										
Trans Female										
Gender-Queer/Queer Non-Binary										
Other (add/edit as needed)										
Missing Gender Identity										
<b>Encounters by Sexual Orientation</b>										
Straight/Heterosexual										
Bisexual										
Gay/Lesbian/Same-Gender Loving										
Questioning/Unsure										
Other (add/edit as needed)										
Missing Sexual Orientation	175		59							
<b>Encounters by Insurance Provider</b>										
Medi-Cal	>10		<10							
Medicare	154		>10							
Private/Commercial	<10									
HealthySF										
Uninsured										
Other (add/edit as needed)										
Missing Insurance Provider Information										
<b>Encounters by Housing Status</b>										
Unhoused			<10							
Permanent Housing	175		>10							
Other (add/edit as needed)										
Missing Housing Status										

## California Pacific Medical Center (CPMC)

CPMC utilizes discharge data to determine the number of patients transferred to a SNF. CPMC's discharge data system does not have the ability to differentiate between a discharge to a SNF in-county versus out-of-county. CPMC is able to identify out-of-county placements through their referral software system, which does not host information about encounter residency nor demographic information. For discharge to subacute skilled nursing care, CPMC manually tracks the information for each patient that is transferred to an out of county facility for subacute skilled nursing care. CPMC does not have a mechanism to capture patients who may qualify for SNF or subacute skilled nursing care but are not discharged to a facility to receive that level of care.

CPMC	Discharges to SNFs (in-county & out-of-county)		Qualified for SNF Discharge		Discharges Out-of-County to Subacute		Qualified for Subacute Discharge	
	SF Res.	Non-SF Res.	SF Res.	Non-SF Res.	SF Res.	Non-SF Res.	SF Res.	Non-SF Res.
<b>Total Encounters</b>	1973	268			<10			
<b>Encounters by Age</b>								
<19								
19 - 64	240	42						
65+	1733	226						
<b>Encounters by Race &amp; Ethnicity</b>								
African American/Black	301	38						
Asian	498	42						
Native Hawaiian or Other Pacific Islander								
Native American								
Latine/x	146	48						
White	1028	140						
Multi-Ethnic								
Other (add/edit as needed)								
Missing Race & Ethnicity								
<b>Encounters by Gender Identity</b>								
Male	868	113						
Female	1105	155						
Trans Male								
Trans Female								
Gender-Queer/Queer Non-Binary								
Other (add/edit as needed)								
Missing Gender Identity								
<b>Encounters by Sexual Orientation</b>								
Straight/Heterosexual								
Bisexual								
Gay/Lesbian/Same-Gender Loving								
Questioning/Unsure								
Other (add/edit as needed)								
Missing Sexual Orientation								
<b>Encounters by Insurance Provider</b>								
Medi-Cal	168	36						
Medicare	1250	211						
Private/Commercial	555	21						
HealthySF								
Uninsured								
Other (add/edit as needed)								
Missing Insurance Provider Information								
<b>Encounters by Housing Status</b>								
Unhoused	169	<10						
Permanent Housing	1804	>10						
Other (add/edit as needed)								
Missing Housing Status								

## UCSF Health Saint Francis & St. Mary's Hospitals

As with prior years, UCSF Health St. Mary's and Saint Francis hospitals utilized discharge records to estimate the number of patients transferred to a SNF in and out-of-county. To identify the number of subacute skilled nursing discharges, St. Mary's and Saint Francis utilized the Medi-Cal certified subacute providers list in tandem with their discharge dataset. Encounters with a discharge to a SNF that was on the Medi-Cal certified subacute providers list were counted as a subacute skilled nursing encounter. The hospitals utilized the referral management tool to determine the number of patients who qualified for skilled nursing care while admitted at its hospitals, however, the referral tool does not differentiate between referrals for general skilled nursing and referrals for subacute skilled nursing care. If a patient was referred to a facility on the Medi-Cal certified subacute providers list but not discharged to that facility, the patient was counted as a subacute skilled nursing referral. Many of the facilities on the list provide general skilled nursing in addition to subacute care, and it is likely that

many referrals to a facility that offer subacute skilled nursing care were referrals for general skilled nursing care. Consequently, the number of hospital encounters who qualified for skilled nursing care but were not transferred to a SNF is likely an undercount, and some encounters may be categorized in this report as qualified for subacute skilled nursing care but not transferred to a facility for subacute skilled nursing care. Additionally, UCSF Health St. Mary's and Saint Francis noted that over the course of a patient's stay, a patient may have multiple referrals (i.e., may have been referred to facilities offering only skilled nursing and referred to facilities offering both general skilled nursing and subacute skilled nursing care). These hospital encounters would be counted twice in the analysis.

St. Mary's   Saint Francis	Discharges to In-County SNFs		Discharges to Out-of-County SNFs		Qualified for SNF Discharge			Discharges Out-of-County to Subacute		Qualified for Subacute Discharge		
	SF Res.	Non-SF Res.	SF Res.	Non-SF Res.	SF Res.	Non-SF Res.	N/A	SF Res.	Non-SF Res.	SF Res.	Non-SF Res.	N/A
<b>Total Encounters</b>	791	38	129	41	534	56	<10	<10	<10	135	27	<10
<b>Encounters by Age</b>												
<19												
19 - 64	49	<10	27	<10	125	25				63	14	
65+	742	>10	102	>10	409	31				72	13	
<b>Encounters by Race &amp; Ethnicity</b>												
African American/Black	86	<10	24	<10	85	<10				25	<10	
Asian	249	<10	35	<10	136	<10				25	<10	
Native Hawaiian or Other Pacific Islander			<10		<10							
Native American												
Latine/x												
White	419	26	60	23	272	26				67	12	
Multi-Ethnic	28	<10	<10	<10	34	<10				>10	<10	
Other (add/edit as needed)												
Missing Race & Ethnicity					<10	<10				<10	<10	
<b>Encounters by Gender Identity</b>												
Male	379	17	64	21	278	>10				83	10	
Female	412	21	65	20	256	31				52	17	
Trans Male												
Trans Female												
Gender-Queer/Queer Non-Binary												
Other (add/edit as needed)												
Missing Gender Identity						<10						
<b>Encounters by Sexual Orientation</b>												
Straight/Heterosexual												
Bisexual												
Gay/Lesbian/Same-Gender Loving												
Questioning/Unsure												
Other (add/edit as needed)												
Missing Sexual Orientation												
<b>Encounters by Insurance Provider</b>												
Medi-Cal	21	<10	17		108	<10				58	<10	
Medicare	72	29	512	25	242	19				36	<10	
Private/Commercial	36	>10	262	13	182	33				41	19	
HealthySF												
Uninsured												
Other (add/edit as needed)												
Missing Insurance Provider Information												
<b>Encounters by Housing Status</b>												
Unhoused	<10		<10		22					11		
Permanent Housing	>10	38	>10	41	568					151		
Other (add/edit as needed)												
Missing Housing Status												

## Kaiser San Francisco

To identify the number of skilled nursing or subacute skilled nursing discharges in 2024, like prior years, Kaiser utilized discharge data. To estimate the population who qualified for skilled nursing care or subacute skilled nursing care while admitted but were not transferred to an out-of-county SNF, Kaiser utilized their referral software system CarePort. Using CarePort, Kaiser identified patients who had a referral and met the qualifications to skilled nursing or had a referral and met the qualifications for subacute skilled nursing but were ultimately not discharged to a SNF or subacute SNF. These patients may have seen clinical changes in their health and may have been discharged elsewhere or home.

Kaiser	Discharges to In-County SNFs		Discharges to Out-of-County SNFs		Qualified for SNF Discharge		Discharges Out-of-County to Subacute		Qualified for Subacute Discharge	
	SF Res.	Non-SF Res.	SF Res.	Non-SF Res.	SF Res.	Non-SF Res.	SF Res.	Non-SF Res.	SF Res.	Non-SF Res.
<b>Total Encounters</b>	204	<10	351	67	172	26	<10	<10	<10	<10
<b>Encounters by Age</b>										
<19										
19 - 64	17		55	13	30	<10				
65+	187		296	54	142	>10				
<b>Encounters by Race &amp; Ethnicity</b>										
African American/Black	23		50	<10	26	<10				
Asian	77		100	11	48	<10				
Native Hawaiian or Other Pacific Islander	<10		<10							
Native American										
Latine/x	13		38	<10	>10	<10				
White	84		148	41	74	11				
Multi-Ethnic										
Unknown	<10		10							
Missing Race & Ethnicity			<10	<10	<10	<10				
<b>Encounters by Gender Identity</b>										
Male	113		>10	38	106	15				
Female	91		177	29	66	11				
Trans Male										
Trans Female										
Gender-Queer/Queer Non-Binary										
Unknown			<10							
Missing Gender Identity										
<b>Encounters by Sexual Orientation</b>										
Straight/Heterosexual										
Bisexual										
Gay/Lesbian/Same-Gender Loving										
Questioning/Unsure										
Other (add/edit as needed)										
Missing Sexual Orientation										
<b>Encounters by Insurance Provider</b>										
Medi-Cal	<10		>10	<10	<10	<10				
Medicare	179		297	52	137	17				
Private/Commercial	21		42	>10	25	<10				
HealthySF	<10									
Uninsured										
Other			<10		<10					
Missing Insurance Provider Information										
<b>Encounters by Housing Status</b>										
Unhoused										
Permanent Housing										
Other (add/edit as needed)										
Missing Housing Status										

## University of California, San Francisco

UCSF utilized discharge data to determine the number of patients transferred to a SNF. For the 2024 calendar year data report, UCSF utilized their referral platform to determine the hospital encounters that may have qualified for skilled nursing but were not discharged to a SNF. UCSF identified all encounters where the discharge disposition did not state SNF and had evidence of a referral to a SNF during their admission. There may be double counting between the population that qualified for skilled nursing but were not discharged to a SNF and the population that qualified for subacute skilled nursing care but were not discharged to a subacute SNF. This is because these are not mutually exclusive analyses and care plans may change. Additionally, some SNFs offer both general skilled nursing and subacute skilled nursing services.

To determine the number of hospital encounters transferred out-of-county for subacute skilled nursing care, UCSF identified patients with a discharge record of subacute.

UCSF	Discharges to In-County SNFs		Discharges to Out-of-County SNFs		Qualified for SNF Discharge		Discharges Out-of-County to Subacute		Qualified for Subacute Discharge	
	SF Res.	Non-SF Res.	SF Res.	Non-SF Res.	SF Res.	Non-SF Res.	SF Res.	Non-SF Res.	SF Res.	Non-SF Res.
<b>Total Encounters</b>	982	186	248	798	226	326	<10	<10	<10	23
<b>Encounters by Age</b>										
<19			<10	<10						10
19 - 64	111	29	>10	>10	58	149				
65+	871	157	185	564	168	177				13
<b>Encounters by Race &amp; Ethnicity</b>										
African American/Black	114	13	48	46	26	32				<10
Asian	302	28	66	58	73	32				<10
Native Hawaiian or Other Pacific Islander	<10	<10	<10	<10	<10	<10				
Native American	<10		<10	<10	<10					<10
Latine/x	101	35	17	123	20	61				<10
White	387	97	93	469	92	164				10
Multi-Ethnic	49	<10	12	62	<10	12				
Southwest Asian and North African	14		<10	<10	<10	<10				
Missing Race & Ethnicity	<10	<10	<10	22	<10	18				<10
<b>Encounters by Gender Identity</b>										
Male	449	88	126	>10	106	177				>10
Female	533	98	122	403	120	149				<10
Trans Male										
Trans Female										
Gender-Queer/Queer Non-Binary										
Other (add/edit as needed)										
Missing Gender Identity				<10						
<b>Encounters by Sexual Orientation</b>										
Straight/Heterosexual										
Bisexual										
Gay/Lesbian/Same-Gender Loving										
Questioning/Unsure										
Other (add/edit as needed)										
Missing Sexual Orientation										
<b>Encounters by Insurance Provider</b>										
Medi-Cal	76	>10	45	109	42	83				<10
Medicare	883	168	191	616	165	184				14
Private/Commercial	>10	13	12	62	17	56				<10
HealthySF										
Uninsured										
Other (add/edit as needed)	<10	<10		11						
Missing Insurance Provider Information										
<b>Encounters by Housing Status</b>										
Unhoused	13		14	17	10	<10				<10
Permanent Housing	969	186	234	781	216	>10				>10
Other (add/edit as needed)										
Missing Housing Status										

## Zuckerberg San Francisco General Hospital (ZSFG)

To determine the number of hospital encounters who were transferred to a SNF, ZSFG utilized discharge data. ZSFG utilized lower level of care (LLOC) data to estimate the number of hospital encounters who qualified for skilled nursing care but were not discharged to a SNF. A patient becomes a LLOC patient when their acute medical condition resolves, or when they were admitted to the hospital without one, and they should be discharged to a different level of care. A patient receiving skilled nursing level of care in an acute care setting is an example LLOC patient. From a dataset of all patient encounters during calendar year 2024, ZSFG captured encounters identified as LLOC with a discharge where the facility was not a skilled nursing facility.

As subacute skilled nursing is not a standardly defined discharge code, to capture the number of encounters discharged to a facility for subacute skilled nursing care, ZSFG referred to the Medi-Cal certified subacute providers list. ZSFG pulled the medical records of all discharges to SNF/subacute and filtered by discharges to facilities on the subacute providers list. As many of these facilities offer both general skilled nursing and subacute skilled nursing services, ZSFG reviewed the medical charts of this group of discharges to determine whether the encounter met the medical criteria for subacute skilled nursing prior to discharge (i.e., had orders in the medical chart for tracheostomy care with continuous medical ventilation, tracheostomy care with suctioning or oxygen, tube feeding, etc.)

ZSFG	Discharges to In-County SNFs		Discharges to Out-of-County SNFs		Qualified for SNF Discharge		Discharges Out-of-County to Subacute		Qualified for Subacute Discharge	
	SF Res.	Non-SF Res.	SF Res.	Non-SF Res.	SF Res.	Non-SF Res.	SF Res.	Non-SF Res.	SF Res.	Non-SF Res.
<b>Total Encounters</b>	528	35	88	40	701	71	0	0	<10	<10
<b>Encounters by Age</b>										
<19				<10	<10					
19 - 64	177	12	10	<10	378	38				
65+	351	23	78	32	>10	33				
<b>Encounters by Race &amp; Ethnicity</b>										
African American/Black	84	<10	15	<10	161	<10				
Asian	139	<10	33	10	115	17				
Native Hawaiian or Other Pacific Islander	<10	<10			<10	<10				
Native American	10				<10					
Latine/x	130	12	>10	<10	175	18				
White	147	<10	24	14	220	23				
Multi-Ethnic										
Other (add/edit as needed)	15	<10	<10	<10	17	<10				
Missing Race & Ethnicity	<10				<10					
<b>Encounters by Gender Identity</b>										
Male	283	23	49	26	424	46				
Female	238	12	39	>10	264	24				
Trans Male					<10					
Trans Female	<10				<10					
Gender-Queer/Queer Non-Binary					<10					
Other (add/edit as needed)					<10					
Missing Gender Identity	<10			<10	<10	<10				
<b>Encounters by Sexual Orientation</b>										
Straight/Heterosexual	453	29	76	>10	587	53				
Bisexual	<10	<10	<10		>10	<10				
Gay/Lesbian/Same-Gender Loving	>10	<10	<10		31	<10				
Questioning/Unsure										
Other (add/edit as needed)					<10					
Missing Sexual Orientation	48	<10	10	<10	69	12				
<b>Encounters by Insurance Provider</b>										
Medi-Cal	178	<10	14	<10	389	35				
Medicare	332	25	68	29	287	28				
Private/Commercial	13	<10	<10	<10	11	<10				
HealthySF	<10	<10			<10	<10				
Uninsured										
Other (add/edit as needed)	<10		<10	<10	<10	<10				
Missing Insurance Provider Information					<10					
<b>Encounters by Housing Status</b>										
Unhoused	67		11	<10	179	12				
Permanent Housing	461	35	77	>10	522	59				
Other (add/edit as needed)										
Missing Housing Status										

## Kentfield Hospital

Kentfield hospital utilized discharge data to calculate the number of patients transferred to a SNF. Kentfield San Francisco does not have a mechanism to estimate the number of patients who may qualify for placement in a SNF but are not discharged to a SNF. Kentfield San Francisco also does not have a mechanism to capture patients who are discharged to a subacute skilled nursing facility nor those who may qualify for subacute skilled nursing care but are not discharged to a subacute SNF.

Kentfield	Discharges to In-County SNFs		Discharges to Out-of-County SNFs		Qualified for SNF Discharge		Discharges Out-of-County to Subacute		Qualified for Subacute Discharge	
	SF Res.	Non-SF Res.	SF Res.	Non-SF Res.	SF Res.	Non-SF Res.	SF Res.	Non-SF Res.	SF Res.	Non-SF Res.
<b>Total Encounters</b>	<10		21	72						
<b>Encounters by Age</b>										
<19										
19 - 64			<10	39						
65+			>10	33						
<b>Encounters by Race &amp; Ethnicity</b>										
African American/Black			<10	13						
Asian			<10	<10						
Native Hawaiian or Other Pacific Islander			<10	<10						
Native American										
Latine/x										
White			<10	26						
Multi-Ethnic										
Other (add/edit as needed)			<10	24						
Missing Race & Ethnicity			<10							
<b>Encounters by Gender Identity</b>										
Male			>10	47						
Female			<10	25						
Trans Male										
Trans Female										
Gender-Queer/Queer Non-Binary										
Other (add/edit as needed)										
Missing Gender Identity										
<b>Encounters by Sexual Orientation</b>										
Straight/Heterosexual										
Bisexual										
Gay/Lesbian/Same-Gender Loving										
Questioning/Unsure										
Other (add/edit as needed)										
Missing Sexual Orientation			21	72						
<b>Encounters by Insurance Provider</b>										
Medi-Cal			<10							
Medicare			12							
Private/Commercial			<10							
HealthySF			<10							
Uninsured										
Other (add/edit as needed)										
Missing Insurance Provider Information										
<b>Encounters by Housing Status</b>										
Unhoused										
Permanent Housing										
Other (add/edit as needed)										
Missing Housing Status			21							

## Laguna Honda Hospital

During calendar year 2024, Laguna Honda did not make any transfers to skilled nursing facilities or subacute skilled nursing facilities in-county or out-of-county. Patients of Laguna Honda who may develop an acute injury or condition, requiring a different level of care, would be transferred to a general acute care hospital to care for their acute condition before being transferred to a facility for subacute skilled nursing care.

## Jewish Home & Rehab Center

For calendar year 2024, Jewish Home utilized discharge data to report fewer than ten transfers to in-county and out-of-county skilled nursing facilities. Jewish Home and Rehab Center does not provide subacute skilled nursing services and in 2024 did not make any patient transfers to subacute SNFs. Like Laguna Honda, patients of Jewish Home and Rehab Center who may develop an acute injury or condition, requiring a different level of care, would be transferred to a general acute care hospital to care for their acute condition before being transferred to a facility for subacute skilled nursing care.

## Appendix C. Qualifications for Subacute Skilled Nursing

To qualify for subacute skilled nursing care, a patient must need one of the following:

- Tracheostomy care with continuous mechanical ventilation for at least 50 percent of the day;  
or
- Tracheostomy care with suctioning and room air mist or oxygen as needed, and one of the six treatments below; or administration of any three of the six treatment procedures listed below:
  - Total parenteral nutrition
  - Inpatient physical, occupational, and/or speech therapy, at least two hours per day, five days per week
  - Tube feeding (nasogastric or gastrostomy)
  - Inhalation therapy treatments every shift and a minimum of four times per 24-hour period
  - I.V. therapy involving: – the continuous administration of a therapeutic agent, or – the need for hydration, or frequent intermittent I.V. drug administration via a peripheral and/or central line
  - Debridement, packing and medicated irrigation with or without whirlpool treatment.