## City Ask of CPMC – Detailed list as of 5/16/11

### 1. Healthcare

| I-1. | CPMC shall provide charity care at a level that is consistent with other non-profit San Francisco hospitals, as measured by the average of San Francisco’s three other private, non-profit hospitals’ ratio of charity care to net patient revenue. This obligation continues for as long as CPMC operates acute-care hospitals in the City. |
| I-2. | CPMC shall provide inpatient and outpatient services to Medi-Cal beneficiaries at a level that is consistent with other non-profit San Francisco hospitals, as measured by the average of San Francisco’s three other private, non-profit hospitals’ proportion of hospital discharges and outpatient services paid for by Medi-Cal. This obligation continues for as long as CPMC operates acute-care hospitals in the City. |
| I-3. | CPMC shall provide a grant in the amount $2,375,000 annually to the San Francisco Community Clinic Consortium (SFCCC) to expand access to primary care medical homes and chronic care support for 4,000 low-income, uninsured residents with a specific focus on Tenderloin, Mission, Western Addition, South of Market, Bayview and Chinatown neighborhoods, including participants of Healthy San Francisco. Additionally, $500,000 of this grant shall support clinic-specific community benefits projects. Payments to clinics for primary care shall be at the Expanded Access to Primary Care (EAPC) rate and payments to clinics for chronic care shall be at the average prospective payment rate. CPMC shall provide hospital services, as necessary, to any patient whose care is funded through the SFCCC contract. This obligation continues for as long as CPMC operates the Cathedral Hill Hospital as an acute-care hospital. |
| I-4. | CPMC shall provide a grant in the amount $1,000,000 annually to the San Francisco Community Clinic Consortium (SFCCC) to create a specialty care pool to expand access to specialty care for at least 1,200 uninsured and for Medi-Cal beneficiaries, with a specific focus on residents of the Tenderloin, Mission, Western Addition, South of Market, Bayview and Chinatown neighborhoods. This requirement is in addition to patients served through the existing Chinese Hospital partnership, as described in I-16 below. SFCCC will administer this funding, which shall be used to: a) purchase specialty physician services for uninsured patients from physicians with admitting privileges into CPMC; or b) to supplement, as necessary, Medi-Cal payments for specialty physician services for Medi-Cal beneficiaries by physicians with admitting privileges into CPMC. Payments for these services shall be up to Medicare rates. CPMC shall provide hospital services, as necessary, to any patient whose care is funded through the SFCCC contract. This obligation continues for as long as CPMC operates the Cathedral Hill Hospital as an acute-care hospital. |
| I-5. | CPMC shall maintain 38 skilled nursing (SNF) beds at Davies campus and find, build or co-build 62 new SNF beds to maintain its commitment of 100 SNF beds in San Francisco. The 62 new SNF beds may not utilize pre-existing beds in the community and must accept Medi-Cal patients. CPMC shall either provide these skilled nursing beds directly or shall identify a private provider and provide capital funding to create these beds, before the skilled nursing beds at St. Luke’s are removed from service. |
| I-6. | CPMC shall work with its hospital partners to develop concrete solutions for providing sub-acute care services in the community, and present these to the Health Commission by 6/30/12. |
I-7. St. Luke’s shall be operated as an acute care hospital with an emergency room for at least 20 years.

I-8. CPMC shall begin construction on the new St. Luke’s Hospital concurrent with or prior to the commencement of construction on Cathedral Hill and shall not occupy and operate the new Cathedral Hill Hospital until doing so with the new St. Luke’s Hospital.

I-9. Pursuant to CPMC’s document entitled “St. Luke’s Campus Service Line Comparison 4/4/11” and in accordance with the Blue Ribbon Panel Recommendations, CPMC shall provide the following services on-site at the St. Luke’s Campus: inpatient services (including cancer, cardiology, endocrinology, respiratory, neurology, gastroenterology, orthopedics, infectious disease, urology, general and vascular surgery, intensive care unit, labor & delivery, gynecology, special care nursery, telemedicine), emergency medicine (adult, pediatric, and behavioral), urgent care, outpatient services (including internal medicine, ambulatory surgery, cardiology, diagnostic imaging, gastroenterology, lab services, obstetrics, orthopedics, hepatology, neurology, oncology, orthopedics, respiratory therapy, child development, retail pharmacy, lab services).

I-10. CPMC shall establish and operate a Center of Excellence in Community Health at St. Luke’s.

The Center of Excellence in Community Health shall be an anchor in the southeastern portion of the City that promotes health equity for underserved populations by expanding access to primary care and behavioral health services and promoting community-based prevention. The services offered by the Center shall be driven by the health needs of this community as indicated by burden of disease, health care disparities, and health care resource utilization data. The Center’s services shall generally include, but need not be limited to: primary health care, chronic disease management, behavioral health services, wellness services, fitness/nutrition programs, preventive care, and health education.

I-11. CPMC shall establish and operate a Center of Excellence in Senior Health at St. Luke’s.

The Center of Excellence in Senior Health shall have expertise in the unique health needs of San Francisco’s seniors. The Center shall provide a full range of inpatient and outpatient services responsive to the physical and behavioral health needs of seniors, designed to improve quality of life in the hospital, in the home, and community-wide. The Center’s services shall generally include, but need not be limited to: interdisciplinary, comprehensive, evidence-based geriatric assessment and treatment; care delivery focused on maintaining physical and cognitive function; a prepared environment sensitive to the needs of older adults; nursing staff with expertise in preventing and managing syndromes common in hospitalized older adults; early planning for discharge home; exercise programs; educational programs for patients, families, and caregivers; rehabilitation services including occupational, physical, and speech therapists; nutrition services; pharmacological analysis services; referral to health and social home and community-based services; transitional care planning, and palliative care and end-of-life care services to support patients, families and providers.

I-12. To ensure that St. Luke’s continues to be viable as a full-service community hospital, CPMC shall provide access to inpatient and outpatient specialty services on campus at St. Luke’s utilizing current technology and best practices, including telemedicine.

I-13. CPMC shall place the new St. Luke’s medical office building into operation within four years following the occupancy of St. Luke’s and in the meantime continue to refurbish the Monteagle office building.
1-14. In order to optimize provision of quality care and to achieve CPMC’s stated vision of an integrated delivery system, CPMC shall fully integrate the medical staff at St. Luke’s with the medical staffs at the other CPMC campuses to ensure that charity care and Medi-Cal patients have full access to care at any CPMC hospital.

1-15. CPMC shall continue its active and contributory participation in the Community Benefits Partnership in order to target their community benefit commitment to low-income and underserved communities, specifically within the Tenderloin, Mission, Western Addition, South of Market, Bayview and Chinatown neighborhoods to support primary care, disease prevention, and health promotion programs targeted to the needs of those communities, as evidenced by the Community Benefits Plan CPMC submits to the Office of Statewide Health Planning and Development (OSHPD).

1-16. CPMC shall maintain its partnership with Chinese Hospital and its affiliates to provide pediatric, obstetric, and certain tertiary services at existing levels and at a fair and affordable cost. CPMC shall provide services at a cost that is no more than that provided in calendar year 2010, adjusted annually by the medical rate of inflation.

1-17. CPMC’s Cathedral Hill and St. Luke’s campuses shall deliver culturally and linguistically appropriate services that are representative of San Francisco’s diverse communities and are in accordance with the mandates, guidelines and recommendations of the National Standards on Culturally and Linguistically Appropriate Services (CLAS).

1-18. CPMC shall agree to hold its overall rate increases to Blue Shield for the City and County of San Francisco to no more than the annual medical consumer price index inflation rate.

II. Housing

II-1. CPMC shall compensate for the loss of 20 SRO units and 5 rent-controlled apartment units by means of an in-lieu payment to the Mayor’s Office of Housing in the amount of $4.5 million.

II-2. CPMC shall contribute $73 million to the City’s affordable housing fund. This represents the in-lieu fee value of inclusionary housing that would be required under the Van Ness Special Use District.

III. Workforce Development

III-1. CPMC shall make at least 40 permanent entry-level hires per year for five years through the City’s Healthcare Academy and Tenderloin/Western Addition-based nonprofits.

III-2. CPMC shall commit to achieve a goal of 30% local hire by trade for all construction jobs

III-3. CPMC shall work with its construction contractors and subcontractors to assist CityBuild in training programs.

III-4. CPMC shall sponsor and hire at least 73 new apprentice positions during construction through CityBuild

III-5. CPMC shall contribute $2 million to CBOs for both end-use and construction-related training
programs.

III-6. CPMC shall make a good faith effort to ensure that at least fourteen percent of the cost of all contracts for the Project are awarded to Contractors or Subcontractors that qualify as certified LBE's.

IV. Transit

IV-1. CPMC shall provide a contribution of approximately $10 million toward the construction of the future Van Ness and Geary Bus Rapid Transit (BRT) facilities in the immediate vicinity of Van Ness and Geary.

IV-2. For each entry and exit from the new parking garages at Cathedral Hill, CPMC shall remit the following amount to MTA:

- $0.50 for each peak hour entry or exit
- $0.25 for each off-peak hour entry or exit

IV-3. Each month CPMC shall provide a Muni Fast Pass to any employee at its Cathedral Hill facilities that requests one. CPMC will pay MTA the face value (currently $60-$70) for each pass, provided that each month CPMC is required to pay for a number of passes equal to at least 60% of the total number of employees at its Cathedral Hill facilities.

Pedestrian Safety / Traffic Improvements / Streetscape Improvements Recommendations

V-1. CPMC shall fund conversion of Eddy and Ellis Streets from one-way to two-way traffic between Leavenworth and Mason, to be implemented by the City, up to a total cost of $3.5 million.

V-2. CPMC shall fund curb bulbs, crosswalk treatments and signal modifications at a number of intersections in the Tenderloin, to be implemented by the City, up to a total cost of $3 million.

V-3. CPMC shall fund pedestrian lighting along several streets through the Tenderloin to be implemented by the City, up to a total cost of $3 million.

V-4. CPMC shall fund a “Safe Passage Program” creating a designated safe walking route for children through the Tenderloin to BART, to be implemented by the City or a community organization, up to a total cost of $500,000.

V-5. CPMC shall fund the establishment of a neighborhood CBD for the Lower Polk Neighborhood, provide capital funding up to $1 million for an initial set of physical improvements, to be implemented by the CBD, and participate in the CBD on an ongoing basis.

V-6. CPMC shall fund streetscape-related improvements in the Lower Polk neighborhood, to be implemented by the City, up to a cost of $1 million.

V-7. CPMC shall fund a series of streetscape, pedestrian safety and lighting improvements in the immediate vicinity of St. Luke’s in the Mission, to be implemented partially by the City and partially by CPMC, up to a total cost of $7 million.