

**HEALTH COMMISSION
CITY AND COUNTY OF SAN FRANCISCO
Resolution No. 19-12**

DETERMINING THAT THE CLOSURE OF THE CARDIOVASCULAR SURGERY PROGRAM AT ST. MARY'S MEDICAL CENTER WILL HAVE A DETRIMENTAL IMPACT ON HEALTH CARE SERVICES IN THE COMMUNITY.

WHEREAS, St. Mary's Medical Center (SMMC), a non-profit hospital and a part of Dignity Health, is an acute care hospital in San Francisco; and

WHEREAS, On April 29, 2019, St. Mary's notified the Health Commission of its cardiovascular surgery program closure, effective July 31st, 2019; and

WHEREAS, To be in compliance with the Community Health Care Planning Ordinance (Proposition Q), private hospitals in San Francisco are required to notify the Health Commission 90 days prior to service reductions or lease, sales or transfers of management; and

WHEREAS, Cardiovascular disease is the leading cause of death for both men and women in the United States; and

WHEREAS, Cardiovascular disease accounts for 25% of all San Francisco resident deaths; and

WHEREAS, The highest rates of hospitalization and emergency room visits due to cardiovascular disease in San Francisco is amongst residents in the southeast half of the city, among those who live in households earning less than 300% of the Federal Poverty Level, and in zip codes 94102 (Tenderloin), 94103 (South of Market), 94124 (Bayview-Hunters Point), and 94130 (Treasure Island); and

WHEREAS, Cardiovascular surgery is a procedure that most often takes place after age 60; and

WHEREAS, The greatest population growth in San Francisco is expected to be among the 65-plus age group, which is estimated to increase from 15.7% to 29% of the total San Francisco population by 2060; and

WHEREAS, Medical trends indicate that a combination of increased demand for cardiothoracic surgeons and declining enrollment in cardiovascular specialties by medical students could lead to a significant shortage in skilled cardiovascular specialists and services; and

WHEREAS, Coronary Artery Bypass Grafting (CABG) remains the "gold standard" and most common form of cardiovascular surgery performed today worldwide; and

WHEREAS, The cardiovascular surgery program at St. Mary's was once the leading open-heart hospital in San Francisco and 20 years ago completed approximately 1,200 cardiovascular surgeries annually; and

WHEREAS, The highest proportion of St. Mary's cardiovascular surgery patients are Asian (47%), which is proportionally higher than the Asian population in the city of San Francisco (35.9%); and

WHEREAS, The cardiovascular surgical team at St. Mary's has performed an average of 30 cardiovascular surgeries per year; and

WHEREAS, Other San Francisco hospitals with cardiovascular surgery programs average between 200 and 600 cardiovascular surgeries annually; and

WHEREAS, Studies have shown that hospitals with low-volume cardiovascular surgery cases are associated with poor patient outcomes; and

WHEREAS, St. Mary's made two attempts to bolster cardiovascular surgical volumes, both of which failed; and

WHEREAS, St. Mary's will continue to provide cardiac care at their campus including comprehensive catheterization procedures in their Cardiac Catheterization Lab, cardiac testing, electrophysiology studies, nuclear cardiology, peripheral vascular studies, cardiac rehabilitation, arrhythmia management, and their advanced treatment for heart attack and stroke; and

WHEREAS, The closure of the cardiovascular surgery program may have residual impacts on the type and complexity of cases able to be seen by remaining cardiologists at St. Mary's; and WHEREAS, Cardiologists at St. Mary's will refer their patients to surgeons at San Francisco and greater Bay Area surgical facilities within 50 miles of SMMC; and

WHEREAS, St. Mary's has adopted a formal procedure for cardiovascular patients who need to be medically transferred from SMMC to CPMC or UCSF, the closest hospitals to SMMC; and

WHEREAS, Both UCSF and CPMC accept insurance plans currently accepted by St. Mary's, including Medicare, Medi-Cal, and Chinese Community Health Plan; and

WHEREAS, With the closure of St. Mary's cardiovascular surgery program, cardiovascular surgery services will continue to be available in San Francisco at UCSF (Parnassus & Mission Bay), CPMC (Van Ness), and Kaiser Foundation Hospital; and

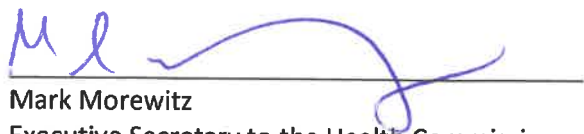
WHEREAS, In accordance with Proposition Q, the San Francisco Health Commission held public hearings on July 16, 2019 and August 6, 2019; and

NOW, THEREFORE, BE IT RESOLVED, The reduction in cardiovascular surgical services coupled with a growing older adult population will lead to an increased need for cardiovascular services and interventions in San Francisco; and be it

FURTHER RESOLVED, The closure of the cardiovascular surgery program at St. Mary's Medical Center may limit the type and complexity of patients able to be seen by the remaining cardiology physicians at St. Mary's, which in turn impacts patient care; and

FURTHER RESOLVED, The closure of the cardiovascular surgery program at St. Mary's Medical Center will/will not have a detrimental impact on the health care services in the community.

I hereby certify that the San Francisco Health Commission at its meeting of August 6, 2019 adopted the foregoing resolution.



Mark Morewitz
Executive Secretary to the Health Commission